

1040	Federal Return Summary	2022
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Name MATTHEW W. MAHAN & SILVIA WEDAD SCANDAR	Taxpayer Identification Number [REDACTED]
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Tax Form 1040
 Tax Method Used QUAL DIV CAP GAIN WRK

Filing Status MFJ
 Dependents 2

Income	
Salaries & wages	362,138
Taxable interest income	6,828
Tax exempt interest	
Dividend income	389
Qualified dividends	311
Taxable state/local refunds	
Alimony received	
Business income/-loss	
Capital gain/-loss	77,819
Other gain/-loss (Form 4797)	
Taxable IRA distributions	
Taxable pension distributions	
Rental, royalty, partnership, etc. income/-loss	-67
Farm income/-loss	
Unemployment compensation	
Taxable social security benefits	
Other income	1,950
Total income	449,057

Adjustments	
Moving expenses	
Deductible part of self-employment tax	138
SEP, SIMPLE, and qualified plan deduction	
Self-employed health insurance deduction	
Alimony paid	
IRA deduction	
Student loan interest deduction	
Other adjustments	
Total adjustments	138
Adjusted gross income	448,919

Deductions	
Medical and Dental expenses	
Taxes paid	10,000
Interest paid	22,065
Charitable contributions	4,985
Other itemized deductions	
Total itemized deductions	37,050
or, Standard deduction	
Taxable income before Qual Bus Inc Ded (QBID)	411,869
QBID	7
Taxable income	411,862

Tax Computation	
Regular tax	79,487
Alternative minimum tax	
Excess advance premium tax credit	
Total tax before credits	79,487
Child and dependent care credit	1,200
Education credits	
Other credits	1,565
Total credits	2,765
Tax after credits	76,722
Self-employment tax	275
Additional tax on IRAs, etc.	
Other taxes	4,416
Total tax	81,413

Payments	
Federal income tax withheld	58,651
Estimated payments	
Other payments/credits	
Total payments	58,651

Refund/Amount Due	
Amount overpaid	
Overpayment applied	
Form 2210 penalty	586
Amount due/-refund	23,348
Failure to file penalty	
Failure to pay penalty	
Late filing interest	
Net amount due/-refund	23,348

2023 Estimates	
1st quarter	2,000
2nd quarter	2,000
3rd quarter	2,000
4th quarter	2,000
Total Estimates	8,000

Tax Rates	
Marginal tax rate - Ordinary income*	24.0 %
Marginal tax rate - Capital income*	15.0 %
Effective tax rate	20.0 %

* Marginal Tax Rate displayed may not reflect the true tax rate for Schedule J or Form 8615.

Taxpayer Name MATTHEW W. MAHAN
Spouse Name SILVIAWEDAD SCANDAR

DO NOT SUBMIT THIS DOCUMENT TO IRS UNLESS REQUESTED TO DO SO

ERO Declaration

I declare that the information contained in this electronic tax return is the information furnished to me by the taxpayer. If the taxpayer furnished me a completed tax return, I declare that the information contained in this electronic tax return is identical to that contained in the return provided by the taxpayer. If the furnished return was signed by a paid preparer, I declare I have entered the paid preparer's identifying information in the appropriate portion of this electronic return. If I am the paid preparer, under the penalties of perjury I declare that I have examined this electronic return, and to the best of my knowledge and belief, it is true, correct, and complete. This declaration is based on all information of which I have any knowledge.

ERO Signature

I am signing this Tax Return by entering my PIN below.

ERO's PIN [REDACTED]

Taxpayer Declarations

Perjury Statement

Under penalties of perjury, I declare that I have examined this return, including any accompanying statements and schedules and, to the best of my knowledge and belief, it is true, correct, and complete.

Consent to Disclosure

I consent to allow my Intermediate Service Provider, transmitter, or Electronic Return Originator (ERO) to send my return to IRS and to receive the following information from IRS: a) an acknowledgment of receipt or reason for rejection of transmission; b) the reason for any delay in processing or refund; and, c) the date of any refund.

Electronic Funds Withdrawal Consent

If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH Electronic Funds Withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my Federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. I further understand that this authorization may apply to future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment System (EFTPS). I authorize EFTPS to issue me a personal identification number (PIN) to access EFTPS. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To request that my PIN be mailed to me, or to revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal consent.

I am signing this Tax Return/Form and Electronic Funds Withdrawal Consent, if applicable, by entering my Self-Select PIN below.

Date (all numerics) 10/11/23

Taxpayer's PIN (enter five numbers, other than all zeroes) [REDACTED]

Spouse's PIN (enter five numbers, other than all zeroes) [REDACTED]

Form 1310 Signature and Verification

Completion of this section indicates that I am requesting a refund of taxes overpaid by or on behalf of the decedent. Under penalties of perjury, I declare that I have examined this Form 1310 claim, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of person claiming refund

Date

Form 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return 2022 OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

Filing Status [] Single [X] Married filing jointly [] Married filing separately (MFS) [] Head of household (HOH) [] Qualifying surviving spouse (QSS)

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Personal information section including names (MATTHEW W. MAHAN, SILVIAWEDAD SCANDAR), social security numbers, and home address.

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) [] Yes [X] No

Standard Deduction Someone can claim: [] You as a dependent [] Your spouse as a dependent [] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [] Were born before January 2, 1958 [] Are blind Spouse: [] Was born before January 2, 1958 [] Is blind

Table with 4 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Check the box if qualifies for (see instructions): Child tax credit, Credit for other dependents. Includes entries for DAUGHTER and SON.

Main income table with 15 rows (1a-15) and columns for descriptions and amounts. Total taxable income is 411,862.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form 1040 (2022)

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972	16	79,487
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	79,487
	19	Child tax credit or credit for other dependents from Schedule 8812	19	1,550
	20	Amount from Schedule 3, line 8	20	1,215
	21	Add lines 19 and 20	21	2,765
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	76,722
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	4,691
	24	Add lines 22 and 23. This is your total tax	24	81,413

Payments	25	Federal income tax withheld from:	25d	58,651
	a	Form(s) W-2	25a	58,225
	b	Form(s) 1099	25b	
	c	Other forms (see instructions)	25c	426
	d	Add lines 25a through 25c	25d	58,651
	26	2022 estimated tax payments and amount applied from 2021 return	26	
	27	Earned income credit (EIC)	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
31	Amount from Schedule 3, line 15	31		
32	Add lines 27, 28, 29 and 31. These are your total other payments and refundable credits	32		
33	Add lines 25d, 26, and 32. These are your total payments	33	58,651	

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	
	b	Routing number <input type="text"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account number <input type="text"/>		
36	Amount of line 34 you want applied to your 2023 estimated tax	36		

Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	23,348
	38	Estimated tax penalty (see instructions)	38	586

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes. Complete below.** **No**

Designee's name **ANTHONY J. LUNA** Phone no. Personal identification number (PIN)

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature Date Your occupation **ELECTED OFFICIAL**

Spouse's signature. If a joint return, both must sign. Date Spouse's occupation **PRESIDENT**

Phone no. Email address

Paid Preparer Use Only

Preparer's name **ANTHONY J. LUNA** Preparer's signature **ANTHONY J. LUNA** Date **10/11/23** PTIN Check if: Self-employed

Firm's name **WHEELER ACCOUNTANTS LLP** Phone no.

Firm's address Firm's EIN

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

SCHEDULE 1
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

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

2022

Attachment
Sequence No. **01**

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

Your social security number

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Allimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		5	-67
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
a	Net operating loss	8a ()		
b	Gambling	8b		
c	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
e	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
l	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	8l		
m	Olympic and Paralympic medals and USOC prize money (see Instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
o	Section 951A(a) inclusion (see instructions)	8o		
p	Section 461(l) excess business loss adjustment	8p		
q	Taxable distributions from an ABL account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount: ASSOCIATION OF BAY AREA G	8z		1,950
9	Total other income. Add lines 8a through 8z		9	1,950
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8		10	1,883

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

Part II Adjustments to Income

11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis government 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	138
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			
c	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
a	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8I from the rental of personal property engaged in for profit	24b		
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c		
d	Reforestation amortization and expenses	24d		
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
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		
j	Housing deduction from Form 2555	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount:	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	138

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

2022

Attachment
Sequence No. **02**

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

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Your social security number

[REDACTED]

Part 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	

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE	4	275
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	5	
6	Uncollected social security and Medicare tax on wages. Attach Form 8919	6	
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. If not required, check here <input type="checkbox"/>	8	
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	1,248
12	Net investment income tax. Attach Form 8960	12	3,168
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	

(continued on page 2)

Part II Other Taxes (continued)

17 Other additional taxes:			
a Recapture of other credits. List type, form number, and amount:	17a		
b Recapture of federal mortgage subsidy, if you sold your home see instructions	17b		
c 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		
e Additional tax on Archer MSA distributions. Attach Form 8853	17e		
f Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g 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		
l Tax on accumulation distribution of trusts	17l		
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		
o Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17o		
p 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 Reserved for future use		19	
20 Section 965 net tax liability installment from Form 965-A	20		
21 Add lines 4, 7 through 16, and 18. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21	4,691

SCHEDULE 3
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Credits and Payments

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

2022

Attachment
Sequence No. **03**

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

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Your social security number

[REDACTED]

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required		1	15
2	Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441		2	1,200
3	Education credits from Form 8863, line 19		3	
4	Retirement savings contributions credit. Attach Form 8880		4	
5	Residential energy credits. Attach Form 5695		5	
6	Other nonrefundable credits:			
	a General business credit. Attach Form 3800	6a		
	b Credit for prior year minimum tax. Attach Form 8801	6b		
	c Adoption credit. Attach Form 8839	6c		
	d Credit for the elderly or disabled. Attach Schedule R	6d		
	e Alternative motor vehicle credit. Attach Form 8910	6e		
	f Qualified plug-in motor vehicle credit. Attach Form 8936	6f		
	g Mortgage interest credit. Attach Form 8396	6g		
	h District of Columbia first-time homebuyer credit. Attach Form 8859	6h		
	i Qualified electric vehicle credit. Attach Form 8834	6i		
	j Alternative fuel vehicle refueling property credit. Attach Form 8911	6j		
	k Credit to holders of tax credit bonds. Attach Form 8912	6k		
	l Amount on Form 8978, line 14. See instructions	6l		
	z Other nonrefundable credits. List type and amount:	6z		
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-SR, or 1040-NR, line 20		8	1,215

(continued on page 2)

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 3 (Form 1040) 2022

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Itemized Deductions

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

OMB No. 1545-0074

2022

Attachment
Sequence No. **07**

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

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

Your social security number

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Medical and Dental Expenses		Taxes You Paid		Interest You Paid		Gifts to Charity		Casualty and Theft Losses		Other Itemized Deductions		Total Itemized Deductions	
Caution: Do not include expenses reimbursed or paid by others. 1 Medical and dental expenses (see instructions) 1 2 Enter amount from Form 1040 or 1040-SR, line 11 2 3 Multiply line 2 by 7.5% (0.075) 3 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- 4		5 State and local taxes. 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, check this box <input type="checkbox"/> 5a 175,123 b State and local real estate taxes (see instructions) 5b 33,249 c State and local personal property taxes 5c d Add lines 5a through 5c 5d 208,372 e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately) 5e 10,000 6 Other taxes. List type and amount: 6 7 Add lines 5e and 6 7 10,000		8 Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box <input type="checkbox"/> a Home mortgage interest and points reported to you on Form 1098. See instructions if limited 8a 20,399 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., and address 8b c Points not reported to you on Form 1098. See instructions for special rules 8c 1,666 d Reserved for future use 8d e Add lines 8a through 8c 8e 22,065 9 Investment interest. Attach Form 4952 if required. See instructions 9 10 Add lines 8e and 9 10 22,065		11 Gifts by cash or check. If you made any gift of \$250 or more, see instructions 11 4,985 12 Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500 12 13 Carryover from prior year 13 14 Add lines 11 through 13 14 4,985		15 Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions 15		16 Other—from list in instructions. List type and amount: 16		17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12 17 37,050 18 If you elect to itemize deductions even though they are less than your standard deduction, check this box <input type="checkbox"/> 18	

For Paperwork Reduction Act Notice, see the Instructions for Form 1040.

Schedule A (Form 1040) 2022

SCHEDULE B
(Form 1040)

Department of the Treasury
Internal Revenue Service

Interest and Ordinary Dividends

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

2022

Attachment Sequence No. **08**

Name(s) shown on return

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Your social security number

Part I

Interest

(See instructions and the instructions for Form 1040, line 2b.)

Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address

GOLDMAN SACHS BANK USA
MUFG UNION BANK N A
TD AMERITRADE - ACCT 5364

Amount

6,477
333
18

1

2 Add the amounts on line 1

3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815

4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b

6,828

6,828

Note: If line 4 is over \$1,500, you must complete Part III.

Amount

Part II

Ordinary Dividends

(See instructions and the instructions for Form 1040, line 3b.)

Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

5 List name of payer:

TD AMERITRADE - ACCT 5364

389

5

6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b

Note: If line 6 is over \$1,500, you must complete Part III.

389

Part III

Foreign Accounts and Trusts

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

7a

Caution: If required, failure to file FinCEN Form 114 may result in substantial penalties. Additionally, you may be required to file Form 8938, Statement of Specified Foreign Financial Assets. See instructions.

At any time during 2022, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions

If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements

b If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the financial account(s) are located:

8 During 2022 did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions

Yes No

X

X

For Paperwork Reduction Act Notice, see your tax return instructions.

SCHEDULE D
(Form 1040)

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/ScheduleD for instructions and the latest information.
Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2022

Attachment
Sequence No. 12

Name(s) shown on return
MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Your social security number
[REDACTED]

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses — Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6
7 Net short-term capital gain or (loss) . Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back				7 0

Part II Long-Term Capital Gains and Losses — Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	1,683,000	1,015,000	-594,550	73,450
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11 4,369
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13 Capital gain distributions. See the instructions				13
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14
15 Net long-term capital gain or (loss) . Combine lines 8a through 14 in column (h). Then go to Part III on the back				15 77,819

For Paperwork Reduction Act Notice, see your tax return instructions.

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Schedule D (Form 1040) 2022

Part III Summary

<p>16 Combine lines 7 and 15 and enter the result</p> <ul style="list-style-type: none"> • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then go to line 22. 	16	77,819
<p>17 Are lines 15 and 16 both gains?</p> <p><input checked="" type="checkbox"/> Yes. Go to line 18.</p> <p><input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.</p>		
<p>18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet</p>	18	
<p>19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet</p>	19	
<p>20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952?</p> <p><input checked="" type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.</p> <p><input type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.</p>		
<p>21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:</p> <ul style="list-style-type: none"> • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) <p>Note: When figuring which amount is smaller, treat both amounts as positive numbers.</p>	21	()
<p>22 Do you have qualified dividends on Form 1040, 1040-SR, or Form 1040-NR, line 3a?</p> <p><input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.</p> <p><input type="checkbox"/> No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.</p>		

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations

Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you must check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (f) on line 28 and attach Form 6198. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section. Yes No

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
A	NMCS LLC	P		82-0960705		
B						
C						
D						

Passive Income and Loss		Nonpassive Income and Loss		
(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss allowed (see Schedule K-1)	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A	67			
B				
C				
D				
29a Totals				
b Totals	67			
30	Add columns (h) and (k) of line 29a			0
31	Add columns (g), (i), and (j) of line 29b			67
32	Total partnership and S corporation income or (loss). Combine lines 30 and 31			-67

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A		
B		

Passive Income and Loss		Nonpassive Income and Loss	
(e) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A			
B			
34a Totals			
b Totals			
35	Add columns (d) and (f) of line 34a		
36	Add columns (c) and (e) of line 34b		
37	Total estate and trust income or (loss). Combine lines 35 and 36		

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs)—Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5	41	-67
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AD; and Schedule K-1 (Form 1041), box 14, code F. See instructions	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

SCHEDULE SE
(Form 1040)

Department of the Treasury
Internal Revenue Service

Self-Employment Tax

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

OMB No. 1545-0074
2022
Attachment
Sequence No. 17

Name of person with self-employment income (as shown on Form 1040, 1040-SR, or 1040-NR)

Social security number of person
with self-employment income

MATTHEW W. MAHAN

Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is church employee income, see instructions for how to report your income and the definition of church employee income.

A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I

Skip lines 1a and 1b if you use the farm optional method in Part II. See instructions.

1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1a	
b If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AH	1b	
Skip line 2 if you use the nonfarm optional method in Part II. See instructions.		
2 Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order	2	1,950
3 Combine lines 1a, 1b, and 2	3	1,950
4a If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3	4a	1,801
Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.		
b If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
c Combine lines 4a and 4b. If less than \$400, stop; you don't owe self-employment tax. Exception: If less than \$400 and you had church employee income, enter -0- and continue	4c	1,801
5a Enter your church employee income from Form W-2. See instructions for definition of church employee income	5a	
b Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-	5b	0
6 Add lines 4c and 5b	6	1,801
7 Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2022	7	147,000
8a Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$147,000 or more, skip lines 8b through 10, and go to line 11	8a	
b Unreported tips subject to social security tax from Form 4137, line 10	8b	
c Wages subject to social security tax from Form 8919, line 10	8c	
d Add lines 8a, 8b, and 8c	8d	
9 Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9	147,000
10 Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	223
11 Multiply line 6 by 2.9% (0.029)	11	52
12 Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4	12	275
13 Deduction for one-half of self-employment tax. Multiply line 12 by 50% (0.50). Enter the result here and on Schedule 1 (Form 1040), line 15	13	138

Part II Optional Methods To Figure Net Earnings (see instructions)

Farm Optional Method. You may use this method only if (a) your gross farm income¹ wasn't more than \$9,060, or (b) your net farm profits² were less than \$6,540.

14 Maximum income for optional methods	14	6,040
15 Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$6,040. Also include this amount on line 4b above	15	

Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits³ were less than \$6,540 and also less than 72.189% of your gross nonfarm income,⁴ and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. **Caution:** You may use this method no more than five times.

16 Subtract line 15 from line 14	16	
17 Enter the smaller of: two-thirds (2/3) of gross nonfarm income ⁴ (not less than zero) or the amount on line 16. Also, include this amount on line 4b above	17	

¹ From Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.

² From Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A — minus the amount you would have entered on line 1b had you not used the optional method.

³ From Sch. C, line 31; and Sch. K-1 (Form 1065), box 14, code A.

⁴ From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.

Form **1116**

Foreign Tax Credit
(Individual, Estate, or Trust)

OMB No. 1545-0121

2022

Department of the Treasury
Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

Attachment
Sequence No. **19**

Go to www.irs.gov/Form1116 for instructions and the latest information.

Name **MATTHEW W. MAHAN SILVIAWEDAD MAHAN SCANDAR** Identifying number as shown on page 1 of your tax return

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a Section 951A category income c Passive category income e Section 901(j) income g Lump-sum distributions
b Foreign branch category income d General category income f Certain income re-sourced by treaty

h Resident of (name of country) **US UNITED STATES**

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for category checked above)

i Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	OC	B	
OTHER COUNTRIES				
1a Gross income from sources within country shown above and of the type checked above (see instructions): DIVIDENDS & INTEREST		353		
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions <input type="checkbox"/>				1a 353
Deductions and losses (Caution: See instructions):				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)		10,000		
b Other dedts. (attach stmt.)				
c Add lines 3a and 3b		10,000		
d Gross foreign source income (see instructions)		353		
e Gross income from all sources (see instructions)		949,124		
f Divide line 3d by line 3e (see instructions)		0.0004		
g Multiply line 3c by line 3f		4		
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)		8		
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5		12		6 12
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7 341

Part II Foreign Taxes Paid or Accrued (see instructions)

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:				Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	(p) Other foreign taxes paid or accrued	(q) Dividends	(r) Rents and royalties		
A	1099 TAX					15				15
B										
C										
8 Add lines A through C, column (u). Enter the total here and on line 9, page 2										8 15

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2022)

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Form 1116 (2022)

Part III Figuring the Credit			
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	15
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10	
11	Add lines 9 and 10	11	15
12	Reduction in foreign taxes (see instructions)	12	()
13	Taxes reclassified under high tax kickout (see instructions)	13	
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	15
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions	15	341
16	Adjustments to line 15 (see instructions)	16	
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	341
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18	411,862
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19	0.0008
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16. See instructions. Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions.	20	79,487
21	Multiply line 20 by line 19 (maximum amount of credit)	21	66
22	Increase in limitation (section 960 (c))	22	
23	Add lines 21 and 22	23	66
24	Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV See instructions	24	15

Part IV Summary of Credits From Separate Parts III (see instructions)			
25	Credit for taxes on section 951A category income	25	
26	Credit for taxes on foreign branch category income	26	
27	Credit for taxes on passive category income	27	
28	Credit for taxes on general category income	28	
29	Credit for taxes on section 901(j) income	29	
30	Credit for taxes on certain income re-sourced by treaty	30	
31	Credit for taxes on lump-sum distributions	31	
32	Add lines 25 through 31	32	
33	Enter the smaller of line 20 or line 32	33	15
34	Reduction of credit for international boycott operations. See instructions for line 12	34	
35	Subtract line 34 from line 33. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a	35	15

Form **2441**

Child and Dependent Care Expenses

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form2441 for instructions and the latest information.

2022
Attachment
Sequence No. **21**

Name(s) shown on return

Your social security number

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

- A** You can't claim a credit for child and dependent care expenses if your filing status is married filing separately unless you meet the requirements listed in the instructions under *Married Persons Filing Separately*. If you meet these requirements, check this box
- B** If you or your spouse was a student or was disabled during 2022 and you're entering deemed income of \$250 or \$500 a month on Form 2441 based on the income rules listed in the instructions under *If You or Your Spouse Was a Student or Disabled*, check this box

Part I Persons or Organizations Who Provided the Care - You must complete this part.
If you have more than three care providers, see the instructions and check this box

1	(a) Care provider's name	(b) Address (number, street, apt. no., city, state, and ZIP code)	(c) Identifying number (SSN or EIN)	(d) Was the care provider your household employee in 2022? For example, this generally includes nannies but not daycare centers. (see instructions)	(e) Amount paid (see instructions)
	ST TIMOTHY'S LUTHERAN CHURCH	5100 CAMDEN AVE SAN JOSE, CA 95124	23-7319037	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	34,503
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Did you receive dependent care benefits? No Yes Complete only Part II below. Complete Part III on page 2 next.

Caution: If the care provider is your household employee, you may owe employment taxes. For details, see the instructions for Schedule H (Form 1040). If you incurred care expenses in 2022 but didn't pay them until 2023, or if you prepaid in 2022 for care to be provided in 2023, don't include these expenses in column (d) of line 2 for 2022. See the instructions.

Part II Credit for Child and Dependent Care Expenses

2 Information about your qualifying person(s). If you have more than three qualifying persons, see the instructions and check this box

(a) Qualifying person's name	(b) Qualifying person's social security number	(c) Check here if the qualifying person was over age 12 and was disabled. (see instructions)	(d) Qualified expenses you incurred and paid in 2022 for the person listed in column (a)
First Last			
[REDACTED]	[REDACTED]		17,252
[REDACTED]	[REDACTED]		17,251

- 3** Add the amounts in column (d) of line 2. Don't enter more than \$3,000 if you had one qualifying person or \$6,000 if you had two or more persons. If you completed Part III, enter the amount from line 31 **3 6,000**
- 4** Enter your earned income. See instructions **4 136,402**
- 5** If married filing jointly, enter your spouse's earned income (if you or your spouse was a student or was disabled, see the instructions); all others, enter the amount from line 4 **5 227,548**
- 6** Enter the smallest of line 3, 4, or 5 **6 6,000**
- 7** Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11 **7 448,919**
- 8** Enter on line 8 the decimal amount shown below that applies to the amount on line 7.

If line 7 is:			If line 7 is:			If line 7 is:		
Over	But not over	Decimal amount is	Over	But not over	Decimal amount is	Over	But not over	Decimal amount is
\$0 - 15,000		.35	\$25,000 - 27,000		.29	\$37,000 - 39,000		.23
15,000 - 17,000		.34	27,000 - 29,000		.28	39,000 - 41,000		.22
17,000 - 19,000		.33	29,000 - 31,000		.27	41,000 - 43,000		.21
19,000 - 21,000		.32	31,000 - 33,000		.26	43,000 - No limit		.20
21,000 - 23,000		.31	33,000 - 35,000		.25			
23,000 - 25,000		.30	35,000 - 37,000		.24			

- 9a** Multiply line 6 by the decimal amount on line 8 **9a 1,200**
- b** If you paid 2021 expenses in 2022, complete Worksheet A in the instructions. Enter the amount from line 13 of the worksheet here. Otherwise, enter -0- on line 9b and go to line 9c **9b**
- c** Add lines 9a and 9b and enter the result **9c 1,200**
- 10** Tax liability limit. Enter the amount from the Credit Limit Worksheet in the instructions **10 79,472**
- 11** Credit for child and dependent care expenses. Enter the smaller of line 9c or line 10 here and on Schedule 3 (Form 1040), line 2 **11 1,200**

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **4797**

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

OMB No. 1545-0184

2022

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

Go to www.irs.gov/Form4797 for instructions and the latest information.

Attachment
Sequence No. **27**

Name(s) shown on return

Identifying number

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

1a Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20. See instructions	1a
b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets	1b
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets	1c

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	FROM K1						4,369

3 Gain, if any, from Form 4684, line 39	3
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37	4
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5
6 Gain, if any, from line 32, from other than casualty or theft	6
7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.	7 4,369
8 Nonrecaptured net section 1231 losses from prior years. See instructions	8
9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions	9

Part II Ordinary Gains and Losses (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):	

11 Loss, if any, from line 7	11
12 Gain, if any, from line 7 or amount from line 8, if applicable	12
13 Gain, if any, from line 31	13
14 Net gain or (loss) from Form 4684, lines 31 and 38a	14
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16
17 Combine lines 10 through 16	17
18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.	
a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions	18a
b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4	18b

For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2022)

THERE ARE NO AMOUNTS FOR PAGE 2

SCHEDULE 8812
(Form 1040)

**Credits for Qualifying Children
and Other Dependents**

OMB No. 1545-0074

2022

Department of the Treasury
Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Attachment
Sequence No. 47

Name(s) shown on return

Your social security number

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

[REDACTED]

Part I Child Tax Credit and Credit for Other Dependents

1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	1	448,919
2a	Enter income from Puerto Rico that you excluded	2a	
b	Enter the amounts from lines 45 and 50 of your Form 2555	2b	
c	Enter the amount from line 15 of your Form 4563	2c	
d	Add lines 2a through 2c	2d	
3	Add lines 1 and 2d	3	448,919
4	Number of qualifying children under age 17 with the required social security number	4	2
5	Multiply line 4 by \$2,000	5	4,000
6	Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number	6	
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 4.			
7	Multiply line 6 by \$500	7	
8	Add lines 5 and 7	8	4,000
9	Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000	9	400,000
10	Subtract line 9 from line 3. • 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	49,000
11	Multiply line 10 by 5% (0.05)	11	2,450
12	Is the amount on line 8 more than the amount on line 11? <input type="checkbox"/> No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27. <input checked="" type="checkbox"/> Yes. Subtract line 11 from line 8. Enter the result.	12	1,550
13	Enter the amount from the Credit Limit Worksheet A	13	78,272
14	Enter the smaller of line 12 or 13. This is your child tax credit and credit for other dependents.	14	1,550

Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.

If the amount on line 12 is more than the amount on line 14, you may be able to take the **additional child tax credit** on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 8812 (Form 1040) 2022

Part II-A Additional Child Tax Credit for All Filers

Caution: If you file Form 2555, you cannot claim the additional child tax credit.

15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27				
16a	Subtract line 14 from line 12. If zero, stop here; you cannot take the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27				16a
b	Number of qualifying children under 17 with the required social security number: _____ x \$1,500. Enter the result. If zero, stop here; you cannot claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27. TIP: The number of children you use for this line is the same as the number of children you used for line 4.				16b
17	Enter the smaller of line 16a or line 16b				17
18a	Earned income (see instructions)		18a		
b	Nontaxable combat pay (see instructions)	18b			
19	Is the amount on line 18a more than \$2,500? <input type="checkbox"/> No. Leave line 19 blank and enter -0- on line 20. <input type="checkbox"/> 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 Next. On line 16b, is the amount \$4,500 or more? <input type="checkbox"/> No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27. <input type="checkbox"/> 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.				20

Part II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Residents of Puerto Rico

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		21		
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		23		
24	1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27, and Schedule 3 (Form 1040), line 11. 1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		24		
25	Subtract line 24 from line 23. If zero or less, enter -0-				25
26	Enter the larger of line 20 or line 25 Next, enter the smaller of line 17 or line 26 on line 27.				26

Part II-C Additional Child Tax Credit

27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	0
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Form **8995-A**

Qualified Business Income Deduction

OMB No. 1545-2294

2022

Department of the Treasury
Internal Revenue Service

Attach to your tax return.
Go to www.irs.gov/Form8995A for instructions and the latest information.

Attachment
Sequence No. **55A**

Name(s) shown on return

Your taxpayer identification number

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

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 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 above \$170,050 (\$340,100 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

Part I Trade, Business, or Aggregation Information

Complete Schedules A, B, and/or C (Form 8995-A), as applicable, before starting Part I. Attach additional worksheets when needed. See instructions.

1	(a) Trade, business, or aggregation name	(b) Check if specified service	(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if patron
A		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
B		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
C		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

Part II Determine Your Adjusted Qualified Business Income

	A	B	C
2 Qualified business income from the trade, business, or aggregation. See instructions	2		
3 Multiply line 2 by 20% (0.20). If your taxable income is \$170,050 or less (\$340,100 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13	3		
4 Allocable share of W-2 wages from the trade, business, or aggregation	4		
5 Multiply line 4 by 50% (0.50)	5		
6 Multiply line 4 by 25% (0.25)	6		
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property	7		
8 Multiply line 7 by 2.5% (0.025)	8		
9 Add lines 6 and 8	9		
10 Enter the greater of line 5 or line 9	10		
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10	11		
12 Phased-in reduction. Enter the amount from line 26, if any	12		
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	13		
14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any. See instructions	14		
15 Qualified business income component. Subtract line 14 from line 13	15		
16 Total qualified business income component. Add all amounts reported on line 15	16		

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form **8995-A** (2022)



Part III Phased-in Reduction

Complete Part III only if your taxable income is more than \$170,050 but not \$220,050 (\$340,100 and \$440,100 if married filing jointly) and line 10 is less than line 3. Otherwise, skip Part III.

		A	B	C
17	Enter the amounts from line 3	17		
18	Enter the amounts from line 10	18		
19	Subtract line 18 from line 17	19		
20	Taxable income before qualified business income deduction	20		
21	Threshold. Enter \$170,050 (\$340,100 if married filing jointly)	21		
22	Subtract line 21 from line 20	22		
23	Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	23		
24	Phase-in percentage. Divide line 22 by line 23	24	%	
25	Total phase-in reduction. Multiply line 19 by line 24	25		
26	Qualified business income after phase-in reduction. Subtract line 25 from line 17. Enter this amount here and on line 12, for the corresponding trade or business	26		

Part IV Determine Your Qualified Business Income Deduction

27	Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16	27		
28	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions	28	36	
29	Qualified REIT dividends and PTP (loss) carryforward from prior years	29	()	
30	Total qualified REIT dividends and PTP income. Combine lines 28 and 29. If less than zero, enter -0-	30	36	
31	REIT and PTP component. Multiply line 30 by 20% (0.20)	31	7	
32	Qualified business income deduction before the income limitation. Add lines 27 and 31	32		7
33	Taxable income before qualified business income deduction	33	411,869	
34	Net capital gain. See instructions	34	78,130	
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		333,739
36	Income limitation. Multiply line 35 by 20% (0.20)	36		66,748
37	Qualified business income deduction before the domestic production activities deduction (DPAD) under section 199A(g). Enter the smaller of line 32 or line 36	37		7
38	DPAD under section 199A(g) allocated from an agricultural or horticultural cooperative. Don't enter more than line 33 minus line 37	38		
39	Total qualified business income deduction. Add lines 37 and 38	39		7
40	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-	40	()	0

SCHEDULE C
(Form 8995-A)
(Rev. December 2022)

Department of the Treasury
Internal Revenue Service

Loss Netting and Carryforward

Attach to Form 8995-A.

Go to www.irs.gov/Form8995A for instructions and the latest information.

OMB No. 1545-2294

Attachment
Sequence No. **55D**

Name(s) shown on return

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Your taxpayer identification number

[REDACTED]

If you have more than three trades, businesses, or aggregations, complete and attach as many Schedules C as needed. See instructions.

1	(a) Qualified business income/(loss)	(b) Reduction for loss netting (see instructions)	(c) Adjusted qualified business income (Combine (a) and (b). If zero or less, enter -0-.)
NMCS LLC	-67		
2	Qualified business net (loss) carryforward from prior years. See instructions		2 (631)
3	Total of the trades, businesses, or aggregations losses. Combine the negative amounts on lines 1, column (a), and 2 for all trades, businesses, or aggregations		3 (698)
4	Total of the trades, businesses, or aggregations income. Add the positive amounts on line 1, column (a), for all trades, businesses, or aggregations		4
5	Losses netted with income of other trades, businesses, or aggregations. Enter in the parentheses on line 5 the smaller of the absolute value of line 3 or line 4. Allocate this amount to each of the trades, businesses, or aggregations on line 1, column (b).		5 ()
6	Qualified business net (loss) carryforward. Subtract line 5 from line 3. If zero or more, enter -0-		6 (698)

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Schedule C (Form 8995-A) (Rev. 12-2022)

Form **8867**

(Rev. November 2022)

Department of the Treasury
Internal Revenue Service

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and
Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status
To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.
Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074

For tax year
20 **22**

Attachment
Sequence No. **70**

Taxpayer name(s) shown on return MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer identification number [REDACTED]
Preparer's name ANTHONY J. LUNA	Preparer taxpayer identification number [REDACTED]

Part I Due Diligence Requirements

Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I-V for the benefit(s) claimed (check all that apply). EIC CTC/ACTC/ODC AOTC HOH

	Yes	No	N/A
1 Did you complete the return based on information for the applicable tax year provided by the taxpayer or reasonably obtained by you? (See instructions if relying on prior year earned income.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 8812 (Form 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit claimed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following. <ul style="list-style-type: none"> • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status. • Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of any credit(s) 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes," answer questions 4a and 4b. If "No," go to question 5.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a Did you make reasonable inquiries to determine the correct, complete, and consistent information?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b Did you contemporaneously document your inquiries? (Documentation should include the questions you asked, whom you asked, when you asked, the information that was provided, and the impact the information had on your preparation of the return.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure the amount(s) of the credit(s) List those documents provided by the taxpayer, if any, that you relied on: <u>HEALTH CARE PROVIDER STATEMENT</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her return is selected for audit?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year? (If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a Did you complete the required recertification Form 8862?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and correct Schedule C (Form 1040)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

For Paperwork Reduction Act Notice, see separate instructions.

Part II Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go to Part III.)

	Yes	No	N/A
9a Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	<input type="checkbox"/>	<input type="checkbox"/>	
b Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?	<input type="checkbox"/>	<input type="checkbox"/>	
c Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part III Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not claim CTC, ACTC, or ODC, go to Part IV.)

	Yes	No	N/A
10 Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11 Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12 Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Part IV Due Diligence Questions for Returns Claiming AOTC (If the return does not claim AOTC, go to Part V.)

	Yes	No
13 Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qualified tuition and related expenses for the claimed AOTC?	<input type="checkbox"/>	<input type="checkbox"/>

Part V Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing status, go to Part VI.)

	Yes	No
14 Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for a qualifying person?	<input type="checkbox"/>	<input type="checkbox"/>

Part VI Eligibility Certification

You will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filing status on the return of the taxpayer identified above if you:

- A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responses on the return or in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s);
- B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checklist for any applicable credit(s) claimed and HOH filing status, if claimed;
- C. Submit Form 8867 in the manner required; and
- D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 8867 instructions under *Document Retention*.
 1. A copy of this Form 8867.
 2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.
 3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).
 4. A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s) was obtained.
 5. A record of any additional information you relied upon, including questions you asked and the taxpayer's responses, to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).

If you have not complied with all due diligence requirements, you may have to pay a penalty for each failure to comply related to a claim of an applicable credit or HOH filing status (see Instructions for more information).

	Yes	No
15 Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and complete?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Form **8959**

Department of the Treasury
Internal Revenue Service

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions.
Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.
Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2022
Attachment
Sequence No. **71**

Name(s) shown on return

Your social security number

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

[REDACTED]

Part I Additional Medicare Tax on Medicare Wages			
1	Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5	1	386,932
2	Unreported tips from Form 4137, line 6	2	
3	Wages from Form 8919, line 6	3	
4	Add lines 1 through 3	4	386,932
5	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	5	250,000
6	Subtract line 5 from line 4. If zero or less, enter -0-	6	136,932
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II	7	1,232

Part II Additional Medicare Tax on Self-Employment Income			
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6, if you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)	8	1,801
9	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	9	250,000
10	Enter the amount from line 4	10	386,932
11	Subtract line 10 from line 9. If zero or less, enter -0-	11	0
12	Subtract line 11 from line 8. If zero or less, enter -0-	12	1,801
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III	13	16

Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation			
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)	14	
15	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	15	250,000
16	Subtract line 15 from line 14. If zero or less, enter -0-	16	0
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV	17	

Part IV Total Additional Medicare Tax			
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR or 1040-SS filers, see instructions), and go to Part V	18	1,248

Part V Withholding Reconciliation			
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6	19	6,037
20	Enter the amount from line 1	20	386,932
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	5,611
22	Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages	22	426
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions)	23	
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR or 1040-SS filers, see instructions)	24	426

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8959** (2022)

Form **8960**

**Net Investment Income Tax—
Individuals, Estates, and Trusts**

OMB No. 1545-2227

2022

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.

Attachment
Sequence No. **72**

Name(s) shown on your tax return

Your social security number or EIN

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Part I Investment Income

Section 6013(g) election (see instructions)
Section 6013(h) election (see instructions)
Regulations section 1.1411-10(g) election (see instructions)

1	Taxable interest (see instructions)		1	6,828
2	Ordinary dividends (see instructions)		2	389
3	Annuities (see instructions)		3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a	-67	
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b		
c	Combine lines 4a and 4b		4c	-67
5a	Net gain or loss from disposition of property (see instructions)	5a	77,819	
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b		
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c		
d	Combine lines 5a through 5c		5d	77,819
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)		6	
7	Other modifications to investment income (see instructions)		7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7		8	84,969

Part II Investment Expenses Allocable to Investment Income and Modifications

9a	Investment interest expenses (see instructions)	9a		
b	State, local, and foreign income tax (see instructions) SEE STMT	9b	1,591	
c	Miscellaneous investment expenses (see instructions)	9c		
d	Add lines 9a, 9b, and 9c		9d	1,591
10	Additional modifications (see instructions)		10	
11	Total deductions and modifications. Add lines 9d and 10		11	1,591

Part III Tax Computation

12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. Estates and trusts, complete lines 18a-21. If zero or less, enter -0-		12	83,378
13	Modified adjusted gross income (see instructions)	13	448,919	
14	Threshold based on filing status (see instructions)	14	250,000	
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	198,919	
16	Enter the smaller of line 12 or line 15		16	83,378
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include on your tax return (see instructions)		17	3,168
18a	Net investment income (line 12 above)	18a		
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b		
c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c		
19a	Adjusted gross income (see instructions)	19a		
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b		
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c		
20	Enter the smaller of line 18c or line 19c		20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and include on your tax return (see instructions)		21	

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8960** (2022)

Form **8582**
 Department of the Treasury
 Internal Revenue Service
 Name(s) shown on return

Passive Activity Loss Limitations

See separate instructions.

Attach to Form 1040, 1040-SR, or 1041.

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

2022

Attachment Sequence No. **858**

Identifying number

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Part I 2022 Passive Activity Loss

Caution: Complete Parts IV and V before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation, see *Special Allowance for Rental Real Estate Activities* in the instructions.)

1a	Activities with net income (enter the amount from Part IV, column (a))		1d	
1b	Activities with net loss (enter the amount from Part IV, column (b))			
1c	Prior years' unallowed losses (enter the amount from Part IV, column (c))			
d Combine lines 1a, 1b, and 1c				

All Other Passive Activities

2a	Activities with net income (enter the amount from Part V, column (a))	4,369	2d	
2b	Activities with net loss (enter the amount from Part V, column (b))	67		
2c	Prior years' unallowed losses (enter the amount from Part V, column (c))			
d Combine lines 2a, 2b, and 2c				4,302

3	Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used		3	4,302
If line 3 is a loss and:				
• Line 1d is a loss, go to Part II.				
• Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.				

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See instructions for an example.

4	Enter the smaller of the loss on line 1d or the loss on line 3		4	
5	Enter \$150,000. If married filing separately, see instructions		5	
6	Enter modified adjusted gross income, but not less than zero. See instructions	0	6	
Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8, enter -0- on line 9. Otherwise, go to line 7.				
7	Subtract line 6 from line 5		7	
8	Multiply line 7 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions		8	
9	Enter the smaller of line 4 or line 8		9	0

Part III Total Losses Allowed

10	Add the income, if any, on lines 1a and 2a and enter the total		10	
11	Total losses allowed from all passive activities for 2022. Add lines 9 and 10. See instructions to find out how to report the losses on your tax return		11	0

Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions.

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
Total.	Enter on Part I, lines 1a, 1b, and 1c				

For Paperwork Reduction Act Notice, see instructions.

MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR

Form 8582 (2022)

Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 2a)	(b) Net loss (line 2b)	(c) Unallowed loss (line 2c)	(d) Gain	(e) Loss
NMCS LLC	4,369	67		4,302	
Total. Enter on Part I, lines 2a, 2b, and 2c	4,369	67			

Part VI Use This Part if an Amount Is Shown on Part II, Line 9. See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a).
Total			1.00		

Part VII Allocation of Unallowed Losses. See instructions

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
Total			1.00	

Part VIII Allowed Losses. See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
Total				

Form **1040** Tax Return Reconciliation Worksheet **2022**

Filing Status: 1 Single 2 Married filing jointly 3 Married filing separately 4 Head of household* 5 Qualifying widow(er)*
 MFS spouse name: _____ *Qualifying person that is a child but not a dependent.

Taxpayer first name and initial MATTHEW W.		Last name MAHAN	Taxpayer social security number [REDACTED]
If a joint return, spouse's first name and initial SILVIAWEDAD		Last name SCANDAR	Spouse's social security number [REDACTED]
Home address (number and street). If you have a P.O. box, see instructions. [REDACTED]		Apt. no.	Presidential Election Campaign Taxpayer <input type="checkbox"/> Spouse <input type="checkbox"/>
City, town or post office, state, and ZIP code. [REDACTED]			
Foreign country name	Foreign province/state/country	Foreign postal code	

At anytime during 2022, did you receive, sell, send, exchange, or otherwise acquire financial interest in any digital assets? Yes No

6a Taxpayer. If someone can claim you as a dependent, do not check box 6a
 b Spouse

Boxes checked on 6a and 6b	2
Children on 6c who lived with you	2
Children on 6c who did not live with you	
Dependents on 6c not entered above	
Total. Add lines above	4

6c Dependents:		(2) Social security number		(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for		If more than four dependents, <input type="checkbox"/> here
(1) First name	Last name				Child tax credit	Other dependents	
[REDACTED]	[REDACTED]	[REDACTED]		DAUGHTER	<input checked="" type="checkbox"/>		
[REDACTED]	[REDACTED]	[REDACTED]		SON	<input checked="" type="checkbox"/>		

Income (Schedule 1)	Description	Amount	Adjusted Gross Income (Schedule 1)
7	Wages, salaries, tips, etc. Attach Form(s) W-2	362,138	
8a	Taxable interest. Attach Schedule B if required	6,828	
b	Tax-exempt interest. Do not include on line 8a		
9a	Ordinary dividends. Attach Schedule B if required		
b	Qualified dividends	311	
10	Taxable refunds, credits, or offsets of state and local income taxes		
11	Alimony received		
12	Business income or (loss). Attach Schedule C or C-EZ		
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	77,819	
14	Other gains or (losses). Attach Form 4797		
15a	IRA distributions		
b	Taxable amount		
16a	Pensions and annuities		
b	Taxable amount		
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	-67	
18	Farm income or (loss). Attach Schedule F		
19	Unemployment compensation		
20a	Social security benefits		
b	Taxable amount		
21	Other income. List type and amount	ASSOCIATION OF BAY AREA G 1,950	
22	Combine the amounts in the far right column for lines 7 through 21. This is your total income	449,057	
23	Educator expenses		
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ		
25	Health savings account deduction. Attach Form 8889		
26	Moving expenses. Attach Form 3903		
27	Deductible part of self-employment tax. Attach Schedule SE	138	
28	Self-employed SEP, SIMPLE, and qualified plans		
29	Self-employed health insurance deduction		
30	Penalty on early withdrawal of savings		
31a	Alimony paid		
b	Recipient's SSN		
32	IRA deduction		
33	Student loan interest deduction		
34	Reserved for future use		
35	Reserved for future use		
36	Add lines 23 through 35	138	
37	Subtract line 36 from line 22. This is your adjusted gross income	448,919	

Form **1040** Tax Return Reconciliation Worksheet, Page 2 **2022**

Name **MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR** Tp TIN [REDACTED]

38 Amount from line 37 (adjusted gross income) **38** **448,919**

39a Check You were born before January 2,1958, Blind. Spouse was born before January 2,1958, Blind. **Total boxes checked** **39a**

b If your spouse itemizes on a separate return or you were a dual-status alien, check here **39b**

40 **Itemized deductions** (from Schedule A) or your **standard deduction** (see left margin) **40** **37,050**

40b **40b**

41 Subtract line 40 and 40b from line 38 **41** **411,869**

42 Qualified business income deduction (see instructions) **42** **7**

43 **Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- **43** **411,862**

44 Tax (see instr.). Check if any from: a Form(s) 8814 b Form 4972 c **44** **79,487**

45 **Alternative minimum tax** (see instructions). Attach Form 6251 **45**

46 Excess advance premium tax credit repayment. Attach Form 8962 **46**

47 Add lines 44, 45, and 46 **47** **79,487**

48 Foreign tax credit. Attach Form 1116 if required **48** **15**

49 Credit for child and dependent care expenses. Attach Form 2441 **49** **1,200**

50 Education credits from Form 8863, line 19 **50**

51 Retirement savings contributions credit. Attach Form 8880 **51**

52 Child tax credit/credit for other dependents **52** **1,550**

53 Residential energy credits. Attach Form 5695 **53**

54 Other credits from Form: a 3800 b 8801 c **54**

55 Add lines 48 through 54. These are your **total credits** **55** **2,765**

56 Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- **56** **76,722**

57 Self-employment tax. Attach Schedule SE **57** **275**

58 Unreported social security and Medicare tax from Form: a 4137 b 8919 **58**

59 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required **59**

60a Household employment taxes from Schedule H **60a**

b First-time homebuyer credit repayment. Attach Form 5405 if required **60b**

61 Taxes from: a Form 9959 b Form 9960 c Instructions; enter code(s) **SEE STATEMENT** **61** **4,416**

62 Section 965 net tax liability installment from Form 965-A **62**

63 Add lines 56 through 61. This is your **total tax** **63** **81,413**

64 Federal income tax withheld from:

a Form(s) W-2 **64a** **58,225**

b Form(s) 1099 **64b**

c Other forms **64c** **426**

65 2022 estimated tax payments and amount applied from 2021 return **65**

66 **Earned income credit (EIC)** **66**

67 Additional child tax credit. Attach Schedule 8812 **67**

68 American opportunity credit from Form 8863, line 8 **68**

69 Recovery rebate credit **69**

70 Net premium tax credit. Attach Form 8962 **70**

71 Amount paid with request for extension to file **71**

72 Excess social security and tier 1 RRTA tax withheld **72**

73 Credit for federal tax on fuels. Attach Form 4136 **73**

74 Other payments and refundable credits **74**

75 **Total pymts.** Add lines 64 - 74. **75** **58,651**

Refund **76** If line 75 is more than line 63, subtract line 63 from line 75. This is the amount you **overpaid** **76**

77a Amount of line 76 you want **refunded to you**. If Form 8888 is attached, check here **77a**

b Routing number **c** Type: Checking Savings

d Account number

78 Amount of line 76 you want **applied to your 2023 estimated tax** **78**

Amount You Owe **79** **Amount you owe.** Subtract line 75 from line 63. For details on how to pay, see instructions **79** **23,348**

80 Estimated tax penalty (see instructions) **80** **586**

Int/Pen Date filed Int Fall to file Fall to pay Total

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes. Complete below. No Personal identification no. (PIN) [REDACTED]

Designee's Name **ANTHONY J. LUNA** Phone no. [REDACTED]

Other Info Taxpayer Daytime phone number Taxpayer: Occupation **ELECTED OFFICIAL** IRS Identity Protection PIN

Spouse: Occupation **PRESIDENT** IRS Identity Protection PIN

Taxpayer Spouse Email address [REDACTED]

Form 1040	Partner's Basis Worksheet Page 1	2022
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number [REDACTED]
Name of Entity NMCS LLC	EIN 82-0960705
Passive Activity Type OTHER PASSIVE	K1 Unit 1

1. Beginning of year basis. Per IRC 705(a)(2) do not enter an amount below zero	1.	<u>4,155</u>
Increases to basis:		
2. Capital contributions: Cash	2.	
3. Capital contributions: Property (adjusted basis)	3.	
4. Increase in share of partnership liabilities	4.	
5. Ordinary business income	5.	
6. Net rental real estate income	6.	
7. Other net rental income	7.	
8. Interest	8.	
9. Dividends	9.	
10. Royalties	10.	
11. Net short-term capital gain	11.	
12. Net long-term capital gain	12.	
13. Net 28% rate capital gain	13.	
14. Net section 1231 gain and ordinary business gains	14.	<u>4,369</u>
15. Tax-exempt interest, other tax-exempt income, and recapture of credits	15.	
16. Other income	16.	
17. Excess of deductions for depletion over basis of property (other than oil and gas)	17.	
18. Other increases	18.	
19. Total increases to basis. Combined lines 2 through 18	19.	<u>4,369</u>
20. Adjusted basis before items decreasing basis. Add line 1 and line 19	20.	<u>8,524</u>
Decreases to basis:		
21. Distributions: Cash and marketable securities (Sch K-1 (1065), Box 19 A)	21.	
22. Distributions: Property (adjusted basis) (Sch K-1 (1065), Box 19 C)	22.	
23. Decrease in share of partnership liabilities	23.	<u>SEE STATEMENT</u>
24. Total distributions. Combine lines 21 through 23	24.	<u>1,752</u>
25. Nondeductible and non-capital expenses.	25.	<u>0</u>
26. Oil and gas property depletion deduction up to adjusted basis of property	26.	
27. Other decreases	27.	
28. Total decreases to basis except items of loss and deductions. Combine lines 24 through 27	28.	<u>1,752</u>
29. Adjusted basis before items of loss or deductions (Subtract line 28 from line 20. Do not enter less than zero)	29.	<u>6,772</u>
30. Partnership losses and deductions applied against basis. (See Partner's Basis Worksheet Page 2)	30.	<u>67</u>
31. Basis at the end of the year. (Subtract line 30 from line 29. Do not enter less than zero)	31.	<u>6,705</u>

Gain Recognized on Distributions

32. Total distributions less property distributions. Subtract line 22 from line 24	32.	<u>1,752</u>
33. Adjusted basis before items decreasing basis (line 20) less gain from entire disposition of partnership on line 27.	33.	<u>8,524</u>
34. Gain recognized on excess distributions. (Subtract line 33 from line 32)	34.	<u>0</u>
• Sch E page 2, ordinary income		
• Sch D/8949, short-term capital gain		
• Sch D/8949, long-term capital gain		
35. Gain recognized on appreciated property	35.	
36. Total gain recognized on distributions	36.	<u>0</u>

Form 1040	Partner's Basis Worksheet Page 2	2022
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number
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Name of Entity NMCS LLC	EIN 82-0960705
Passive Activity Type OTHER PASSIVE	K1 Unit 1

Description	Suspended Amount	Current Year	Total Loss	Percent	Allowed Loss	Disallowed Loss Carryforward
Nondeductible noncap exp Nondeductible expenses						
Ptrship losses and deductions						
Ordinary business loss		67	67	1.0000	67	
Net rental real estate loss						
Other net rental loss						
Short-term capital loss						
Long-term capital loss						
28% capital loss						
Section 1231 loss						
4797 - Ordinary loss						
Other portfolio loss						
1256 contracts/straddles						
Other losses - Sch E						
Other losses - 1040 Sch 1						
Section 179 expense						
Cash contributions						
Cash contributions (30%)						
Noncash contrib (50%)						
Noncash contrib (30%)						
Cap gain prop 50% (30%)						
Cap gain prop (20%)						
Portfolio deduct (other)						
Investment interest expense						
Depletion						
Deductions-royalty income						
Section 59(e)(2) expenditures						
Preproductive period exp.						
Reforestation expense ded.						
Foreign taxes						
Other deductions						
Total losses and deductions		67	67	1.0000	67	

Federal Statements

NMCS LLC

Partner's Basis Worksheet Page 1 - Decrease in Share of Partnership Liabilities

Description	Amount	Amount
2022 SHARE OF PARTNERSHIP LIABILITIES (SCH K-1 (1065) ITEM K)	\$	\$
1. NONRECOURSE		
2. QUALIFIED NONRECOURSE FINANCING		
3. RECOURSE		
4. 2022 TOTAL SHARE OF PARTNERSHIP LIABILITIES. COMBINE LINES 1 THROUGH 3.		
2021 SHARE OF PARTNERSHIP LIABILITIES (SCH K-1 (1065) ITEM K)		
5. NONRECOURSE	1,752	
6. QUALIFIED NONRECOURSE FINANCING		
7. RECOURSE		
8. 2021 TOTAL SHARE OF PARTNERSHIP LIABILITIES. COMBINE LINES 5 THROUGH 7.		1,752
9. SUBTRACT LINE 8 FROM LINE 4		-1,752
10. PARTNERSHIP LIABILITIES ASSUMED DURING THE TAX YEAR		
11. DECREASE IN SHARE OF PARTNERSHIP LIABILITIES. COMBINE LINES 9 AND 10.		-1,752

Form **1040** **Broker Reconciliation Worksheet** **2022**

Name(s) of Account holder **MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR** Taxpayer identification number [REDACTED]

Payer's name **TD AMERITRADE** Account number [REDACTED]

Form/Schedule/Worksheet	Form/Sch Line No.	Form 1099		Amount
		Name	Box No(s)	
Schedule B				
Part I - Interest	1	1099-INT	1, 3, 10	18
Part II - Ordinary Dividends	5	1099-DIV	1a	389
Nondividend distributions		1099-DIV	3	
Schedule D				
Short-term 1099B transactions with no adjustments, basis reported to IRS	1a	1099-B		
Long-term 1099B transactions with no adjustments, basis reported to IRS	8a	1099-B		
Part II - Capital gain distributions	13	1099-DIV	2a	
28% Rate Capital Gain Worksheet (Schedule D, line 18)	1, 4	1099-DIV, B	2d, 3	
Unrecaptured Section 1250 Gain Worksheet (Schedule D, line 19)	11	1099-DIV	2b	
Schedule A				
State and local income taxes withheld	5a	1099 ALL	17, 15, 16	
Foreign tax deduction	6	1099-INT, DIV	6, 7	
Form 1040				
Tax-exempt interest	2a	1099-INT	8	
Tax-exempt interest dividends	2a	1099-DIV	1f	
Qualified dividends	3a	1099-DIV	1b	311
Penalty on early withdrawal of savings (Schedule 1)	18	1099-INT	2	
Foreign tax credit (Credit claimed without filing Form 1116) (Schedule 3)	1	1099-INT, DIV	6, 7	
Federal income tax withheld	25b	1099 ALL	4	
Section 199A dividends	13	1099-DIV	5	36
Form 1116				
Part II Foreign taxes paid or accrued	8	1099-INT, DIV	6, 7	15
Form 6251				
Interest from specified private activity bonds exempt from regular tax	2g	1099-INT	9	
Interest dividends from specified private activity bonds exempt from regular tax	2g	1099-DIV	12	
Form 8949				
Basis reported to IRS				
Short-term - 8949 Box A	1	1099-B		
Short-term - 8949 Box A (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box D	1	1099-B		
Long-term - 8949 Box D (column g) - Wash sale loss disallowed *	1	1099-B		
Basis not reported to IRS				
Short-term - 8949 Box B	1	1099-B		
Short-term - 8949 Box B (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box E	1	1099-B		
Long-term - 8949 Box E (column g) - Wash sale loss disallowed *	1	1099-B		
Not reported on Form 1099-B				
Short-term - 8949 Box C	1	1099-B		
Short-term - 8949 Box C (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box F	1	1099-B		
Long-term - 8949 Box F (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box F - Section 1202 gain exclusion adjustment	1	1099-DIV	2c	
Form 6781				
Net section 1256 contracts loss election				
Part I - Section 1256 Contracts Marked to Market	1	1099-B	11	
Form 1099-B adjustments	4			
Net section 1256 contracts loss carry back	6			
Form 4952				
Investment interest expenses - margin interest	1			

* Form 8949 column (g), amount of adjustment, is reported as wash sale loss disallowed for any transaction with a "W" in column (f) Code(s) from instructions. Therefore, transactions with multiple codes in column (f), may not reflect the true disallowed wash sale loss.

Form 1040	Qualified Dividends and Capital Gain Tax Worksheet	2022
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number [REDACTED]
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1. Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 15. However, if you are filing Form 2555 (relating to foreign earned income), enter the amount from line 3 of the Foreign Earned Income Tax Worksheet	1.	<u>411,862</u>	
2. Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 3a*	2.	<u>311</u>	
3. Are you filing Schedule D?*			
<input checked="" type="checkbox"/> Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or 16 is a loss, enter -0-	}		
<input type="checkbox"/> No. Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 7		3.	<u>77,819</u>
4. Add lines 2 and 3	4.	<u>78,130</u>	
5. Subtract line 4 from line 1. If zero or less, enter -0-	5.	<u>333,732</u>	
6. Enter: \$41,675 if single or married filing separately, \$83,350 if married filing jointly or qualifying surviving spouse, \$55,800 if head of household.	}		
		6.	<u>83,350</u>
7. Enter the smaller of line 1 or line 6	7.	<u>83,350</u>	
8. Enter the smaller of line 5 or line 7	8.	<u>83,350</u>	
9. Subtract line 8 from line 7. This amount is taxed at 0%	9.	<u>0</u>	
10. Enter the smaller of line 1 or line 4	10.	<u>78,130</u>	
11. Enter the amount from line 9	11.	<u>0</u>	
12. Subtract line 11 from line 10	12.	<u>78,130</u>	
13. Enter: \$459,750 if single, \$258,600 if married filing separately, \$517,200 if married filing jointly or qualifying surviving spouse, \$488,500 if head of household.	}		
		13.	<u>517,200</u>
14. Enter the smaller of line 1 or line 13	14.	<u>411,862</u>	
15. Add lines 5 and 9	15.	<u>333,732</u>	
16. Subtract line 15 from line 14. If zero or less, enter -0-	16.	<u>78,130</u>	
17. Enter the smaller of line 12 or line 16	17.	<u>78,130</u>	
18. Multiply line 17 by 15% (0.15)	18.	<u>11,720</u>	
19. Add lines 9 and 17	19.	<u>78,130</u>	
20. Subtract line 19 from line 10	20.	<u>0</u>	
21. Multiply line 20 by 20% (0.20)	21.	<u>0</u>	
22. Figure the tax on the amount on line 5. If the amount on line 5 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 5 is \$100,000 or more, use the Tax Computation Worksheet	22.	<u>67,767</u>	
23. Add lines 18, 21, and 22	23.	<u>79,487</u>	
24. Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet	24.	<u>92,259</u>	
25. Tax on all taxable income. Enter the smaller of line 23 or line 24. Also include this amount on the entry space on Form 1040, 1040-SR, or 1040-NR, line 16. If you are filing Form 2555, do not enter this amount on the entry space on 1040, 1040-SR, or 1040-NR, line 16. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet	25.	<u>79,487</u>	

*If you are filing Form 2555, these lines may be reduced (but not below zero) by your capital gain excess. Please refer to Foreign Earned Income Tax Worksheets - Excess Capital Gain for detail if the lines have been reduced.

Form 1040	General Sales Tax Deduction Worksheet	2022
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Name as shown on return **MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR** Taxpayer Identification Number XXXXXXXXXX

State of CALIFORNIA	Locality of
-------------------------------	-------------

General Sales Tax from IRS Tables

- | | | |
|---|----|-----------------------------|
| 1. Enter the amount of adjusted gross income (AGI) from Form 1040 or 1040-SR, Line 11 | 1. | <u>448,919</u> |
| 2. Add the nontaxable amounts from Form 1040 or 1040-SR, lines 2b, 4a, 5a, 6a (Exclude rollovers and tax-free Sec. 1035 exchanges) | 2. | <u> </u> |
| 3. Add the following nontaxable items: nontaxable combat pay, public assistance, veteran's benefits, and workers' compensation. Also include any amounts which increase spendable income, such as the refundable portion of refundable tax credits received in 2022 | 3. | <u> </u> |
| 4. Add lines 1 through 3, this is income for general sales tax table purposes | 4. | <u>448,919</u> |
| 5. Enter the amount from the sales tax table in the Schedule A instructions.
Part-year residents, complete lines 6 - 8; Full-year residents skip lines 6 - 8 and enter the amount from line 5 on line 9 | 5. | <u>2,335</u> |
| 6. Enter the number of days of residence in state | 6. | <u> </u> |
| 7. Total days in year | 7. | <u>365</u> |
| 8. Divide line 6 by line 7 (rounded to at least 3 decimal places) | 8. | <u> </u> |
| 9. Multiply line 5 by line 8, this is the deductible general sales tax using the IRS table. | 9. | <u>2,335</u> |

Local Sales Tax Using IRS Tables

- | | | |
|--|-----|-----------------------------|
| 10. Enter the amount from the sales tax table in the Schedule A instructions. | 10. | <u> </u> |
| 11. If you are a resident of Alaska, Arizona, Arkansas, Colorado, Georgia, Illinois, Louisiana, Mississippi, Missouri, New York, North Carolina, South Carolina, Tennessee, Utah, or Virginia, enter the amount from the applicable Optional Local Sales Tax Table in the Schedule A instructions. | 11. | <u> </u> |
| 12. Enter the local general sales tax rate (exclude statewide local sales tax rate) | 12. | <u> </u> |
| 13. Enter the state general sales tax rate (include statewide local sales tax rate) | 13. | <u> </u> |
| 14. Divide line 12 by line 13 (rounded to at least 3 decimal places) | 14. | <u> </u> |
| 15. If you entered an amount on line 11, multiply line 11 by line 12. This is the local sales tax using the optional local sales tax tables.
Part-year residents, complete lines 16 - 18; Full-year residents skip lines 16 - 18 and enter the amount from line 15 on line 19
If you did not enter an amount on line 11, multiply line 10 by line 14. This is the local sales tax using the optional state and certain local sales tax tables.
Part-year residents, complete lines 16 - 18; Full-year residents skip lines 16 - 18 and enter the amount from line 15 on line 19 | 15. | <u> </u> |
| 16. Enter the number of days of residence in locality | 16. | <u> </u> |
| 17. Total days in year | 17. | <u>365</u> |
| 18. Divide line 16 by line 17 (rounded to at least 3 decimal places) | 18. | <u> </u> |
| 19. Multiply line 15 by line 18. This is the deductible general local sales tax using the IRS tables. | 19. | <u> </u> |

General Sales Tax Summary

- | | | |
|---|-----|-----------------------------|
| 20. Enter the sum of line 9 from all General Sales Tax Deduction Worksheets | 20. | <u>2,335</u> |
| 21. Enter the sum of line 19 from all General Sales Tax Deduction Worksheets | 21. | <u> </u> |
| 22. Add lines 20 and 21, this is the total General Sales taxes using the tables | 22. | <u>2,335</u> |
| 23. Enter the actual state and local general sales taxes paid | 23. | <u> </u> |
| 24. Enter the greater of line 22 or line 23 | 24. | <u>2,335</u> |
| 25. Enter the state and local taxes paid on specified items (major purchases) | 25. | <u> </u> |
| 26. Add lines 24 and 25, this is the deductible General Sales tax | 26. | <u>2,335</u> |
| 27. Enter total state and local income taxes paid | 27. | <u>175,123</u> |

Enter the greater of line 26 or 27 on Schedule A, line 5a. If line 26 is greater, mark the Schedule A, line 5a box.

Form 1040	Child Tax Credit Limit Worksheets A and B	2022
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number [REDACTED]
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Credit Limit Worksheet A

1. Enter the amount from Form 1040, 1040-SR, or Form 1040NR, line 18	1. <u>79,487</u>
2. Add the amounts from Schedule 3, lines 1, 2, 3, 4, 6d, 6e, 6f, and 6g; plus Form 5695, ln 30. Enter the total	2. <u>1,215</u>
3. Subtract line 2 from line 1	3. <u>78,272</u>
4. Do you meet all the following conditions? <input type="checkbox"/> You are claiming one or more of the following credits: Form 8396; Form 8839; Form 5695, Part I; Form 8859 <input type="checkbox"/> You are not filing Form 2555. <input type="checkbox"/> Schedule 8812, line 4 is more than zero. <input checked="" type="checkbox"/> No. Enter -0- <input type="checkbox"/> Yes. Enter the amount from the Credit Limit Worksheet B.	4. <u>0</u>
5. Subtract line 4 from line 3. Enter the result here and on Schedule 8812, line 13	5. <u>78,272</u>

Credit Limit Worksheet B

Use this worksheet **only** if you checked "Yes" on line 4 of the Credit Limit Worksheet A above.

1. Enter the amount from Form 8812, line 12	1. _____
2. Number of qualifying children under age 17 with the required social security number: _____ x \$1,500. Enter the result	2. _____
3. Enter the earned income from line 7 of the Child Tax Credit Earned Income Worksheet	3. _____
4. Is the amount on line 3 more than \$2,500? <input type="checkbox"/> No. Leave line 4 blank, enter -0- on line 5, and go to line 6. <input type="checkbox"/> Yes. Subtract \$2,500 from the amount on line 3. Enter the result.	4. _____
5. Multiply the amount on line 4 by 15% (.15) and enter the result	5. _____
6. On line 2 of this worksheet, is the amount \$4,500 or more? <input type="checkbox"/> No. If you are a bona fide resident of Puerto Rico and line 5 above is less than line 1 above, go to line 7. Otherwise, leave lines 7 through 10 blank, enter -0- on line 11, and go to line 12. <input type="checkbox"/> Yes. If line 5 above is equal to or more than line 1 above, leave lines 7 through 10 blank, enter -0- on line 11, and go to line 12 below. Otherwise go to line 7.	7. _____
7. If your employer withheld or you paid Additional Medicare Tax or Tier 1 RRTA taxes, use the Additional Medicare Tax and RRTA Tax Worksheet to figure the amount to enter; otherwise enter the total social security and Medicare taxes withheld from your pay (and your spouse's if filing a joint return). These taxes should be shown in boxes 4 and 6 of your Form(s) W-2.	7. _____
8. Enter the total of the amounts from Schedule 1, line 15 and Schedule 2, lines 5, 6 and 13	8. _____
9. Add lines 7 and 8. Enter the total	9. _____
10. Enter the amounts from Form 1040/1040-SR, line 27 and Schedule 3, line 11; 1040-NR, Schedule 3, line 11	10. _____
11. Subtract line 10 from line 9. If the result is zero or less, enter -0-	11. _____
12. Enter the larger of line 5 or line 11	12. _____
13. Enter the smaller of line 2 or line 12	13. _____
14. Is the amount on line 13 of this worksheet more than the amount on line 1? <input type="checkbox"/> No. Subtract line 13 from line 1. Enter the result. <input type="checkbox"/> Yes. Enter -0-.	14. _____
15. Enter the total of the amounts from Schedule 3, lines 6c, 6g, 6h, and Form 5695, line 15. Enter this amount on line 4 of the Credit Limit Worksheet A	15. _____

Form 1040	Foreign Tax Credit Carryover Worksheet	2022
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number XXXXXXXXXX
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Foreign Income Category PASSIVE INCOME

Regular

	Foreign Taxes Available	Maximum Credit Allowable	Unused (+) or Excess (-)	Carryback Applied from CY	Carryforward Applied to CY	* CY Unused (+) or Excess (-)
2012						
2013						
2014						
2015						
2016						
2017						
2018						
2019						
2020						
2021						
2022	15	66	-51			-51

* Amounts flow to the Foreign Tax Credit Carryover Report

Alternative Minimum Tax

	Foreign Taxes Available	Maximum Credit Allowable	Unused (+) or Excess (-)	Carryback Applied from CY	Carryforward Applied to CY	* CY Unused (+) or Excess (-)
2012						
2013						
2014						
2015						
2016						
2017						
2018						
2019						
2020						
2021						
2022	15	38	-23			-23

* Amounts flow to the Foreign Tax Credit Carryover Report

Form 1040	Sale of Home Worksheets	2022
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number [REDACTED]
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- Only the sale of the home portion is reported on this worksheet. Gains that qualify for exclusion on business/rental portion must divide the maximum exclusion between the business and personal part. Please see IRS Publication 523, *Selling Your Home* for details.

Description of home sold

Worksheet 2. Gain (or Loss), Exclusion, and Taxable Gain

Elected to pay tax on the entire gain and not take the exclusion <input type="checkbox"/>	
Part 1: Gain (or Loss) on Sale	
1. Selling price of home	1. <u>1,683,000</u>
2. Selling expenses (including commissions, advertising and legal fees, and seller-paid loan charges)	2. <u>94,550</u>
3. Subtract line 2 from line 1. This is the amount realized	3. <u>1,588,450</u>
4. Adjusted basis of home sold	4. <u>1,015,000</u>
5. Gain or (loss) on the sale. Subtract line 4 from line 3. If this is a loss, stop here	5. <u>573,450</u>
Part 2: Exclusion and Taxable Gain	
6. Enter any depreciation allowed or allowable on the property for periods after May 6, 1997. If none enter -0-	6. <u>0</u>
7. Subtract line 6 from line 5. If the result is less than zero, enter -0-	7. <u>573,450</u>
8. Aggregate number of days of nonqualified use after 2008. If none, enter -0-. If line 8 is equal to zero, skip to line 12 and enter the amount from line 7 on line 12	8. _____
9. Number of days taxpayer owned the property	9. _____
10. Divide the amount on line 8 by the amount on line 9. Enter the result as a decimal (rounded to at least 3 places). But do not enter an amount greater than 1.00	10. _____
11. Gain allocated to nonqualified use. (Line 7 multiplied by line 10)	11. _____
12. Gain eligible for exclusion. Subtract line 11 from line 7	12. <u>573,450</u>
13. If you qualify to exclude gain on the sale, enter your maximum exclusion. (See IRS Publication 523). If you do qualify for a reduced maximum exclusion, enter the amount from Worksheet 3, line 7. If you do not qualify to exclude gain, enter -0-	13. <u>500,000</u>
14. Exclusion. Enter the smaller of line 12 or line 13	14. <u>500,000</u>
15. Taxable gain. Subtract line 14 from line 5. Report your taxable gain on Form 8949 and Schedule D (Form 1040) as described under "Reporting the Sale" in IRS Publication 523. If the amount on line 6 of this worksheet is more than zero, complete line 16	15. <u>73,450</u>
16. Enter the smaller of line 6 or line 15. Enter this amount on line 12 of the Unrecaptured Section 1250 Gain Worksheet in the instructions for Schedule D (Form 1040)	16. _____

Worksheet 3. Reduced Maximum Exclusion

	(a) You	(b) Your Spouse
1. Maximum amount	1. _____	_____
2a. Enter the number of days that you used the property as a main home during the 5-year period ending on the date of sale. (If married filing jointly, fill in columns (A) and (B))	2a. _____	_____
b. Enter the number of days that you owned the property during the 5-year period ending on the date of sale. (If married filing jointly and one spouse owned the property longer than the other spouse, both spouses are treated as owning the property for the longer period)	b. _____	_____
c. Enter the smaller of line 2a or 2b	c. _____	_____
3. Have you (or your spouse if filing jointly) excluded gain from the sale of another home during the 2-year period ending on the date of this sale? No. Skip line 3 and enter the number of days from line 2c on line 4 Yes. Enter the number of days between the date of the most recent sale of	3. _____	_____
4. Enter the smaller of line 2c or 3	4. _____	_____
5. Divide the amount on line 4 by 730 days. Enter the result as a decimal (rounded to at least 3 places). But do not enter an amount greater than 1.000	5. _____	_____
6. Multiply the amount on line 1 by the decimal amount on line 5	6. _____	_____
7. Reduced maximum exclusion. Add the amounts in columns (a) and (b) of line 6. Enter it here and on Worksheet 2, line 13	7. _____	_____

Form 1040	Roth IRA Worksheets	2022 <small>Pub 590A</small>
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number [REDACTED]
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	Taxpayer IRA	Spouse IRA
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Modified adjusted gross income for Roth IRA contributions _____

Roth IRA Contribution Worksheet

<ol style="list-style-type: none"> 1. Enter your taxable compensation 1. _____ 2. Enter the smaller of line 1 or \$6000 (\$ 7000 if 50 or older) 2. _____ 3. Enter your total contributions to traditional IRAs for 2022 3. _____ 4. Subtract line 3 from line 2 4. _____ 5. Enter: \$214,000 if married filing jointly or qualifying surviving spouse; \$10,000 if married filing separately and you lived with your spouse at any time during the year. All other filers, enter \$144,000 5. _____ 6. Enter your modified AGI for purposes of Roth IRAs 6. _____ 7. Subtract line 6 from line 5. If zero or less, stop here; you may not contribute to a Roth IRA for 2022. See Recharacterizations on page 3 of Form 8606 instructions if you made Roth IRA contributions for 2022 7. <u> 0 </u> <u> 0 </u> 8. If line 5 above is \$144,000, enter \$15,000; otherwise, enter \$10,000. If line 7 is greater than or equal to line 8, skip lines 9 and 10, and enter the amount from line 4 on line 12 8. _____ 9. Divide line 7 by line 8 and enter the result as a decimal (rounded to at least 3 places). Do not enter more than "1.000" 9. _____ 10. Multiply line 2 by line 9. If the result is not a multiple of \$10, round it up to the next multiple of \$10 (e.g., round \$611.40 to \$620) 10. _____ 11. Enter the greater of \$200 or the amount on line 10 11. _____ 12. Maximum 2022 Roth IRA contribution. Enter the smaller of line 4 or line 11. See Recharacterizations on page 3 of Form 8606 instructions if you contributed more than this amount to Roth IRAs for 2022 12. _____ 		
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	Taxpayer IRA	Spouse IRA
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Modified adjusted gross income for Roth IRA conversions (does not include minimum required distributions) _____

Worksheet for Determining Roth IRA Basis Amounts

<ol style="list-style-type: none"> 1. Basis in your Roth IRA contributions as of December 31, 2021. 1. _____ 2. Enter your Roth IRA contributions for 2022, adjusted for any recharacterizations. 2. _____ 3. Add lines 1 and 2. 3. _____ 4. Enter the amount, if any, from Form 8606, line 19. 4. _____ 5. Contribution basis loss. 5. _____ Basis in your Roth IRA contributions as of December 31, 2022. 6. Subtract lines 4 and 5 from line 3. If zero or less, enter -0- 6. <u> 0 </u> <u> 0 </u> 7. Basis in your Roth IRA conversions as of December 31, 2021. 7. <u> 42,027 </u> <u> 17,013 </u> 8. Enter the amount(s), if any, from Form 8606 line 16. 8. _____ 9. Add lines 7 and 8. 9. <u> 42,027 </u> <u> 17,013 </u> 10. Enter the amount, if any, from Form 8606, line 23. 10. _____ 11. Conversion basis loss. 11. _____ Basis in your Roth IRA conversions as of December 31, 2022. 12. Subtract lines 10 and 11 from line 9. If zero or less, enter -0- 12. <u> 42,027 </u> <u> 17,013 </u> 		
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Form 1040

Nonrefundable Personal Credit Limitation Worksheet

2022

Name MATTHEW W. MAHAN & SILVIA WEDAD SCANDAR

Taxpayer Identification Number

Amounts from tax return

- a. Regular tax (Form 1040, line 16) 79,487
b. AMT (Form 1040, Schedule 2, line 1) 1,550
c. Exc adv PTC (Form 1040, Sch 2, ln 2)
d. Foreign tax cr (Form 1040, Sch 3, ln 1) 15
e. Child care cr (Form 1040, Sch 3, ln 2) 1,200
f. Education cr (Form 1040, Sch 3, ln 3)
g. Retirement cr (Form 1040, Sch 3, ln 4)
h. Child tax cr, Wrk 8, line 14
i. Child tax cr (Form 1040, line 19)
j. Form 5695, line 30
k. Form 5695, line 15
l. Form 8396, line 9
m. Elderly cr (Sch R, line 22)
n. Form 8859, line 3
o. Form 8910, line 15
p. Form 8936, line 23
q. Form 8834, line 7
r. Form 3800, line 38
s. Form 8839, line 16
t. Form 8978, line 14

Form 2441

- 1. Total tax available 79,487
2. Other nonrefundable personal credits allowed 15
3. Limitation based on tax liability, line 1 minus line 2 79,472
4. Amount from line 3 reported on F2441, LN 11
5. Code(s) for tax amount(s) from above A B C
6. Code(s) for credit amount(s) from above D T

Schedule R

- Form 8880
Form 5695, Part I
Form 5695, Part II
Form 8839
Form 8936, Part III
Form 8396
Form 8839
Form 8639

Form 8910, Part III

- 1. Total tax available
2. Other nonrefundable personal credits allowed
3. Limitation based on tax liability, line 1 minus line 2
4. Amount from line 3 reported on
5. Code(s) for tax amount(s) from above
6. Code(s) for credit amount(s) from above

Form 8911, Part III

- Form 8936, Part III
Form 8396
Form 8839
Form 8639

Form 8859

- 1. Total tax available
2. Other nonrefundable personal credits allowed
3. Limitation based on tax liability, line 1 minus line 2
4. Amount from line 3 reported on
5. Code(s) for tax amount(s) from above
6. Code(s) for credit amount(s) from above

Form 8801

- Form 8801

Form 8863, Line 19

- 1. Enter the amount from Form 8863, line 18
2. Enter the amount from Form 8863, line 9
3. Add lines 1 and 2
4. Enter the amount from Form 1040, line 18
5. Enter the total of code(s) d, e, m and t from above
6. Subtract line 5 from line 4
7. Enter the smaller of line 3 or line 6 here and on Form 8863, line 19

Form 1040	Passive Activity Deduction Worksheet	2022
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR		Taxpayer Identification Number [REDACTED]
Activity <u>NMCS LLC</u>	Form <u>K1</u>	Unit <u>1</u>
Type OTHER PASSIVE Entire Disposition of Activity		

Regular Tax Loss Calculations

	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized	Suspended Losses To Next Year
Operating		67	67	
Short-term capital loss				
Long-term capital loss				
28% rate capital loss				
Section 1231 loss				
Ordinary business loss				
Other Losses - 1040 Schedule 1				

Alternative Minimum Tax Loss Calculations

	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized	Suspended Losses To Next Year
Operating		67	67	
Short-term capital loss				
Long-term capital loss				
28% rate capital loss				
Section 1231 loss				
Ordinary business loss				
Other Losses - 1040 Schedule 1				

Schedule E

K-1 Reconciliation Worksheet - Qualified Business Income

2022

Name MATTHEW W. MAHAN & SILVIA WEDDAD SCANDAR

Taxpayer Identification Number

Entity Name NMCS LLC

EIN 82-0960705

Entity Type PARTNERSHIP

Screen K1

K1 Unit 1

Activity	Screen K1QBI Amount	QBI Items from Schedule K-1	Passive Activity Type			Qualified Business Income	Entire disposition of activity	
			Basis Limit Adjustment	At-risk Limit Adjustment	Passive Limitation		Prior Year Suspended QBI Passive / 179	Basis
Qualified Business Income	-67	-67				-67		
Ordinary business inc/loss								
Net rental real estate inc/-loss								
Other net rental income/-loss								
Royalties								
Section 1231 gain (loss)								
Section 179 expense								
Disallowed Section 179 exp								
Other income (loss)								
Other income/-loss Form 1040								
Reserved								
Other deductions								
4797 ordinary income / -loss								
Depletion								
UPE + Debt financed acquisi								
Deductible part of SE tax								
Self-employed health insurance								
Self-employed qualified plans								
Ordinary gains on distribution								
Total Qualified Business Income	-67					-67		

Form 8995 or 8995-A

Qualified business net (loss) carryforward from prior years Form 8995, line 3 or Form 8995-A (Schedule C), line 2

Activity	Pre-TCJA Passive	Post-TCJA Passive	Pre-TCJA Basis	Post-TCJA Basis	Pre-TCJA At-Risk	Post-TCJA At-Risk	Other carryovers
Suspended Loss Carryforwards							
Ordinary business loss							
Net rental real estate loss							
Other net rental loss							
Section 179 expense							
Depletion							
Section 59(e)(2) expenditure							
Preproductive period exp							
Reforestation expense ded							
Other deductions							
Other losses - Schedule E							
Dependent care expense							
4797 - Ordinary loss							
Other losses - 1040 Sch 1							
Section 1231 loss							

Form 1040	Net Earnings from Self-Employment Worksheet	2022
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number [REDACTED]
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	Taxpayer	Spouse
Farm profit or (loss)		
Schedule F		
Farm Partnerships - Schedule K-1, box 14, code A		
Auto expense from farm partnerships	()	()
Amortization from farm partnerships	()	()
Depreciation & Section 179 from farm partnerships	()	()
Depletion from farm partnerships	()	()
Other expenses from farm partnerships	()	()
Home office expenses from farm partnerships	()	()
Unreimbursed partnership expenses from farm partnerships	()	()
Debt financed acquisition interest from farm partnerships	()	()
Farm adjustment to SE Income		
Net farm profit or (loss) - Schedule SE line 1a	0	0
Conservation Reserve Program payments to social security/disability benefit recipients included on Sch F, in 4b or listed on Sch K-1 (Form 1065), box 20, code AH- Sch SE line 1b	(0)	(0)
Nonfarm profit or (loss)		
Schedule C (excluding minister Schedule C income reported below)		
Nonfarm partnerships - Schedule K-1, box 14, code A		
Auto expense from nonfarm partnerships	()	()
Amortization from nonfarm partnerships	()	()
Depreciation & section 179 from nonfarm partnerships	()	()
Depletion from nonfarm partnerships	()	()
Other expenses from nonfarm partnerships	()	()
Home office expenses from nonfarm partnerships	()	()
Unreimbursed partnership expenses from nonfarm partnerships	()	()
Debt financed acquisition interest from nonfarm partnerships	()	()
Nonfarm adjustment to SE income		
Self-employment income reported as other income	1,950	
Self-employment income from contracts and straddles		
Minister/clergy self-employment income (from Clergy Worksheet Page 3, line 7)		
Net nonfarm profit or (loss) - Schedule SE line 2	1,950	0
Other income items subject to and/or exempt from self-employment tax		
Fees received for services performed as a notary public	()	()
Earnings while debtor in a chapter 11 bankruptcy case		
Taxable community property income/-loss		
Exempt community property income/-loss	()	()
Net adjustment included on Schedule SE, line 3	0	0
Net profit (loss) from self-employment activities - Schedule SE line 3	1,950	0
Church employee income - Schedule SE, Page 1 line 5a		

Form 1040	Tax Refund Worksheet - 2022 State and Local Refunds	2023
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number [REDACTED]
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CA

1. 2022 payments paid in 2023	1.		
2. 2022 extension paid in 2023	2.		
3. 2022 additional payment paid in 2023	3.		
4. Total 2022 payments paid in 2023 (sum of lines 1 through 3)	4.		
5. Total payments on the 2022 return	5.	31,521	
6. Total 2022 overpayment/refund	6.	3,742	
7. 2022 refund attributable to tax paid in 2023 (line 4 divided by line 5 multiplied by line 6)	7.		
8. 2022 state/local tax refund attributable to tax paid in 2022 (line 6 minus line 7)	8.		3,742

1. 2022 payments paid in 2023	1.		
2. 2022 extension paid in 2023	2.		
3. 2022 additional payment paid in 2023	3.		
4. Total 2022 payments paid in 2023 (sum of lines 1 through 3)	4.		
5. Total payments on the 2022 return	5.		
6. Total 2022 overpayment/refund	6.		
7. 2022 refund attributable to tax paid in 2023 (line 4 divided by line 5 multiplied by line 6)	7.		
8. 2022 state/local tax refund attributable to tax paid in 2022 (line 6 minus line 7)	8.		

1. 2022 payments paid in 2023	1.		
2. 2022 extension paid in 2023	2.		
3. 2022 additional payment paid in 2023	3.		
4. Total 2022 payments paid in 2023 (sum of lines 1 through 3)	4.		
5. Total payments on the 2022 return	5.		
6. Total 2022 overpayment/refund	6.		
7. 2022 refund attributable to tax paid in 2023 (line 4 divided by line 5 multiplied by line 6)	7.		
8. 2022 state/local tax refund attributable to tax paid in 2022 (line 6 minus line 7)	8.		

1. 2022 payments paid in 2023	1.		
2. 2022 extension paid in 2023	2.		
3. 2022 additional payment paid in 2023	3.		
4. Total 2022 payments paid in 2023 (sum of lines 1 through 3)	4.		
5. Total payments on the 2022 return	5.		
6. Total 2022 overpayment/refund	6.		
7. 2022 refund attributable to tax paid in 2023 (line 4 divided by line 5 multiplied by line 6)	7.		
8. 2022 state/local tax refund attributable to tax paid in 2022 (line 6 minus line 7)	8.		

1. 2022 payments paid in 2023	1.		
2. 2022 extension paid in 2023	2.		
3. 2022 additional payment paid in 2023	3.		
4. Total 2022 payments paid in 2023 (sum of lines 1 through 3)	4.		
5. Total payments on the 2022 return	5.		
6. Total 2022 overpayment/refund	6.		
7. 2022 refund attributable to tax paid in 2023 (line 4 divided by line 5 multiplied by line 6)	7.		
8. 2022 state/local tax refund attributable to tax paid in 2022 (line 6 minus line 7)	8.		

Total of ALL 2022 state/local tax refunds attributable to tax paid in 2023 (sum of lines 7)	
Total of ALL 2022 state/local tax refunds attributable to tax paid in 2022 (sum of lines 8; for 2023 Tax Refund Wrk)	3,742

Form 1040	Tax Refund Worksheet - No Tax Benefit Derived	2023
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number
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2022 State and Local Refunds Not Taxable in 2023 Due to AMT

1. Total refund attributable to 2022 (from total on Wrk 10, Tax Refund Wrk - 2022 State and Local Refunds)		1.	<u>3,742</u>
2. 2022 regular tax	2.		<u>79,487</u>
3. 2022 AMT	3.		<u>0</u>
4. 2022 Total Tax (line 2 + line 3)	4.		<u>79,487</u>
5. 2022 Federal Marginal Tax Rate	5.		<u>0.240</u>
6. Tentative no benefit (line 3 divided by line 5)	6.		<u>0</u>
7. Adjustment (smaller of line 1 or line 6)	7.		<u>0</u>
8. Recalculated 2022 Itemized Deductions	8.		<u>0</u>
9. Recalculated 2022 Taxable Income	9.		<u>0</u>
10. Recalculated 2022 Tax	10.		<u>0</u>
Recalculated 2022 Tax using Sch D Tax Wrk or QDCGTW			
Recalculated 2022 Form 8615			
Recalculated 2022 Schedule J			
11. Recalculated 2022 AMT	11.		<u>0</u>
12. New 2022 Total Tax (line 10 + line 11)	12.		<u>0</u>
13. 2022 state and local refunds not taxable in 2023 due to AMT (equals line 7, if line 12 < or = line 4)	13.		<u>0</u>

The amount from Line 13 will carry to the 2023 Tax Refund Worksheet

2022 State and Local Refunds Not Taxable in 2023 Due to Zero Tax

1. Total refund attributable to 2022 (from total on Wrk 10, Tax Refund Wrk - 2022 State and Local Refunds)		1.	
2. 2022 regular tax after credits	2.		
3. Recalculated 2022 tax after credits	3.		
4. Difference, if any (line 2 - line 3)	4.		
5. 2022 state and local refunds not taxable in 2023 due to zero tax (equals line 1, if line 4 = zero)	5.		

The amount from Line 5 will carry to the 2023 Tax Refund Worksheet

2022 State and Local Refunds Not Taxable in 2023 Due to Sch A Tax Deduction Limitation

1. 2022 Schedule A line 5d - state and local taxes before limitation	1.		<u>208,372</u>
2. Total refund attributable to 2022 (from total on Wrk 10, Tax Refund Wrk - 2022 State and Local Refunds)	2.		<u>3,742</u>
3. Difference, if any (line 1 - line 2)	3.		<u>204,630</u>
4. 2022 Schedule A line 5e - limited state and local taxes	4.		<u>10,000</u>
5. Difference, if any (line 3 - line 4) (if line 5 >= zero, refund not taxable, skip to line 7)	5.		<u>194,630</u>
6. No Taxable Benefit Amount (Combine Line 2 + Line 5)	6.		
7. 2022 state/local refunds not taxable in 2023 due to Sch A tax limitation (equals (line 2, if line 5 >= zero) or (line 6, if line 6 is > zero))	7.		<u>3,742</u>

The amount from Line 7 will carry to the 2023 Tax Refund Worksheet

Federal Statements

Form 1040, Dividend Income

<u>Payer</u>	<u>Ordinary Dividends</u>	<u>Qualified Dividends</u>	<u>Section 199A Dividends</u>
TD AMERITRADE 95364	\$ <u>389</u>	\$ <u>311</u>	\$ <u>36</u>
TOTAL	\$ <u>389</u>	\$ <u>311</u>	\$ <u>36</u>

Federal Statements**Schedule A, Line 5a - State and Local Taxes**

Description	Amount
2021 ESTIMATES PAID IN 2022	\$ 142,000
STATE WITHHOLDING ON W-2S	26,049
STATE TAX PAYMENTS	5,472
STATE DISABILITY FUND W/H	1,602
TOTAL INCOME TAXES*	<u>175,123</u>
GENERAL SALES TAX	2,335
TOTAL SALES TAXES	<u>2,335</u>

*INCOME TAXES ARE BEING DEDUCTED

Schedule A, Line 5b - Real Estate Taxes

Description	Amount
ESCROW	\$ 9,143
ESCROW	2,632
PROP TAX	21,474
TOTAL	<u>\$ 33,249</u>

Schedule A, Line 8a - Home Mortgage Interest & Points From Form 1098

Description	Amount
MORTG INTEREST ALLOCATION	\$ 16,668
SOLD HOUSE	3,731
TOTAL	<u>\$ 20,399</u>

Schedule A, Line 8c - Points Not Reported on Form 1098

Description	Amount
THE MONEY SOURCE	\$ 1,666
TOTAL	<u>\$ 1,666</u>

Federal Statements

TD Ameritrade

Form 1116 line 1a - Gross Income From Sources Within Country

Description	A	B	C
FOREIGN QUALIFIED DIVIDENDS FRGN QUALIFIED DIVS - NO ADJUSTMENT	\$ 311	\$	\$
OTHER FOREIGN GROSS INCOME 1116 FOREIGN GROSS INCOME	353		
- 1116 FOREIGN QUALIFIED DIVIDENDS	311		
	42		
TOTAL	353		

TD Ameritrade

Form 1116 line 3e - Gross Income from All Sources

Description	Amount
1040 LN 1/2B-5B SCH 1 LN 1/2A/7/8	\$ 371,305
GROSS FORM 4797 GAINS	4,369
GAIN ON SALE OF HOME, HOME WS LINE 5	573,450
TOTAL	\$ 949,124

TD Ameritrade

Form 1116 line 4a - Apportioned Home Mortgage Interest

Description	A	B	C
1116 LINE 3D GROSS FRGN SOURCE INCOME	\$ 353	\$	\$
LESS APPORTIONED 2555 INCOME, IF ANY			
GROSS FOREIGN SOURCE INCOME	353		
1116 LINE 3E ALL SOURCES GROSS INCOME	949,124		
LESS FORM 2555 EXCLUDED INCOME, IF ANY			
GROSS INCOME FROM ALL SOURCES	949,124		
GROSS FOREIGN INC/GROSS INC ALL SOURCES GROSS INC APPORTION FACTOR A 0.0004			
SCHEDULE A HOME MORTGAGE INTEREST	22,065		
1116 LINE 4A HOME MORTGAGE INTEREST (MORT INT X APPORTIONMENT FACTOR)	8		

Federal Statements**Form 2441. Line 4 - Taxpayer's Earned Income**

<u>Description</u>	<u>Amount</u>
WAGES	\$ 134,590
OTHER SELF-EMPLOYMENT INCOME	1,950
1/2 SELF-EMPLOYMENT TAX	-138
TOTAL	\$ <u>136,402</u>

Form 2441. Line 5 - Spouse's Earned Income

<u>Description</u>	<u>Amount</u>
WAGES	\$ 227,548
TOTAL	\$ <u>227,548</u>

Federal Statements

Form 4797 - Adjustments to Part I Gains and Losses

FROM K1

NMCS LLC

\$ 4,369

TOTAL

\$ 4,369

Federal Statements**Form 8960, Line 9b - State, local, and foreign income tax**

<u>Description</u>	<u>Amount</u>
STATE AND LOCAL TAXES (SCH A, LN 5A / LN 5D X LN 5E)	\$ 8,404
REASONABLE METH ALLOC PERCENT: 18.93 (FORM 8960, LINE 8 / AGI)	
STATE/LOCAL TAXES ATTRIB TO NII	<u>1,591</u>

Federal Statements

Form 1040 Reconciliation Worksheet, Line 61 - Other Taxes

<u>Description</u>	<u>Amount</u>
FORM 8959	\$ 1,248
FORM 8960	3,168
TOTAL	<u>\$ 4,416</u>

Federal Statements

CITY OF SAN JOSE

Form W-2, Box 12

<u>Description</u>	<u>Amount</u>
BOX 12 C GRP TERM LIFE >50,000	\$ 260
BOX 12 DD EMPLR SPONSORED HLTH	7,319
TOTAL	<u>\$ 7,579</u>

CITY OF SAN JOSE

Form W-2, Box 14 - Other

<u>Description</u>	<u>Amount</u>
414H	\$ 13,736
TOTAL	<u>\$ 13,736</u>

Federal Statements

Cristo Rey San Jose High School

Form W-2, Box 12

Description	Amount
BOX 12 E SECTION 403(B) CONTR	\$ 19,793
BOX 12 DD EMPLR SPONSORED HLTH	\$ 15,552
TOTAL	\$ <u>35,345</u>

Federal Statements

Tax Preparation

<u>Description</u>	<u>Amount</u>
TAX PREPARATION FEE	\$ 3,346
TOTAL	\$ <u>3,346</u>

6119 MIRASOL COURT

BASIS OF HOME SOLD

<u>Description</u>	<u>Amount</u>
PURCHASE	\$ 875,000
IMPROVEMENTS	140,000
TOTAL	\$ <u>1,015,000</u>

Form 1040	Carryover Report	2022
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Name **MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR** Taxpayer Identification Number XXXXXXXXXX

Carryover Item	Available to 2022	2022 Amounts		Carryover to 2023
Minimum tax credit	_____	_____	_____	_____
Investment interest	_____	_____	_____	_____
Investment interest - AMT	_____	_____	_____	_____
Short-term capital loss	_____	_____	_____	_____
Short-term capital loss - AMT	_____	_____	_____	_____
Long-term capital loss	_____	_____	_____	_____
Long-term capital loss - AMT	_____	_____	_____	_____
Residential energy efficient property	_____	_____	_____	_____
D.C. first-time homebuyer credit	_____	_____	_____	_____
Tax credit bonds	_____	_____	_____	_____
Qualified business income loss	631	GENERATED	67	698
Qualified REIT income and PTP loss	_____	_____	_____	_____
Excess business loss portion of NOL	_____	_____	_____	_____

Nonrecaptured Section 1231 Losses - Line 8, Form 4797

2017 Amounts	_____	_____
2018 Amounts	_____	_____
2019 Amounts	_____	_____
2020 Amounts	_____	_____
2021 Amounts	_____	_____
Available to 2022	_____	_____
2022 Amounts	_____	_____
Carryover to 2023	_____	_____

AMT Nonrecaptured Section 1231 Losses - Line 8, Form 4797

2017 Amounts	_____	_____
2018 Amounts	_____	_____
2019 Amounts	_____	_____
2020 Amounts	_____	_____
2021 Amounts	_____	_____
Available to 2022	_____	_____
2022 Amounts	_____	_____
Carryover to 2023	_____	_____

Form **1040** **Salaries & Wages Report** **2022**

Name **MATTHEW W. MAHAN & SILVIA WEDAD SCANDAR** Taxpayer Identification Number XXXXXXXXXX

T/S	Employer	Federal Wages	Federal Withheld	Soc Sec Wages
A T	CITY OF SAN JOSE	134,590	19,062	0
B S	CRISTO REY SAN JOSE HIGH SCHOOL	227,548	39,163	147,000
C				
D				
E				
F				
G				
H				
I				
J				
K				
L				
M				
	Taxpayer	134,590	19,062	
	Spouse	227,548	39,163	147,000
	Totals	362,138	58,225	147,000

	Soc Sec Withheld	Medicare Wages	Medicare Withheld	Soc Sec Tips	Allocated Tips	Dep Care Ben	Other, Box 14
A		139,591	2,024				13,736
B	9,114	247,341	4,013				
C							
D							
E							
F							
G							
H							
I							
J							
K							
L							
M							
		139,591	2,024				13,736
	9,114	247,341	4,013				
	9,114	386,932	6,037				13,736

	State	State Wages	State Withheld	Name of Locality	Local Wages	Local Withheld
A	CA	134,590	9,857			
B	CA	227,548	16,192	STATE DIS		SDI 1,602
C						
D						
E						
F						
G						
H						
I						
J						
K						
L						
M						
		134,590	9,857			
		227,548	16,192			1,602
		362,138	26,049			1,602

Form 1040	Two Year Comparison Report - Page 1	2021 & 2022
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number [REDACTED]
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		2021	2022	Differences
		MFJ	MFJ	
Filing Status				
Dependents		2	2	
1. Salaries and wages	1.	396,854	362,138	-34,716
2. Interest income	2.	1,744	6,828	5,084
3. Tax exempt interest income	3.			
4. Dividend income	4.		389	389
5. Qualified dividend income	5.		311	311
6. Taxable state/local refunds	6.			
7. Alimony received	7.			
8. Business income/loss	8.			
9. Capital gain/loss	9.	1,273,816	77,819	-1,195,997
10. Other gains/losses	10.			
11. Taxable IRA distributions	11.	13,014		-13,014
12. Taxable pensions	12.			
13. Rent and royalty income including farm rental	13.			
14. Partnership/S corp income	14.	383	-67	-450
15. Estate or trust income	15.			
16. Farm income/loss	16.			
17. Unemployment compensation	17.			
18. Taxable social security	18.			
19. Other income	19.		1,950	1,950
20. Total income	20.	1,685,811	449,057	-1,236,754
Adjustments				
21. Moving expenses	21.			
22. Deductible part of self-employment tax	22.		138	138
23. SEP/SIMPLE/Qualified plans deductions	23.			
24. SE health insurance	24.			
25. Penalty on early withdrawal of savings	25.			
26. Alimony paid	26.			
27. IRA deductions	27.			
28. Student loan interest	28.			
29. Other adjustments	29.			
30. Adjusted gross income	30.	1,685,811	448,919	-1,236,892
Deductions				
31. Medical	31.			
32. Taxes	32.	10,000	10,000	
33. Interest	33.	13,179	22,065	8,886
34. Contributions	34.	450	4,985	4,535
35. Casualty losses	35.			
36. Miscellaneous expenses	36.			
37. Allowable itemized deductions	37.	23,629	37,050	13,421
38. Standard deduction	38.	25,550	25,900	350
		STANDARD	ITEMIZED	
39. Deduction taken	39.	25,550	37,050	11,500
40. Taxable income before Qual Bus Inc Ded (QBID)	40.	1,660,261	411,869	-1,248,392
41. QBID	41.	0	7	7
42. Taxable income	42.	1,660,261	411,862	-1,248,399

Form 1040	Two Year Comparison Report - Page 2	2021 & 2022
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Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR	Taxpayer Identification Number [REDACTED]
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		2021	2022	Differences
43. Taxable income from 2YR page 1, line 42	43.	1,660,261	411,862	-1,248,399
44. Tax on taxable income	44.	334,321	79,487	-254,834
45. Alternative minimum tax	45.	25,919		-25,919
46. Excess advance premium tax credit	46.			
47. Child care credit	47.		1,200	1,200
48. Education credits	48.			
49. Retirement savings credit	49.			
50. Child & other dependent tax credit	50.		1,550	1,550
51. General business credit	51.			
52. Other credits	52.		15	15
53. Total credits	53.		2,765	2,765
54. Net tax liability	54.	360,240	76,722	-283,518
55. Self-employment taxes	55.		275	275
56. Other taxes	56.	49,888	4,416	-45,472
57. Total tax	57.	410,128	81,413	-328,715
58. Income tax withheld	58.	63,507	58,651	-4,856
59. Estimated tax payments	59.	34,494		-34,494
60. Eamed income credit	60.			
61. Additional Child tax credit	61.			
62. Other refundable tax credits	62.	2,895		-2,895
63. Other payments	63.			
64. Total payments	64.	100,896	58,651	-42,245
65. Tax due/-refund	65.	309,232	22,762	-286,470
66. Penalties and interest	66.		586	586
67. Net tax due/-refund	67.	309,232	23,348	-285,884
68. Refund applied to estimated tax payments	68.			
69. Refund received	69.			
70. Effective tax rate	70.	25.0 %	20.0 %	

Two Year Comparison - Tax Reconciliation Marginal Tax Rates

	2021 Taxable Income	2021 Marginal Tax Rate	2022 Taxable Income	2022 Marginal Tax Rate
Ordinary income	386,445	32.0 %	333,732	24.0 %
Capital income	1,273,816	20.0 %	78,130	15.0 %
Capital - Sec. 1250		%		%
Capital - Sec. 1202		%		%

Form 1040	Schedule A - Actual vs. IRS Comparison Analysis	2022
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Name **MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR** Taxpayer identification number XXXXXXXXXX

AGI Range Used From IRS Spreadsheet	2022 Return		2020 Average Estimates ^[1]		2022 Return's Difference From IRS Average
	Amounts	Percent of AGI	Amounts	Percent of AGI	
\$200,000 - \$499,999					

AGI					
Adjusted gross income	448,919		448,919		
Medical and Dental Expenses					
Total medical and dental expenses	0	0.00%	77,753	17.32%	-17.32%
Limited medical and dental expenses	0	0.00%	47,451	10.57%	-10.57%
Taxes Paid					
State and local income taxes	175,123	39.01%	28,147	6.27%*	32.74%
General sales taxes		%		%	%
Real estate taxes	33,249	7.41%	14,365	3.20%	4.21%
Personal property taxes	0	0.00%	1,122	0.25%	-0.25%
Total SALT before limitation	208,372	46.42%	37,215	8.29%*	38.13%
Total SALT allowed	10,000	2.23%	14,545	3.24%	-1.01%
Other taxes	0	0.00%	2,963	0.66%	-0.66%
Total taxes paid	10,000	2.23%	14,680	3.27%	-1.04%
Interest Paid					
Home mortgage interest/points on Form 1098	20,399	4.54%	24,825	5.53%	-0.99%
Home mortgage interest not on Form 1098	0	0.00%	13,108	2.92%	-2.92%
Deductible points not on Form 1098	1,666	0.37%	1,706	0.38%	-0.01%
Investment interest	0	0.00%	11,358	2.53%	-2.53%
Total interest paid	22,065	4.92%	25,633	5.71%	-0.79%
Gifts to Charity					
Cash contributions	4,985	1.11%	15,353	3.42%	-2.31%
Other than cash contributions	0	0.00%	6,240	1.39%	-1.39%
Carryover from prior years	0	0.00%	114,519	25.51%*	-25.51%
Total allowable charitable gifts	4,985	1.11%	17,822	3.97%	-2.86%
Unlimited Miscellaneous Deductions					
Gambling loss	0	0.00%	78,291	17.44%	-17.44%
Other non-gambling misc deductions ^[2]	0	0.00%	11,313	2.52%	-2.52%
Total unlimited miscellaneous deductions	0	0.00%	51,536	11.48%	-11.48%
Total Itemized Deductions					
Total itemized deductions	37,050	8.25%	58,629	13.06%	-4.81%

[1] The average estimates are based on the most recently published statistics included in IRS Table 2.1 - Returns with Itemized Deductions: Sources of Income, Adjustments, Itemized Deductions by Type, Exemptions, and Tax Items, by Size of Adjusted Gross Income, Tax Year 2020. This table is available through the Tax Stats section of the IRS website.

[2] Other non-gambling miscellaneous deductions now includes casualty or theft loss amounts. The IRS no longer has separate casualty or theft loss amounts available on the 2020 IRS Table 2.1. The IRS included the casualty or theft loss amount with other non-gambling miscellaneous deductions.

*** - THE DIFFERENCE IS OUTSIDE THE SPECIFIED 20% DEVIATION RANGE.**

Form **1040**

Tax Return History Report - Page 1

2022

Name **MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR**

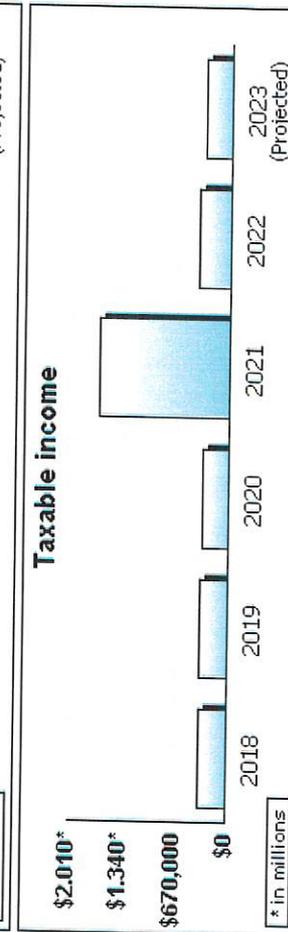
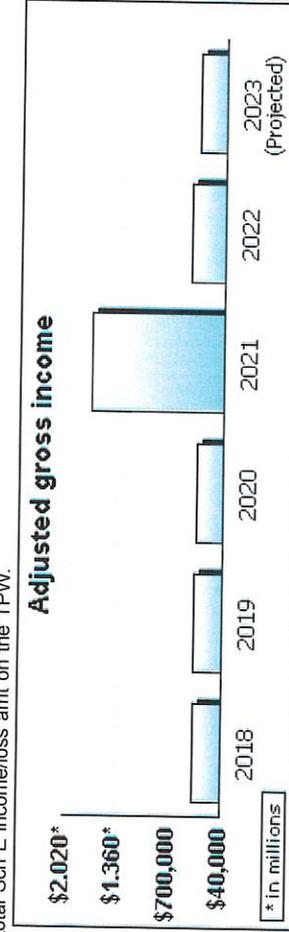
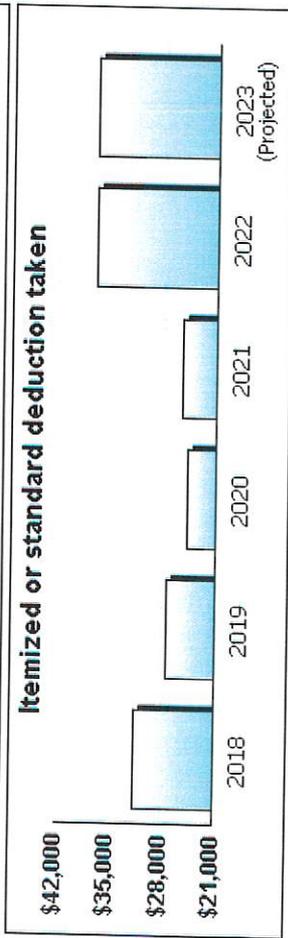
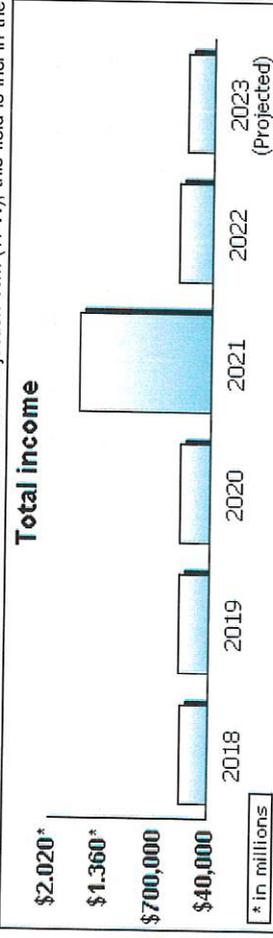
Taxpayer Identification Number

	2018	2019	2020	2021	2022	2023 PROJECTED
	MFJ	MFJ	MFJ	MFJ	MFJ	MFJ

Filing Status

	2018	2019	2020	2021	2022	2023 PROJECTED
	MFJ	MFJ	MFJ	MFJ	MFJ	MFJ
Salaries and wages	391,021	334,108	190,334	396,854	362,138	362,138
Interest income	815	1,911	2,262	1,744	6,828	6,828
Dividend income					389	389
Business income/loss		65,812	220,253			
Capital gains/losses			1,363	1,273,816	77,819	
Other gains/losses						
IRA distributions, pensions, annuities			26	13,014		
Rent, royalty, farm rental income						
Partnership/S corp income	144			383	-67	-67
Estate or trust income						
Farm income/loss						
Other income/loss	6,032		7,512		1,950	1,950
Total income	398,012	401,831	421,750	1,685,811	449,057	371,238
Total adjustments		13,868	50,315		138	138
Adjusted gross income	398,012	387,963	371,435	1,685,811	448,919	371,100
Allowable itemized deductions	31,701	27,354	23,097	23,629	37,050	37,050
Standard deduction	24,000	24,400	24,800	25,550	25,900	27,700
Itemized or standard deduction taken	31,701	27,354	24,800	25,550	37,050	37,050
Exemptions						
Taxable income before Qual Bus Inc Ded	366,311	360,609	346,635	1,660,261	411,869	334,050
Qual Bus Inc Ded		4,765	22,356		7	
Taxable income	366,311	355,844	324,279	1,660,261	411,862	334,050

* Amts in the projected col generate from the federal Tax Projection Wrk (TPW); this field is incl in the total Sch E income/loss amt on the TPW.

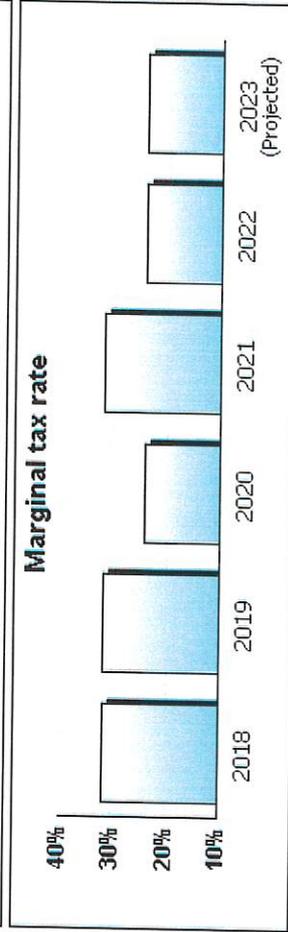
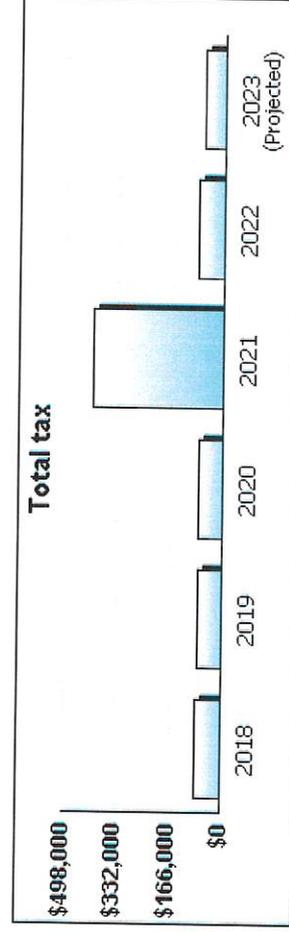
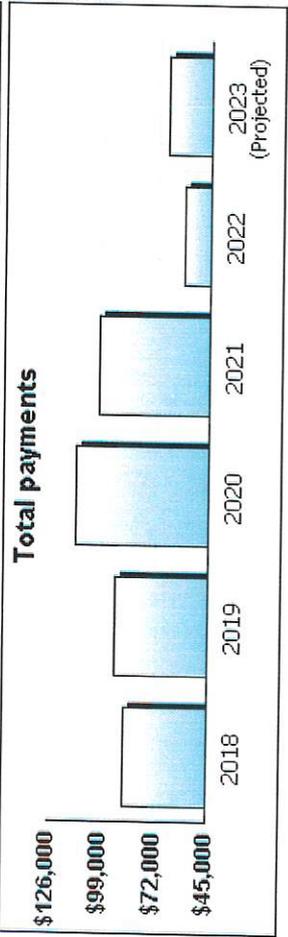
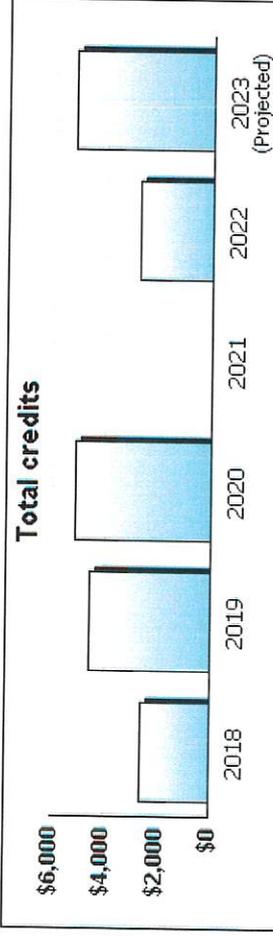


Form **1040**

Tax Return History Report - Page 2

2022

	Taxpayer Identification Number					
	2018	2019	2020	2021	2022	2023 (PROJECTED)
Name	MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR					
Taxable income	366,311	355,844	324,279	1,660,261	411,862	334,050
Tax on taxable income and Form 8962	80,599	76,503	65,863	334,321	79,487	66,944
Alternative minimum tax				25,919		
Total credits	2,600	4,600	5,143	2,765	5,215	5,215
Net tax liability	77,999	71,903	60,720	360,240	76,722	61,729
Self-employment taxes			15,660		275	
Other taxes	1,305	1,375	1,432	49,888	4,416	1,521
Total tax	79,304	75,041	77,812	410,128	81,413	63,525
Income tax withheld	88,210	67,034	24,306	63,507	58,651	58,651
Estimated tax payments		8,906	56,000	34,494		8,000
Other payments		17,000	32,000	2,895		
Total payments	88,210	92,940	112,306	100,896	58,651	66,651
Total due/-refund	-8,906	-17,899	-34,494	309,232	22,762	-3,126
Penalties and interest						
Net tax due/-refund	-8,906	-17,899	-34,494	309,232	23,348	-3,126
Refund applied to estimated tax payments	8,906	17,899	34,494			
Refund received						
Marginal tax rate	32.0%	32.0%	24.0%	32.0%	24.0%	24.0%
Effective tax rate	22.0%	21.0%	24.0%	25.0%	20.0%	19.0%



Form 1040	Reconciliation Worksheet - Taxable Income & Tax	2022
Name MATTHEW W. MAHAN & SILVIAWEDAD SCANDAR		Taxpayer Identification Number [REDACTED]

Tax brackets are rates applied to specific levels of taxable income. Various rates apply to different portions of the total taxable income. Type of income, further determines the rate applied. Marginal Tax Rate is the tax paid on the highest level of taxable income. This worksheet details how tax is calculated on ordinary income and capital gain income, the percentage of taxable income, marginal tax rate and the tax method used.

Filing Status **MARRIED FILING JOINTLY** Tax Pct Total Tax (In 27) divided Total Taxable Income (In 19) **19.0 %**
 Tax Method **QUALIFIED DIVIDENDS & CAPITAL GAIN TAX WORKSHEET**

Tax using ordinary and capital gains rates exceeds tax using only ordinary rates. Taxable income is taxed only using ordinary rates:
 Tax using capital gains rates Tax using Ordinary rates Tax savings

	Taxable Amount	Marginal Tax Rate	Tax on Taxable Income	Marginal Tax Rate - Income Range	Amount of Income to Next Tax Bracket
Ordinary Income	333,732	24.0 %	67,767	\$178,150 - \$340,100	6,368
Capital Income	78,130	15.0 %	11,720	\$83,550 - \$647,850	569,720
Capital Income - 1250		%			
Capital Income - 1202		%			

*Tax on taxable ordinary income under \$100,000 is determined using IRS Tax Tables that impose the same amount of tax on taxable income within \$50 intervals. Therefore, the column (b) Tax may not be calculated as column (a) times the applicable line tax rate.

Income taxed at ordinary rates

	(a) Taxable Income	(b) Tax*
1. 10% rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: \$20,650	1a. 20,550	1b. 2,058
2. 12% rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: \$63,000	2a. 63,000	2b. 7,563
3. 22% rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: \$94,600	3a. 94,600	3b. 20,806
4. 24% rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: \$161,950	4a. 155,582	4b. 37,340
5. 32% rate	5a.	5b.
6. 35% rate	6a.	6b.
7. 37% rate	7a.	7b.
8. Total ordinary taxable income and ordinary tax. Add lines 1 through 7	8a. 333,732	8b. 67,767

Income taxed at capital gains rates

9. 0% capital gains rate	9a.	9b.
10. 15% capital gains rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: \$433,850	10a. 78,130	10b. 11,720
11. 20% capital gains rate	11a.	11b.
12. 25% capital gains rate Unrecaptured Section 1250 Gain	12a.	12b.
13. 28% capital gains rate Small business stock, collectibles	13a.	13b.
14. Total taxable capital gains and capital gains tax. Add lines 9 through 13	14a. 78,130	14b. 11,720

Total taxable income

15. Total ordinary taxable income. Enter the amount from line 8a.	15. 333,732
16. Total capital gains taxable income. Enter the amount from line 14a.	16. 78,130
17. Add lines 15 and 16.	17. 411,862
18. Enter the net foreign exclusion amount from the Foreign Earned Income Tax Worksheet, line 2c.	18.
19. Taxable Income reported on 1040/1040SR, line 15, (1040NR, line 15). Subtract line 18 from line 17.	19. 411,862

Total tax

20. Total ordinary tax. Enter the amount from line 8b.	20. 67,767
21. Total capital gains tax. Enter the amount from line 14b.	21. 11,720
22. Tax on child's interest and dividend.	22.
23. Tax on lump-sum distribution.	23.
24. Other taxes.	24.
25. Add lines 20 through 24.	25. 79,487
26. Enter the tax allocated to the net exclusion amount from the Foreign Earned Income Tax Worksheet, line 5.	26.
27. Total tax reported on 1040/1040SR, line 16, (1040NR, line 16). Subtract line 26 from line 25.	27. 79,487