E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single X Married filing jointly uchecked the MFS box, enter the none is a child but not your dependent	- ame of	ied filing separately your spouse. If yo		_		, ,	_		
Your first name	and mi	ddle initial	Last na	ame					Your social security number		
Abdur			Rahı	man					253-43-6651		
If joint return, sp	pouse's	first name and middle initial	Last na	ame					Spouse	's social se	curity number
Nahida			Kha	nam					618-	36-490	9
Home address	(numbe	r and street). If you have a P.O. box, see	instruct	ions.				Apt. no.	Preside	ntial Electi	on Campaign
15513 40th Dr SE Che								Check I	here if you,	or your	
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete :	spaces below.	Sta	ate	ZIP	code			ntly, want \$3
Bothell					W.	A	98	0125044	0	o this fund. ow will not	Checking a
Foreign country	/ name			Foreign province/sta	ate/coun	nty	Fore	ign postal code		or refund	
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of	any fina	ancial interest i	in any	virtual currer	ncy?	Yes	⊠ No
Standard Deduction		eone can claim:				a dependent n					
Age/Blindness	You:	Were born before January 2, 1	957 [Are blind	Spouse	e: Was bor	rn be	fore January 2	2, 1957	☐ Is b	lind
Dependents	s (see	instructions):		(2) Social secu	ırity	(3) Relationsh	nip	(4) ✓ if qu	ualifies fo	r (see instru	ictions):
If more	(1) Fi	rst name Last name		number		to you		Child tax credit		Credit for ot	her dependents
than four	Sea	n Rahman		616-94-29	901	Son					×
dependents, see instructions	s										
and check											
here ▶											
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1	1	78,040.
Attach	2a	Tax-exempt interest	2a		b٦	Taxable interes	t		. 2b)	55.
Sch. B if required.	3a	Qualified dividends	3a		b (Ordinary divide	nds		. 3b)	
required.	4a	IRA distributions STMT	4a		b 7	raxable amoun	t.		. 4b)	
	5a	Pensions and annuities	5a		b 7	Taxable amoun	t.		. 5b)	
Standard	6a	Social security benefits	_о а		b 7	Taxable amoun	t.		. 6b)	
Deduction for—	7	Capital gain or (loss). Attach Scheo	dule D	if required. If not re	equired	d, check here		▶ [7		
Single or Married filing	8	Other income from Schedule 1, line	e 10						. 8		41,163.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8.	This is your total i	ncome			1	9	1	36,932.
Married filing	10	Adjustments to income from Schee	dule 1,	line 26					. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	your a	djusted gross ind	come			1	▶ 11	1	36,932.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Sched	ule A)	12	а	59,033	1.		
Head of	b	Charitable contributions if you take	the sta	ndard deduction (s	ee inst	ructions) 12l	b				
household, \$18,800	С	Add lines 12a and 12b							. 12	c .	59,031.
If you checked	13	Qualified business income deducti	on fror	n Form 8995 or Fo	rm 899	95-A			. 13	3	0.
any box under Standard	14	Add lines 12c and 13							. 14	,	59,031.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lii	ne 11. If zero or les	ss, ente	er-0			. 15	;	77,901.

Go to www.irs.g	ov/Form	n1040 for instructions and the lates	st information.		BAA	REV 04/09/22 Intuit.cg.cfp.sp			Form 10	40 (2021)
	Firr	m's address ▶					Firm	s EIN 🕨	-	
Use Only		m's name ► Self-Pre	epared					e no.		
Preparer							1		Self-em	hioiea
Paid	Fre	parer s riarrie	Freparer's signati	uie		Date	FILIN			ployed
		one no. (425)326-9134 eparer's name	Preparer's signati	Email address		Date	PTIN		Check if:	
, 541 1000140.		////	1	Fassil a deles -	Commissione	d Sales Ass	OC (see	inst.) 🕨		
Keep a copy for your records.	,					J 0-3 -		-	ection PIN, en	ter it here
See instructions.	Spo	ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occupati		If the		nt your spouse	
Joint return?					Software En	gineering M		inst.) 🕨		
	YOU	ur signature		⊅ate	Tour occupation		1		it you an iden IN, enter it her	,
Here			Jicte. Decidiation (Date	Your occupation	oca on an inionila			er nas any kno nt vou an Iden	•
Sign		der penalties of perjury, I declare thief, they are true, correct, and comp								
	nar	me ►		no. 🕨		nun	nber (PIN)	•		
		signee's		Phone			sonal identi			
Designee		tructions					Complete b	elow.	X No	
Third Party		you want to allow another								
You Owe	38	Estimated tax penalty (see in				38		3,		
Amount	37	Amount you owe. Subtract I				36 see instructions	. ▶	37		
	36	Amount of line 34 you want a								
See instructions.	►b ►d	Account number 1 5 3								
Direct deposit?	35a	Amount of line 34 you want r Routing number 1 2 5				Checking	. ▶ ∐ Savings	35a	٥,	137.
Refund						•		35a		$\frac{137.}{157.}$
	34	If line 33 is more than line 24	33		$\frac{002.}{157.}$					
	32 33	Add lines 25d, 26, and 32. These are your total payments								002.
	31	Amount from Schedule 3, line 15								200.
	30	Recovery rebate credit. See i				30	4,200.			
	29	American opportunity credit								
	28	Refundable child tax credit or				28	1,000.			
	C	Prior year (2019) earned inco			0-1	00				
	b	Nontaxable combat pay elec								
	L	taxpayers who are at least ag		1 1	structions >					
		January 2, 2004, and you								
attach Sch. EIC.		Check here if you were b								
If you have a qualifying child,	27a	Earned income credit (EIC) .								
If you have a	26	2021 estimated tax payments						26	,	
	d	Add lines 25a through 25c .	•					25d	6,	802.
	С	Other forms (see instructions				25c				
	b	Form(s) 1099				25b				
	a	Form(s) W-2				25a	6,802.			
	25	Federal income tax withheld								<u> </u>
	24	Add lines 22 and 23. This is y						24		845.
	23	Other taxes, including self-er						23		162.
	22	Subtract line 21 from line 18.						22		683.
	21	Amount from Schedule 3, line Add lines 19 and 20						21		270.
	19 20	Nonrefundable child tax cred						19		500. 770.
	18	Add lines 16 and 17						18		953.
	17	Amount from Schedule 2, line						17	0	0.5.2
							_		٥,	955.
	16	Tax (see instructions). Check i	if any from Form	(c)· 1	4 2 1072	3 🗆		16	8	953.

Form 1040 (2021)

Page **2**

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Abdur Rahman & Nahida Khanam

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 253-43-6651

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	3	1	0.
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)	-		
3	Business income or (loss). Attach Schedule C		3	-41,163.
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, tre Schedule E		5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8p		
Z	Other income. List type and amount ▶	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10			
	1040-NR, line 8	•	10	_11 162

Page 2 Schedule 1 (Form 1040) 2021

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form	3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN	>		ı
С	Date of original divorce or separation agreement (see instructions)	-		ı
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			ı
а	Jury duty pay (see instructions)	24a		ı
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		ı
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		ı
d	Reforestation amortization and expenses	24d		ı
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		ı
f	Contributions to section 501(c)(18)(D) pension plans	24f		ı
g	Contributions by certain chaplains to section 403(b) plans	24g		ı
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		ı
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		ſ
j	Housing deduction from Form 2555	24j		ı
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		ſ
Z	Other adjustments. List type and amount ▶	24z		1
25	Total other adjustments. Add lines 24a through 24z		25	1
26	Add lines 11 through 23 and 25. These are your adjustments to			
	here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line	e 10a	26	1

SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Taxes

► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment Sequence No. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Abdur Rahman & Nahida Khanam Your social security number 253-43-6651

Pa	rt I Tax		
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17.	3	
Par	t II Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137		
6	Uncollected social security and Medicare tax on wages. Attach Form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required	8	162.
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	
12	Net investment income tax. Attach Form 8960	12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	
	(cc	ontinu	ied on page 2)

Schedule 2 (Form 1040) 2021 Page **2**

Part II Other Taxes (continued)

17	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount ▶	17a		
b	Recapture of federal mortgage subsidy. If you sold your home in 2021, see instructions	17b		
С	Additional tax on HSA distributions. Attach Form 8889	17c		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
е	Additional tax on Archer MSA distributions. Attach Form 8853 .	17e		
	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
- 1	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
Z	Any other taxes. List type and amount ▶	17z		
18	Total additional taxes. Add lines 17a through 17z		18	
19	Additional tax from Schedule 8812		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, 18, and 19. These are your total other and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21	 162.

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

OMB No. 1545-0074

2021

Attachment
Seguence No. 03

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Abdur Rahman & Nahida Khanam

Attachment Sequence No. 03 Your social security number

253-43-6651

Par	t I Nonrefundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses from Form 2441, Form 2441	ine 11. Attach	2	
3	Education credits from Form 8863, line 19		3	1,500.
4	Retirement savings contributions credit. Attach Form 8880		4	
5	Residential energy credits. Attach Form 5695		5	270.
6	Other nonrefundable credits:			
а	General business credit. Attach Form 3800 6	а		
b	Credit for prior year minimum tax. Attach Form 8801	o		
С	Adoption credit. Attach Form 8839	С		
d	Credit for the elderly or disabled. Attach Schedule R 6	b		
е	Alternative motor vehicle credit. Attach Form 8910 6	Э		
f	Qualified plug-in motor vehicle credit. Attach Form 8936 6	f		
g	Mortgage interest credit. Attach Form 8396	9		
h	District of Columbia first-time homebuyer credit. Attach Form 8859 6	า		
i	Qualified electric vehicle credit. Attach Form 8834 6	i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911 6	j		
k	Credit to holders of tax credit bonds. Attach Form 8912 6	K		
1	Amount on Form 8978, line 14. See instructions 6	I		
Z	Other nonrefundable credits. List type and amount ▶6	Z		
7	Total other nonrefundable credits. Add lines 6a through 6z		7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-S line 20		8	1,770.

Schedule 3 (Form 1040) 2021 Page **2**

Par	Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b		
С	Health coverage tax credit from Form 8885	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g		
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h		
Z	Other payments or refundable credits. List type and amount ▶	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	

SCHEDULE A (Form 1040)

Department of the Treasury

Name(s) shown on Form 1040 or 1040-SR

Itemized Deductions

▶ Go to www.irs.gov/ScheduleA for instructions and the latest information. ► Attach to Form 1040 or 1040-SR.

Your social security number

Internal Revenue Service (99) Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Attachment Sequence No. 07

OMB No. 1545-0074

Abdur Rahman & Nahida Khanam 253-43-6651 Caution: Do not include expenses reimbursed or paid by others. Medical and 1 Medical and dental expenses (see instructions) 1 33,557. **Dental** 2 Enter amount from Form 1040 or 1040-SR, line 11 2 136, 932. **Expenses 3** Multiply line 2 by 7.5% (0.075) 3 10,270. 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-. 23,287. **Taxes You** 5 State and local taxes. **Paid** a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes. 5a 5,362. **b** State and local real estate taxes (see instructions) 5_b 12,051. c State and local personal property taxes 5c 1,414. 5d 18,827. e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing 5e 10,000. 6 Other taxes. List type and amount ▶ 6 10,000. 8 Home mortgage interest and points. If you didn't use all of your home Interest You Paid mortgage loan(s) to buy, build, or improve your home, see Caution: Your mortgage interest a Home mortgage interest and points reported to you on Form 1098. deduction may be limited (see 8a 14,528. instructions). b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., -----8b c Points not reported to you on Form 1098. See instructions for special 8,577. 8c d Mortgage insurance premiums (see instructions) 8d 0. 23,105. 9 Investment interest. Attach Form 4952 if required. See instructions . 9 Ω **10** Add lines 8e and 9 23,105. 11 Gifts by cash or check. If you made any gift of \$250 or more, see Gifts to Charity 11 300. Caution: If you 12 Other than by cash or check. If you made any gift of \$250 or more, made a gift and see instructions. You **must** attach Form 8283 if over \$500. . . . 12 649. got a benefit for it, see instructions. 13 2,639. Casualty and 15 Casualty and theft loss(es) from a federally declared disaster (other than net qualified Theft Losses disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See 15 16 Other—from list in instructions. List type and amount ▶ _____ Other Itemized **Deductions** 16 Total 17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on 59,031. 17 Itemized Deductions 18 If you elect to itemize deductions even though they are less than your standard deduction,

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074

Department of the Treasury

▶ Go to www.irs.gov/ScheduleC for instructions and the latest information. Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065. Attachment Sequence No. **09**

	of proprietor ır Rahman						security number (SSN) -43-6651		
ADG	Principal business or profession	n. incl	uding product or service (se	e instri	ictions)		er code from instructions		
- •	Software Consultan			J 10tl		► 5 4 1 5 1 0			
С	Business name. If no separate		ess name leave hlank			D Emi	ployer ID number (EIN) (see instr.		
-	Onamika Technologi						2 9 8 2 4 3 9		
E				onet	nollow Drive, Apt 1024	B.			
-	City, town or post office, state								
F	Accounting method: (1)				D41 (
G					2021? If "No," see instructions for li	mit on l	osses X Vas No		
Н									
			-		n(s) 1099? See instructions				
Pari		requi	1001 0111(3) 1000:	• •			163 _ 140		
1 2	Gross receipts or sales. See in Form W-2 and the "Statutory Returns and allowances	employ	yee" box on that form was c	hecked	this income was reported to you or	1 2			
3									
4									
5	•								
6			•		refund (see instructions)				
7 Dort	Gross income. Add lines 5 ar		for business use of you			7			
Part		1	470.		-	40	1 550		
8	Advertising	8	470.	18	Office expense (see instructions)		1,550.		
9	Car and truck expenses (see			19	Pension and profit-sharing plans	19			
40	instructions)	9		20	Rent or lease (see instructions):	00-			
10	Commissions and fees .	10		a	Vehicles, machinery, and equipmen				
11	Contract labor (see instructions)	11		b	Other business property		1,200.		
12 13	Depletion	12		21 22	Repairs and maintenance Supplies (not included in Part III)		1,050.		
	expense deduction (not			23	Taxes and licenses		3,350.		
	included in Part III) (see instructions)	13	1,039.	24	Travel and meals:	25	3,330.		
11	,	13	1,030.	a	Travel	24a	7,050.		
14	Employee benefit programs (other than on line 19) .	14		b	Deductible meals (see	240	7,030.		
15	Insurance (other than health)	15		В	instructions)	24b	1,650.		
16	Interest (see instructions):	-10		25	Utilities		12,770.		
а	Mortgage (paid to banks, etc.)	16a		26	Wages (less employment credits)	26	,		
b	Other	16b	1,100.	27a	, ,	27a	2,000.		
17	Legal and professional services	17	2,050.	1	Reserved for future use		,		
28		ses fo			3 through 27a ▶		35,279.		
29	Tentative profit or (loss). Subti	ract lin	e 28 from line 7			29	-35,279.		
30	Expenses for business use of unless using the simplified method filers only	thod.	See instructions.		nses elsewhere. Attach Form 8829				
	and (b) the part of your home				. Use the Simplified				
	Method Worksheet in the insti	ruction	s to figure the amount to en	ter on I	ine 30	30	5,884.		
31	Net profit or (loss). Subtract	line 30	from line 29.		3				
	• If a profit, enter on both Sch checked the box on line 1, see		, , ,		′ ′ ′	31	-41,163.		
	• If a loss, you must go to line	e 32.			J				
32	If you have a loss, check the beautiful of the lift you checked 32a, enter the SE, line 2. (If you checked the	e loss	on both Schedule 1 (Form	1040), I	line 3, and on Schedule				
	Form 1041, line 3. • If you checked 32b, you mu	st atta	ch Form 6198. Your loss ma	ay be lii	mited.	32b	Some investment is not at risk.		

BAA

Schedule C (Form 1040) 2021 Page **2**

Part	Cost of Goods Sold (see instructions)		
33	Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (attach or market)	explanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation	🗌 Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation 3	5	
36	Purchases less cost of items withdrawn for personal use	6	
37	Cost of labor. Do not include any amounts paid to yourself	7	
38	Materials and supplies	8	
39	Other costs	9	
40	Add lines 35 through 39	0	
41	Inventory at end of year	1	
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	2	
Part	Information on Your Vehicle. Complete this part only if you are claiming car or true are not required to file Form 4562 for this business. See the instructions for line 13 to Form 4562.		
43	When did you place your vehicle in service for business purposes? (month/day/year)		
44	Of the total number of miles you drove your vehicle during 2021, enter the number of miles you used your vehicle	cle for:	
а	Business b Commuting (see instructions) c Other	er	
45	Was your vehicle available for personal use during off-duty hours?	🗌 Yes	☐ No
46	Do you (or your spouse) have another vehicle available for personal use?	🗌 Yes	☐ No
47a	Do you have evidence to support your deduction?	🗌 Yes	☐ No
b Part	If "Yes," is the evidence written?		☐ No
Tare	Care Expenses. List below business expenses not included on lines of 20 of line of	0.	
Cor	ntinuing education courses		500.
Dor	main registration and network service		500.
App	store fees		275.
Cre	edit card fees		200.
Bar	nk service charge		125.
Pri	inting and copying		100.
sta	artup costs		100.
Tax	k return software	.	200.
	Total other expenses. Enter here and on line 27a		2 000

Department of the Treasury Internal Revenue Service (99)

Name of individual subject to additional tax. If married filing jointly, see instructions.

Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/Form5329 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. 29 Your social security number

Abdı	ur Rahman				253-43	3-6651
		Home address (number and street), or P.O. box is	f mail is not delivered to	your home		Apt. no.
if You Form	Your Address Only Are Filing This by Itself and Not Your Tax Return	City, town or post office, state, and ZIP code. If y spaces below. See instructions.	ou have a foreign addre	ess, also complete the		an amended neck here ▶ □
		Foreign country name	Foreign province/stat	e/county	Foreign po	stal code
		10% tax on the full amount of the earl without filing Form 5329. See instruction		ou may be able to re	eport this	tax directly on
Part	disaster distribution endowment contraction have to complete	on Early Distributions. Complete this on) before you reached age 59½ from act (unless you are reporting this tax diffusion part to indicate that you qualify for stributions. See instructions.	n a qualified retir rectly on Schedule	ement plan (includi e 2 (Form 1040)—se	ng an IF ee above)	RA) or modified). You may also
1	Early distributions include	dible in income (see instructions). For Ro	th IRA distributions	s, see instructions.	1	
2	Early distributions include	led on line 1 that are not subject to the a	dditional tax (see	instructions).		
	Enter the appropriate ex	ception number from the instructions:			2	
3					3	
4		% (0.10) of line 3. Include this amount o	·	·	4	
		he amount on line 3 was a distribution fount on line 4 instead of 10%. See instru		A, you may have to		
Part	II Additional Tax of	on Certain Distributions From Educ	cation Accounts	and ABLE Accor	unts. Co	mplete this part
		amount in income, on Schedule 1 (For				
	(ESA) or a qualified	tuition program (QTP), or on Schedule 1	I (Form 1040), line	8p, from an ABLE a	ccount.	
5	Distributions included in	income from a Coverdell ESA, a QTP, o	r an ABLE accoun	t	5	
6	Distributions included or	n line 5 that are not subject to the addition	onal tax (see instru	ctions)	6	
7	Amount subject to addit	ional tax. Subtract line 6 from line 5 .			7	
8		% (0.10) of line 7. Include this amount o		•	8	
Part		on Excess Contributions to Tradition	·			ed more to your
		2021 than is allowable or you had an am		-		
9	•	outions from line 16 of your 2020 Form 532	1	. If zero, go to line 15	9	3,400.
10	-	contributions for 2021 are less than y		40 6 700		
44		see instructions. Otherwise, enter -0	_	10 6,700.	-	
11		ributions included in income (see instruc	<i>′</i> ⊢	11 12	-	
12 13	Add lines 10, 11, and 12	or year excess contributions (see instruc		12	12	6 700
14	, ,	outions. Subtract line 13 from line 9. If ze	· · · · · · · ·		13	6,700.
15	,	2021 (see instructions)	,		15	0.
16		ns. Add lines 14 and 15			16	0.
17		(0.06) of the smaller of line 16 or the value				
.,		contributions made in 2022). Include this am			17	0.
Part		on Excess Contributions to Roth I				
		is allowable or you had an amount on lir				7.0 to youo
18		outions from line 24 of your 2020 Form 532			18	0.
19	•	utions for 2021 are less than your maxin		40		
20		tions. Otherwise, enter -0	_	19		
20		your Roth IRAs (see instructions)	_	20	21	
21 22		outions. Subtract line 21 from line 18. If z			21	
23	•				22	2,700.
		2021 (see instructions)			24	
24						2,700.
25		6 (0.06) of the smaller of line 24 or the va tributions made in 2022). Include this amo			25	162.

Part '					ntributions to Coverdell ESAs. Co than is allowable or you had an amount					,
26					of your 2020 Form 5329. See instructions				26	1 0020.
27					ESAs for 2021 were less than the					
					tructions. Otherwise, enter -0	27				
28					· · · · · · · · · · · · · · · · · · ·	28				
29									29	
30					line 29 from line 26. If zero or less, enter				30	
31		-			ctions)				31	
32			·		and 31				32	
33					smaller of line 32 or the value of you					
			, ,		tributions made in 2022). Include this an					
			, ,						33	
Part \					tributions to Archer MSAs. Complet				ır emp	oloyer contributed
					than is allowable or you had an amount					
34					of your 2020 Form 5329. See instructions				34	
35					for 2021 are less than the maximum					
						35				
36					· •	36				
37			•						37	
38					line 37 from line 34. If zero or less, enter				38	
39		•			ctions)				39	
40			•		and 39				40	
41					smaller of line 40 or the value of you					
••			, ,		tributions made in 2022). Include this ar					
			, ,						41	
Part \					ntributions to Health Savings Ac				nplete	this part if you
					employer contributed more to your HS					
			ne 49 of your 2020 F							•
42	Enter	the excess of	contributions from lin	ne 4	18 of your 2020 Form 5329. If zero, go to	line 47			42	
43	If the	contributio	ns to vour HSAs	for	2021 are less than the maximum					
					Otherwise, enter -0	43				
44						44				
45	Add I	ines 43 and 4	14						45	
46	Prior	year excess	contributions. Subtr	act l	line 45 from line 42. If zero or less, enter	· -0			46	
47	Exces	ss contributio	ons for 2021 (see ins	truc	ctions)				47	
48	Total	excess conti	ributions. Add lines	46 a	and 47				48	
49	Addit	i onal tax. Er	nter 6% (0.06) of the	sm	naller of line 48 or the value of your HS	SAs on Dec	cemb	er 31,		
					n 2022). Include this amount on Schedule				49	
Part V	Ш	Additional	Tax on Excess C	ont	tributions to an ABLE Account. Co	mplete th	is pai	rt if con	tributi	ons to your ABLE
		account for 2	2021 were more than	ı is a	allowable.					
50	Exces	ss contributio	ons for 2021 (see ins	truc	ctions)				50	
51	Addit	tional tax. E	inter 6% (0.06) of t	he s	smaller of line 50 or the value of you	ur ABLE a	ccou	ınt on		
	Dece	mber 31, 202	21. Include this amo	unt d	on Schedule 2 (Form 1040), line 8				51	
Part I	X	Additional	Tax on Excess A	ccu	umulation in Qualified Retirement	Plans (In	clud	ing IR	As). C	complete this par
		if you did not	t receive the minimu	m re	equired distribution from your qualified r	etirement	plan.			
52	Minim	num required	distribution for 202	1 (se	ee instructions)				52	
53	Amou	unt actually d	istributed to you in 2	2021	1				53	
54	Subtr	act line 53 fr	om line 52. If zero o	les	ss, enter -0				54	
55	Addit	t ional tax. Er	` '		4. Include this amount on Schedule 2 (Fe				55	
Sign H	lere O	nly if You	Under penalties of perjury	, I de	leclare that I have examined this form, including accomplete. Declaration of preparer (other than taxpayer) is	mpanying atta	chmen	its, and to	the bes	it of my knowledge and
Are Fil	ing Th	nis Form	bellet, it is true, correct, ar	iu col	omplete. Declaration of preparer (other than taxpayer) is	Daseu OII all I	поппа	LIOIT OF WIT	cii prepa	arer rias arry Kriowiedge
by Itse	elf and	Not With					\ _			
Your T	ax Re	eturn	Your signature				D	ate		
Paid		Print/Type prep	parer's name		Preparer's signature	Date		Check	if	PTIN
_	arar						_	self-emp		
Prepa		Firm's name ▶	·				Firm'	s EIN ▶		
Use (וווע	Firm's address	>				Phon	ie no.		

SCHEDULE 8812 (Form 1040)

Department of the Treasury

Credits for Qualifying Children and Other Dependents

► Attach to Form 1040, 1040-SR, or 1040-NR.

1040 1040-SR 1040-NR 8812

OMB No. 1545-0074

2021

Attachment Sequence No. **47**

Your social security number

Internal Revenue Service (99)

Name(s) shown on return

► Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Abdur Rahman & Nahida Khanam 253-43-6651 Child Tax Credit and Credit for Other Dependents Part I-A 1 Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR. 1 136,932. Enter the amounts from lines 45 and 50 of your Form 2555 b 2h 0. c Enter the amount from line 15 of your Form 4563 2d 0. d 3 3 136,932. Number of qualifying children under age 18 with the required social security number 4a 0. Number of children included on line 4a who were under age 6 at the end of 2021. 0. \mathbf{c} 0. 5 If line 4a is more than zero, enter the amount from the Line 5 Worksheet; otherwise, enter -0-. 5 Number of other dependents, including any qualifying children who are not under age 6 18 or who do not have the required social security number Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4a. 7 7 500. 8 8 500. Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 9 400,000. Subtract line 9 from line 3. 10 • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 10 0. 0._ 11 11 12 12 500. 13 Check all the boxes that apply to you (or your spouse if married filing jointly). A Check here if you (or your spouse if married filing jointly) had a principal place of abode in the United States B Check here if you (or your spouse if married filing jointly) were a bona fide resident of Puerto Rico for 2021 🗌 Part I-B Filers Who Check a Box on Line 13 Caution: If you did not check a box on line 13, do not complete Part I-B; instead, skip to Part I-C. Enter the smaller of line 7 or line 12 14a 500. 14b 0. If line 14a is zero, enter -0-; otherwise, enter the amount from the Credit Limit Worksheet A. 14c C 7,183. 14d 500. Add lines 14b and 14d . 14e 500. Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments 14f 0. Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed. Subtract line 14f from line 14e. If zero or less, enter -0- on lines 14g through 14i and go to Part III 14g 500. Enter the smaller of line 14d or line 14g. This is your credit for other dependents. Enter this amount on line 500. 14h Subtract line 14h from line 14g. This is your refundable child tax credit. Enter this amount on line 28 of 0.

Schedule 8812 (Form 1040) 2021

Part	I-C Filers Who Do Not Check a Box on Line 13	
Cautio	on: If you checked a box on line 13, do not complete Part I-C.	
15a	Enter the amount from the Credit Limit Worksheet A	15a
b	Enter the smaller of line 12 or line 15a	15b
	Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items.	
	1. You are not filing Form 2555.	
	2. Line 4a is more than zero.	
	3. Line 12 is more than line 15a.	
c	If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0	15c
d	Add lines 15b and 15c	15d
e	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0	15e
	filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.	
f	Subtract line 15e from line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III	15f
	Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax credit and credit for other	131
g	dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR	15g
h	Subtract line 15g from line 15f. This is your additional child tax credit. Enter this amount on line 28 of your	151
Dort	Form 1040, 1040-SR, or 1040-NR	15h
Part		
	on: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit. on: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child ta	v anadit
	Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27	16a
16a		10a
b	Number of qualifying children under 18 with the required social security number: x \$1,400. Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27	16b
	TIP: The number of children you use for this line is the same as the number of children you used for line 4a.	100
17	Enter the smaller of line 16a or line 16b	17
17 18a	Earned income (see instructions)	17
b	Nontaxable combat pay (see instructions)	-
19	Is the amount on line 18a more than \$2,500?	
17	No. Leave line 19 blank and enter -0- on line 20.	
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19	
20	Multiply the amount on line 19 by 15% (0.15) and enter the result	20
	Next. On line 16b, is the amount \$4,200 or more?	
	No. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.	
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27. Otherwise, go to line 21.	
Part	II-B Certain Filers Who Have Three or More Qualifying Children	
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see instructions	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22	
23	Add lines 21 and 22	
24	1040 and	
	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27a, and Schedule 3 (Form 1040), line 11.	
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.	
25	Subtract line 24 from line 23. If zero or less, enter -0	25
26	Enter the larger of line 20 or line 25	26
-	Next enter the smaller of line 17 or line 26 on line 27	
Part	II-C Additional Child Tay Credit	
27	Enter this amount on line 15c	27

Schedule 8812 (Form 1040) 2021 Page **3**

Part	Additional Tax (use only if line 14g or line 15f, whichever applies, is zero)		
28a	Enter the amount from line 14f or line 15e, whichever applies	28a	
b	Enter the amount from line 14e or line 15d, whichever applies	28b	
29	Excess advance child tax credit payments. Subtract line 28b from line 28a. If zero, stop; you do not owe the		
	additional tax	29	
30	Enter the number of qualifying children taken into account in determining the annual advance amount you received for 2021. See your Letter 6419 for this number. If you are missing your Letter 6419, you are filing a joint return, or you received more than one Letter 6419, see the instructions before entering a number on this line	30	
	Caution: If the amount on this line doesn't match the number of qualifying children reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.		
31	Enter the smaller of line 4a or line 30	31	
32	Subtract line 31 from line 30. If zero, skip to line 40 and enter the amount from line 29; otherwise, continue to line 33	32	
33	Enter the amount shown below for your filing status.		
	• Married filing jointly or Qualifying widow(er)—\$60,000		
	• Head of household—\$50,000		
	• All other filing statuses—\$40,000	33	
34	Subtract line 33 from line 3. If zero or less, enter -0	34	
35	Enter the amount from line 33	35	
36	Divide line 34 by line 35. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or		
	more, enter 1.000	36	
37	Multiply line 32 by \$2,000	37	
38	Multiply line 37 by line 36	38	
39	Subtract line 38 from line 37	39	
40	Subtract line 39 from line 29. If zero or less, enter -0 This is your additional tax. If more than zero, enter		
	this amount on Schedule 2 (Form 1040), line 19	40	

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Schedule 8812 (Form 1040) 2021

8606

Department of the Treasury Internal Revenue Service (99)

Nondeductible IRAs

OMB No. 1545-0074 2021 Attachment

▶ Go to www.irs.gov/Form8606 for instructions and the latest information. ► Attach to 2021 Form 1040, 1040-SR, or 1040-NR.

Name. If married, file a separate form for each spouse required to file 2021 Form 8606. See instructions.

Sequence No. 48

Your social security number

253-43-6651 Abdur Rahman Home address (number and street, or P.O. box if mail is not delivered to your home) Apt. no. Fill in Your Address Only if You Are City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instructions). Filing This Form by **Itself and Not With** Foreign country name Foreign province/state/county Foreign postal code **Your Tax Return** Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, SEP, and SIMPLE IRAs Part I Complete this part only if one or more of the following apply. • You made nondeductible contributions to a traditional IRA for 2021. • You took distributions from a traditional, SEP, or SIMPLE IRA in 2021 and you made nondeductible contributions to a traditional IRA in 2021 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2021 Forms 8915-D and 8915-F)), qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions. • You converted part, but not all, of your traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2021 and you made nondeductible contributions to a traditional IRA in 2021 or an earlier year. Enter your nondeductible contributions to traditional IRAs for 2021, including those made for 2021 1 3,700. 2 2 0. 3 3,700. 3 → Enter the amount from line 3 on line 14. In 2021, did you take a distribution No -Do not complete the rest of Part I. from traditional, SEP, or SIMPLE IRAs. or make a Roth IRA conversion? Yes — For the first of the Enter those contributions included on line 1 that were made from January 1, 2022, through April 18, 2022 4 4 5 5 Enter the value of **all** your traditional, SEP, and SIMPLE IRAs as of December 31, 2021, plus any outstanding rollovers. Subtract any repayments of qualified disaster distributions (see 2021 Forms 8915-D and 8915-F) 6 Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2021. Do not include rollovers (other than repayments of qualified disaster distributions (see 2021 Forms 8915-D and 8915-F)), qualified charitable distributions, a one-time distribution to fund an HSA, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA contributions (see Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2021. Also, enter this amount on line 16 8 Add lines 6, 7, and 8 9 9 Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 10 10 places. If the result is 1.000 or more, enter "1.000" Multiply line 8 by line 10. This is the nontaxable portion of the amount you 11 converted to Roth IRAs. Also, enter this amount on line 17 11 Multiply line 7 by line 10. This is the nontaxable portion of your distributions 12 Add lines 11 and 12. This is the nontaxable portion of all your distributions 13 13 Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2021 and earlier years . 14 3,700. 14 15a b Enter the amount on line 15a attributable to gualified disaster distributions from 2021 Forms 8915-D and 8915-F (see instructions). Also, enter this amount on 2021 Form 8915-D, line 23; or 2021 Form 15b 0. c Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on 2021 0. 15c Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age

591/2 at the time of the distribution. See instructions.

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- aum 0/	206 (0001)			5 0
Part	306 (2021)	ersions From Traditional, SEP, or SIMPLE IRAs to Roth IRAs		Page 2
rait		is part if you converted part or all of your traditional, SEP, and SIMPLE IRAs to a Roth	IRA in	2021.
16	If you completed	Part I, enter the amount from line 8. Otherwise, enter the net amount you converted EP, and SIMPLE IRAs to Roth IRAs in 2021	16	
17		Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on ctions)	17	
18		Subtract line 17 from line 16. If more than zero, also include this amount on 2021 SR, or 1040-NR, line 4b	18	ı
Part	III Distributio	ns From Roth IRAs		
	a rollover (o	is part only if you took a distribution from a Roth IRA in 2021. For this purpose, a distri- ther than a repayment of a qualified disaster distribution (see 2021 Forms 8915-D stribution, one-time distribution to fund an HSA, recharacterization, or return of ce	and 8	3915-F)), qualified
19	homebuyer distrib	onqualified distributions from Roth IRAs in 2021, including any qualified first-time outions, and any qualified disaster distributions (see instructions). Also, see 2021 d 8915-F	19	
20		e homebuyer expenses (see instructions). Do not enter more than \$10,000 reduced your prior qualified first-time homebuyer distributions	20	
21	Subtract line 20 fr	om line 19. If zero or less, enter -0	21	
22	Enter your basis in	n Roth IRA contributions (see instructions). If line 21 is zero, stop here	22	
23	may be subject to	om line 21. If zero or less, enter -0- and skip lines 24 and 25. If more than zero, you an additional tax (see instructions)	23	
24	•	n conversions from traditional, SEP, and SIMPLE IRAs and rollovers from qualified a Roth IRA. See instructions	24	
25a	Subtract line 24 fr	om line 23. If zero or less, enter -0- and skip lines 25b and 25c	25a	
b	and 8915-F (see	on line 25a attributable to qualified disaster distributions from 2021 Forms 8915-D nstructions). Also, enter this amount on 2021 Form 8915-D, line 24; or 2021 Form 8 applicable	25b	
С		Subtract line 25b from line 25a. If more than zero, also include this amount on 2021 SR, or 1040-NR, line 4b	25c	
Are Fi	Here Only if You iling This Form elf and Not With Tax Return	Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whi		

Paid Preparer Use Only

Your signature Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN Firm's name ▶ Firm's EIN ▶ Firm's address ▶ Phone no.

Education Credits (American Opportunity and Lifetime Learning Credits)

► Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074 Attachment Sequence No. **50**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Abdur Rahman & Nahida Khanam

▶ Go to www.irs.gov/Form8863 for instructions and the latest information.

Your social security number 253-43-6651



Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

Part	Defundable American Opportunity Credit			
Part 1	• • • • • • • • • • • • • • • • • • • •	L line 20	1	2 500
-	After completing Part III for each student, enter the total of all amounts from all Parts II	i, iii e 30	1	2,500.
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	180,000.		
3	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter	136,932.		
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit	43,068.		
5 6	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	20,000.		
	• Equal to or more than line 5, enter 1.000 on line 6	.)		
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rounded		6	1.000
	at least three places)			
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year conditions described in the instructions, you can't take the refundable American opposkip line 8, enter the amount from line 7 on line 9, and check this box	r and meet the portunity credit;	7	2,500.
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the an			2,300.
0	on Form 1040 or 1040-SR, line 29. Then go to line 9 below.		8	1,000.
Part				
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see i	nstructions) .	9	1,500.
10	After completing Part III for each student, enter the total of all amounts from all Par	,		
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19		10	
11	Enter the smaller of line 10 or \$10,000		11	
12	Multiply line 11 by 20% (0.20)		12	
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)			
14	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter			
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19			
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)			
17	If line 15 is:			
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18			
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to places)		17	
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see in		18	
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit	,		
-	instructions) here and on Schedule 3 (Form 1040), line 3	,	19	1,500.

Name(s) shown on return	Your social security number
Abdur Dahman & Nahida Khanam	253-43-6651



Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

Par	Student and Educational Institution Information	n. Se		
20	Student name (as shown on page 1 of your tax return) Sean	21	Student social security number (as show your tax return)	n on page 1 of
	Rahman		616-94-2901	
22	Educational institution information (see instructions)			
а	. Name of first educational institution	b	. Name of second educational institution (f any)
	University of Washington - Bothell campus			
(Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. University of Washington, Student Fiscal Svcs, Box 355871 	(1	 Address. Number and street (or P.O. b post office, state, and ZIP code. If a for instructions. 	
	Seattle WA 98195			
(2) Did the student receive Form 1098-T from this institution for 2021? X Yes □ No	(2	2) Did the student receive Form 1098-T from this institution for 2021?	☐ Yes ☐ No
(Did the student receive Form 1098-T from this institution for 2020 with box Yes No 7 checked?	(;	Did the student receive Form 1098-T from this institution for 2020 with box 7 checked?	☐ Yes ☐ No
(4	4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.		4) Enter the institution's employer ide (EIN) if you're claiming the American o if you checked "Yes" in (2) or (3). Yo from Form 1098-T or from the institution	pportunity credit or ou can get the EIN
	91-6001537			
23	Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2021?		Yes — Stop! Go to line 31 for this student. X No — G	o to line 24.
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2021 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	×	Yes — Go to line 25. ☐ No — S for this s	t op! Go to line 31 student.
25	Did the student complete the first 4 years of postsecondary education before 2021? See instructions.		Yes — Stop! Go to line 31 for this X No — G student.	o to line 26.
26	Was the student convicted, before the end of 2021, of a felony for possession or distribution of a controlled substance?		Yes — Stop! Go to line 31 for this student.	omplete lines 27 30 for this student.
CAUT				ne same year. If
	American Opportunity Credit			
27	Adjusted qualified education expenses (see instructions). Dor			4,000.
28	Subtract \$2,000 from line 27. If zero or less, enter -0			,
29	Multiply line 28 by 25% (0.25)			500.
30	If line 28 is zero, enter the amount from line 27. Otherwise, enter the result. Skip line 31. Include the total of all amounts f		*	2,500.
	Lifetime Learning Credit		· · · · · · · · · · · · · · · · · · ·	
31	Adjusted qualified education expenses (see instructions). Incl	lude t	ne total of all amounts from all Parts	

Investment Interest Expense Deduction

► Go to www.irs.gov/Form4952 for the latest information.

► Attach to your tax return.

2021
Attachment
Sequence No. 51

Identifying number

OMB No. 1545-0191

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Abdur Rahman & Nahida Khanam 253-43-6651 Part I **Total Investment Interest Expense** 1 Investment interest expense paid or accrued in 2021 (see instructions) 1 4,800. 2 2 10,000. 3 Total investment interest expense. Add lines 1 and 2 3 14,800. Part II **Net Investment Income** Gross income from property held for investment (excluding any net gain from 505. 4a 4b 505. 4c Net gain from the disposition of property held for investment 4d Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions 4e 4f 0. Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 505. 4h 5 900. Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0- 6 6 0. Part III **Investment Interest Expense Deduction** Disallowed investment interest expense to be carried forward to 2022. Subtract line 6 from line 7 14,800. 8 **Investment interest expense deduction.** Enter the **smaller** of line 3 or line 6. See instructions For Paperwork Reduction Act Notice, see page 4. Form **4952** (2021) BAA REV 04/09/22 Intuit.cg.cfp.sp

Qualified Business Income Deduction Simplified Computation

► Attach to your tax return.

▶ Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

Attachment Sequence No. 55

Internal Revenue Service Name(s) shown on return

Department of the Treasury

Abdur Rahman & Nahida Khanam

Your taxpayer identification number 253-43-6651

Note. You can claim the qualified business income deduction only if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

16 17	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater that Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a		16	(100,415.)
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also the applicable line of your return (see instructions)		15	0.
14	Income limitation. Multiply line 13 by 20% (0.20)		14	15,580.
13	Subtract line 12 from line 11. If zero or less, enter -0	77,901.		
12	Net capital gain (see instructions)	12 0.		
11	Taxable income before qualified business income deduction (see instructions)	11 77,901.		
10	Qualified business income deduction before the income limitation. Add lines 5 an	d 9	10	0.
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 ()		
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6		
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	0.
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4 0.		
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2 -41,163. 3 (59,252.)		
iv				
iii				
ii_				
i	Onamika Technologies, LLC	46-2982439		-41,163.
1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number		Qualified business income or (loss)

(Rev. December 2021)
Department of the Treasury
Internal Revenue Service

Noncash Charitable Contributions

► Attach one or more Forms 8283 to your tax return if you claimed a total deduction of over \$500 for all contributed property.

▶ Go to www.irs.gov/Form8283 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. **155**

Name(s) shown on your income tax return

Abdur Rahman & Nahida Khanam

Identifying number 253-43-6651

Note: Figure the amount of your contribution deduction before completing this form. See your tax return instructions. Section A. Donated Property of \$5,000 or Less and Publicly Traded Securities - List in this section only an item (or a group of similar items) for which you claimed a deduction of \$5,000 or less. Also list publicly traded securities and certain other property even if the deduction is more than \$5,000. See instructions. Information on Donated Property—If you need more space, attach a statement. Part I (a) Name and address of the (b) If donated property is a vehicle (see instructions). (c) Description and condition of donated property 1 donee organization check the box. Also enter the vehicle identification (For a vehicle, enter the year, make, model, and number (unless Form 1098-C is attached). mileage. For securities and other property, see instructions.) Salvation Army Regular home items 3rd avenue Α seattle WA 98109 Wheels and Deals Clothing and Household items В Mobile Seattle WA 98109 C D Ε Note: If the amount you claimed as a deduction for an item is \$500 or less, you do not have to complete columns (e), (f), and (g). (d) Date of the (e) Date acquired (f) How acquired (g) Donor's cost (h) Fair market value (i) Method used to determine contribution by donor (mo., yr.) by donor or adjusted basis (see instructions) the fair market value Δ 06/07/2021 250 Thrift shop value В 02/02/2021 399 Present value C D Ε Section B. Donated Property Over \$5,000 (Except Publicly Traded Securities, Vehicles, Intellectual Property or **Inventory Reportable in Section A)** — Complete this section for one item (or a group of similar items) for which you claimed a deduction of more than \$5,000 per item or group (except contributions reportable in Section A). Provide a separate form for each item donated unless it is part of a group of similar items. A qualified appraisal is generally required for items reportable in Section B. See instructions. Information on Donated Property Part I Check the box that describes the type of property donated. a Art* (contribution of \$20,000 or more) e Other Real Estate Vehicles ☐ Qualified Conservation Contribution Securities ☐ Clothing and household items ☐ Collectibles** **c** Equipment **d** Art* (contribution of less than \$20,000) h Intellectual Property * Art includes paintings, sculptures, watercolors, prints, drawings, ceramics, antiques, decorative arts, textiles, carpets, silver, rare manuscripts, historical memorabilia, and other similar objects. **Collectibles include coins, stamps, books, gems, jewelry, sports memorabilia, dolls, etc., but not art as defined above. Note: In certain cases, you must attach a qualified appraisal of the property. See instructions. 3 (a) Description of donated property (if you need (b) If any tangible personal property or real property was donated, give a brief (c) Appraised fair more space, attach a separate statement) summary of the overall physical condition of the property at the time of the gift. market value Δ В C (h) Amount claimed (i) Date of (d) Date acquired (e) How acquired by donor (f) Donor's cost or (g) For bargain sales, by donor adjusted basis enter amount as a deduction contribution (mo., yr.) received (see instructions) (see instructions) Α

В

Form 8283 (Rev. 12-2021) Page 2 Name(s) shown on your income tax return Identifying number 253-43-6651 Abdur Rahman & Nahida Khanam Partial Interests and Restricted Use Property (Other Than Qualified Conservation Contributions) -Part II Complete lines 4a through 4e if you gave less than an entire interest in a property listed in Section B, Part I. Complete lines 5a through 5c if conditions were placed on a contribution listed in Section B, Part I; also attach the required statement. See instructions. Enter the letter from Section B, Part I that identifies the property for which you gave less than an entire interest ▶ If Section B, Part II applies to more than one property, attach a separate statement. Total amount claimed as a deduction for the property listed in Section B, Part I: (1) For this tax year . . . (2) For any prior tax years ▶ Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization in Section B, Part V, below): Name of charitable organization (donee) Address (number, street, and room or suite no.) City or town, state, and ZIP code For tangible property, enter the place where the property is located or kept Name of any person, other than the donee organization, having actual possession of the property ▶ Yes No 5a Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property? Did you give to anyone (other than the donee organization or another organization participating with the donee organization in cooperative fundraising) the right to the income from the donated property or to the possession of the property, including the right to vote donated securities, to acquire the property by purchase or otherwise, or to c Is there a restriction limiting the donated property for a particular use? Taxpayer (Donor) Statement - List each item included in Section B, Part I above that the appraisal identifies Part III as having a value of \$500 or less. See instructions. I declare that the following item(s) included in Section B, Part I above has to the best of my knowledge and belief an appraised value of not more than \$500 (per item). Enter identifying letter from Section B, Part I and describe the specific item. See instructions. Signature of taxpayer (donor) ▶ Date > Declaration of Appraiser I declare that I am not the donor, the donee, a party to the transaction in which the donor acquired the property, employed by, or related to any of the foregoing persons, or married to any person who is related to any of the foregoing persons. And, if regularly used by the donor, donee, or party to the transaction, I performed the majority of my appraisals during my tax year for other persons. Also, I declare that I perform appraisals on a regular basis; and that because of my qualifications as described in the appraisal, I am qualified to make appraisals of the type of property being valued. I certify that the appraisal fees were not based on a percentage of the appraised property value. Furthermore, I understand that a false or fraudulent overstatement of the property value as described in the qualified appraisal or this Form 8283 may subject me to the penalty under section 6701(a) (aiding and abetting the understatement of tax liability). I understand that my appraisal will be used in connection with a return or claim for refund. I also understand that, if there is a substantial or gross valuation misstatement of the value of the property claimed on the return or claim for refund that is based on my appraisal, I may be subject to a penalty under section 6695A of the Internal Revenue Code, as well as other applicable penalties. I affirm that I have not been at any time in the three-year period ending on the date of the appraisal barred from presenting evidence or testimony before the Department of the Treasury or the Internal Revenue Service pursuant to 31 U.S.C. 330(c). Sign Appraiser signature ▶ Here Title ▶ Appraiser name ▶ Business address (including room or suite no.) Identifying number City or town, state, and ZIP code **Donee Acknowledgment** Part V This charitable organization acknowledges that it is a qualified organization under section 170(c) and that it received the donated property as described in Section B, Part I, above on the following date Furthermore, this organization affirms that in the event it sells, exchanges, or otherwise disposes of the property described in Section B, Part I (or any portion thereof) within 3 years after the date of receipt, it will file Form 8282, Donee Information Return, with the IRS and give the donor a copy of that form. This acknowledgment does not represent agreement with the claimed fair market value. **Employer identification number** Name of charitable organization (donee) Address (number, street, and room or suite no.) City or town, state, and ZIP code Title Date Authorized signature

Department of the Treasury Internal Revenue Service

Residential Energy Credits

► Go to www.irs.gov/Form5695 for instructions and the latest information.

► Attach to Form 1040, 1040-SR, or 1040-NR.

2021 Attachment Sequence No. 158

OMB No. 1545-0074

Name(s) shown on return

Abdur Rahman & Nahida Khanam

Your social security number

253-43-6651

Part	Residential Energy Efficient Property Credit (See instructions before complete	ing this pa	art.)		
Note	Skip lines 1 through 11 if you only have a credit carryforward from 2020.				
1	Qualified solar electric property costs	[1		
2	Qualified solar water heating property costs		2		
3	Qualified small wind energy property costs		3		
4	Qualified geothermal heat pump property costs		4		
5	Qualified biomass fuel property costs		5		
6a	Add lines 1 through 5		6a		
b	Multiply line 6a by 26% (0.26)		6b		
7a	Qualified fuel cell property. Was qualified fuel cell property installed on, or in connection we main home located in the United States? (See instructions.)		7a	☐ Yes	× No
	Caution: If you checked the "No" box, you cannot take a credit for qualified fuel cell proper lines 7b through 11.	rty. Skip			
b	Print the complete address of the main home where you installed the fuel cell property.				
	Number and street Ur	it No.			
	City, State, and ZIP code				
8	Qualified fuel cell property costs				
9	Multiply line 8 by 26% (0.26)				
10	Kilowatt capacity of property on line 8 above • 10				
11	Enter the smaller of line 9 or line 10		11		
12	Credit carryforward from 2020. Enter the amount, if any, from your 2020 Form 5695, line 16		12		
13	Add lines 6b, 11, and 12		13		
14	Limitation based on tax liability. Enter the amount from the Residential Energy Efficient Credit Limit Worksheet (see instructions)		14		
15	Residential energy efficient property credit. Enter the smaller of line 13 or line 14. Also incommon amount on Schedule 3 (Form 1040), line 5		15		
16	Credit carryforward to 2022. If line 15 is less than line 13, subtract line 15				

Page 2

Part II Nonbusiness Energy Property Credit

17a	Were the qualified energy efficiency improvements or residential energy property costs for your main		
	home located in the United States? (see instructions)	17a	X Yes No
	not complete Part II.		
b	Print the complete address of the main home where you made the qualifying improvements.		
	Caution: You can only have one main home at a time.		
	15513 40th Dr SE		
	Number and street Unit No.		
	Bothell WA 98012-5044		
	City, State, and ZIP code		
С	Were any of these improvements related to the construction of this main home?	17c	Yes X No
	Caution: If you checked the "Yes" box, you can only claim the nonbusiness energy property credit for qualifying improvements that were not related to the construction of the home. Do not include expenses related to the construction of your main home, even if the improvements were made after you moved into the home.		
18	Lifetime limitation. Enter the amount from the Lifetime Limitation Worksheet (see instructions)	18	230.
19	Qualified energy efficiency improvements (original use must begin with you and the component must reasonably be expected to last for at least 5 years; do not include labor costs) (see instructions).		
а	Insulation material or system specifically and primarily designed to reduce heat loss or gain of your		
	home that meets the prescriptive criteria established by the 2009 IECC	19a	
b	Exterior doors that meet or exceed the version 6.0 Energy Star program requirements	19b	1,200.
С	Metal or asphalt roof that meets or exceeds the Energy Star program requirements and has appropriate pigmented coatings or cooling granules which are specifically and primarily designed to reduce the heat gain of your home	19c	
d	Exterior windows and skylights that meet or exceed the version 6.0 Energy Star program requirements		
е	Maximum amount of cost on which the credit can be figured		
f	If you claimed window expenses on your Form 5695 prior to 2021, enter the amount from the Window Expense Worksheet (see instructions); otherwise		
	enter -0	-	
g	Subtract line 19f from line 19e. If zero or less, enter -0	40b	2 000
h 20	Enter the smaller of line 19d or line 19g	19h 20	2,000. 3,200.
20 21	Multiply line 20 by 10% (0.10)	21	3,200.
22	Residential energy property costs (must be placed in service by you; include labor costs for onsite preparation, assembly, and original installation) (see instructions).	21	320.
а	Energy-efficient building property. Do not enter more than \$300	22a	0.
b	Qualified natural gas, propane, or oil furnace or hot water boiler. Do not enter more than \$150	22b	150.
С	Advanced main air circulating fan used in a natural gas, propane, or oil furnace. Do not enter more		
	than \$50	22c	50.
23	Add lines 22a through 22c	23	200.
24	Add lines 21 and 23	24	520.
25	Maximum credit amount. (If you jointly occupied the home, see instructions)	25	500.
26	Enter the amount, if any, from line 18	26	230.
27	Subtract line 26 from line 25. If zero or less, stop; you cannot take the nonbusiness energy property		
	credit	27	270.
28	Enter the smaller of line 24 or line 27	28	270.
29	Limitation based on tax liability. Enter the amount from the Nonbusiness Energy Property Credit Limit	20	7 452
30	Worksheet (see instructions)	29	7,453.
30	on Schedule 3 (Form 1040), line 5	30	270.
	c. concease of our roop, moo	_ 50	270.

Department of the Treasury Internal Revenue Service (99)

Expenses for Business Use of Your Home

► File only with Schedule C (Form 1040). Use a separate Form 8829 for each home you used for business during the year.

▶ Go to www.irs.gov/Form8829 for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment Sequence No. 176

Name(s) of proprietor(s) Your social security number Abdur Rahman 253-43-6651 Part I Part of Your Home Used for Business Software Consultant Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory 1 300 2 2,171 2 3 3 13.82 % For daycare facilities not used exclusively for business, go to line 4. All others, go to line 7. 4 Multiply days used for daycare during year by hours used per day . . . 5 If you started or stopped using your home for daycare during the year, see instructions; otherwise, enter 8,760 5 8,760 hr. Divide line 4 by line 5. Enter the result as a decimal amount 6 7 Business percentage. For daycare facilities not used exclusively for business, multiply line 6 by line 3 (enter the result as a percentage). All others, enter the amount from line 3 7 13.82 % Part II **Figure Your Allowable Deduction** Enter the amount from Schedule C, line 29, plus any gain derived from the business use of your home, 8 minus any loss from the trade or business not derived from the business use of your home. See instructions. 8 -35,279. (a) Direct expenses See instructions for columns (a) and (b) before completing lines 9-22. (b) Indirect expenses Casualty losses (see instructions) 9 10 Deductible mortgage interest (see instructions) . 10 25,574. 11 Real estate taxes (see instructions) 17,000. 12 12 Add lines 9, 10, and 11 42,574. 13 Multiply line 12, column (b), by line 7 5,884. 14 Add line 12, column (a), and line 13 14 5,884. 15 Subtract line 14 from line 8. If zero or less, enter -0-15 0. 16 Excess mortgage interest (see instructions) 16 17 Excess real estate taxes (see instructions) . . . 17 18 18 1,200. 19 19 20 Repairs and maintenance 20 500. 21 21 3,600. 22 Other expenses (see instructions) 2,200. 23 Add lines 16 through 22 <u>9,6</u>00. Multiply line 23, column (b), by line 7 24 1,327. 25 Carryover of prior year operating expenses (see instructions) 26 Add line 23, column (a), line 24, and line 25 26 1,327. 27 27 Allowable operating expenses. Enter the **smaller** of line 15 or line 26 . . . 0. 28 Limit on excess casualty losses and depreciation. Subtract line 27 from line 15. 28 0._ 29 30 Depreciation of your home from line 42 below 31 Carryover of prior year excess casualty losses and depreciation (see instructions) 31 32 32 33 Allowable excess casualty losses and depreciation. Enter the **smaller** of line 28 or line 32 . . 0. 33 5,884. 34 34 35 Casualty loss portion, if any, from lines 14 and 33. Carry amount to Form 4684. See instructions. 35 Allowable expenses for business use of your home. Subtract line 35 from line 34. Enter here 36 and on Schedule C, line 30. If your home was used for more than one business, see instructions. ▶ 36 5,884. Part III **Depreciation of Your Home** Enter the **smaller** of your home's adjusted basis or its fair market value. See instructions 37 200. 37 38 38 200. 39 39 40 40 28. 2.4573 % 41 41 42 Depreciation allowable (see instructions). Multiply line 40 by line 41. Enter here and on line 30 above 42 1. Part IV **Carryover of Unallowed Expenses to 2022** 1,327. Operating expenses. Subtract line 27 from line 26. If less than zero, enter -0- 43 43

44

Excess casualty losses and depreciation. Subtract line 33 from line 32. If less than zero, enter -0-.

BAA

Form 8829 Lines 7, 8, 42

	e(s) of Proprietor(s) ur Rahman	Your S 253-	SN 43-6651	
Busir	Business Ven			
Part	I — Calculation of Line 7			
	ulation for Form 8829, line 7 when one area of the home was used exclusively aycare and another area of the home was used only partly for daycare:			
1 2 3 4 5 6 7 8	Area used exclusively for daycare	1 2 3 4 5 6 7 8 9		% hr hr
Part	II – Calculation of Business Income Limit for Form 8829, Line 8 or S	imple	Method, line A	
1 2 3 4 5 6 7 8 9	All ation of business income limit when part of gross income is from a place of these other than this home office: Gross income from Schedule C, line 7	1 2 3 4 5 6	75.00 35,279.	જ
Part	III — Calculation of Line 42		T	
1 2 3	Depreciation attributable to business use of home	2 3	1.	

Department of the Treasury

Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2021

Attachment
Sequence No. 179

Name(s) shown on return Business or activity to which this form relates Identifying number Abdur Rahman & Nahida Khanam Section 179 Summary 253-43-6651 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 1,050,000. 2 Total cost of section 179 property placed in service (see instructions) 2 1,739. 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . 2,620,000. 4 0. Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 1,050,000. 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 1,039. 1,039. iPhone 13 700. iPhone 13 500. 7 Listed property. Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 1,539. 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 1,539. **10** Carryover of disallowed deduction from line 13 of your 2020 Form 4562 10 0. 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 137,916. 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 1,539. 13 Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12 0. Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2021 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2021 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (f) Method (business/investment use only—see instructions) (e) Convention (g) Depreciation deduction placed in period service 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property 27.5 yrs. MM S/L h Residential rental 27.5 yrs. MM S/L property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs. S/L **c** 30-year ММ SIL 30 yrs. d 40-vear 40 yrs. ММ S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

2021 Attachment Sequence No. 179

OMB No. 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number Abdur Rahman & Nahida Khanam Sch C Software Consultant 253-43-6651 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 1 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 (a) Description of property 6 (b) Cost (business use only) (c) Elected cost 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 **10** Carryover of disallowed deduction from line 13 of your 2020 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 1,039 13 Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2021 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2021 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use only—see instructions) (e) Convention (f) Method (g) Depreciation deduction placed in period service **19a** 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property 27.5 yrs. MM S/L h Residential rental 27.5 yrs. MM S/L property 39 yrs. ММ S/L i Nonresidential real 01/21 property MM S/L Section C-Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L **b** 12-year 12 yrs. **c** 30-year 30 yrs. ММ SIL d 40-vear 40 yrs. MM S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 1,040. 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Special Depreciation Allowance Elections under IRC Section 168(k)(7) ► Attach to your income tax return

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7 Year Pr	operty		
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Additional information from your 2021 Federal Tax Return

Form 1040: Individual Tax Return

Line 4a Explanation Statement

Recharacterization Explanation

Not quite understandable