IRS e-file Signature Authorization

OMB No. 1545-0074

Social coourity number

Department of the Treasury Internal Revenue Service

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayor'a pama

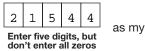
Taxpayer S hame	Social security number			
RAHUL V VASAIKAR	855-52-1544			
Spouse's name	Spouse's social security number			
Part I Tax Return Information – Tax Year Ending December 31, 2022 (Enter	year you are authorizing.)			
Enter whole dollars only on lines 1 through 5.				
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1 Adjusted gross income	1 132,744.			
2 Total tax	2 22,586.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 26,236.			
4 Amount you want refunded to you	4 3,977.			
5 Amount you owe	5			
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k	ceep a copy of your return)			

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. 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. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. 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 the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X lauthorize GLOBAL TAXES LLC

to enter or generate my PIN



ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature	Date I							 	
Practitioner PIN Method Returns Only—continu	e be	low							
Part III Certification and Authentication – Practitioner PIN Method Only									
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.			Dor	n't er	nter a	ull zer	ros		

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature 🕨		 Date 🕨	
For Donorwork Deduction Act N	ation and your tox rature instructions	 DEV 02/18/22 DDO	Earm 8879 (Pay 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/18/23 PRO

E1040		artment of the Treasury—Internal Revenue Serv S. Individual Income Tax		202	2	OMB No. 1545	-0074	IRS Use Or	nly—Do r	-Do not write or staple in this space.			
Check only		Single Married filing jointly		ng separately (N	,			hold (HOH)		spous	fying surviving se (QSS)		
one box.	-	ou checked the MFS box, enter the n son is a child but not your dependent	•	spouse. If you cl	neck	ed the HOH or	QSS	box, enter	the ch	ild's ı	name if the qualifying		
Your first name	e and m	iddle initial	Last name						You	r soc	ial security number		
RAHUL V			VASAIKA	AR					85	5-5	2-1544		
lf joint return, s	pouse'	s first name and middle initial	Last name						Spo	use's	social security number		
		er and street). If you have a P.O. box, see	instructions.					Apt. no.			tial Election Campaign		
		LAKE AVENUE			0			2C			ere if you, or your f filing jointly, want \$3		
City, town, or p CHICAGO	DOST OT	ce. If you have a foreign address, also co	mplete spaces	s below.	Sta II		ZIP c 606		to g	jo to t	this fund. Checking a w will not change		
Foreign country	y name		Foreig	n province/state/o				n postal cod			or refund.		
											You Spouse		
Digital Assets		ny time during 2022, did you: (a) rec aange, gift, or otherwise dispose of a									Yes X No		
Standard Deduction	_	eone can claim:	•	Your spouse									
		Were born before January 2, 1			use		n befo	ore January	/ 2, 19	58	Is blind		
Dependent	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4) Check the	box if c	qualifie	es for (see instructions):		
If more	(1) F	irst name Last name		number		to you		Child tax	credit		Credit for other dependents		
than four dependents,									1	\rightarrow	<u> </u>		
see instruction	s —								1				
and check here	ייי ר												
-	_ 1a	Total amount from Form(s) W-2, b	ov 1 (see inst	tructions)						1a	148,306.		
Income	b	Household employee wages not re								1b	140,500.		
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a							. [1c			
attach Forms	d	Medicaid waiver payments not rep	orted on For	rm(s) W-2 (see ir	nstru	ictions)				1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f			•				•	1e			
was withheld.	f	Employer-provided adoption bene		m 8839, line 29					•	1f			
lf you did not	g	Wages from Form 8919, line 6 .			•				•	1g			
get a Form W-2, see	h	Other earned income (see instruct			•	· · · · ·	· ·		·	1h	0.		
instructions.	i	Nontaxable combat pay election (see instructio	ons)	•	1 i							
	Z				· ·		• •		•	1z	148,306.		
Attach Sch. B	2a	· · · · ·	2a			axable interest			•	2b	220.		
if required.	<u>3a</u>		3a 4a			ordinary divide			•	3b	1.		
Standard	4a 5a		4a 5a			axable amoun axable amoun			•	4b 5b			
Standard Deduction for—	6a		5a 6a			axable amoun				6b			
 Single or Married filing 	c	If you elect to use the lump-sum e								0.0			
separately, \$12,950	7	Capital gain or (loss). Attach Sche			•					7	-8.		
 Married filing 	8	Other income from Schedule 1, lin	e10						. [8	-15,775.		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8. This	is your total inc	ome	ə			. [9	132,744.		
surviving spouse, \$25,900	10	Adjustments to income from Sche	dule 1, line 2	6						10			
 Head of 	11	Subtract line 10 from line 9. This is	s your adjust	ed gross incon	ne					11	132,744.		
household, \$19,400	12	Standard deduction or itemized	deductions	(from Schedule	A)				. [12	12,950.		
 If you checked any box under 	13	Qualified business income deduct	ion from Forr	m 8995 or Form	899	5-A				13	0.		
Standard	14								•	14	12,950.		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less, en	ter -0 This is y	our 1	taxable incom	е.		·	15	119,794.		

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

Form **1040** (2022)

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	22,586.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	22,586.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	22,586.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	22,586.
Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	-	
	b	Form(s) 1099 25b		
	C L	Other forms (see instructions)	0E d	26.226
	d 26	Add lines 25a through 25c .<	25d 26	26,236.
If you have a l qualifying child,	20	Earned income credit (EIC)	20	
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use	4	
	31	Amount from Schedule 3, line 15	1	
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	327.
	33	Add lines 25d, 26, and 32. These are your total payments	33	26,563.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,977.
neruna	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	3,977.
Direct deposit?	b	Routing number 0 2 1 2 0 2 3 3 7 c Type: Checking X Savings		
See instructions.	d	Account number 2 0 6 3 8 9 8 7 3		
	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 .		
rou Owe	00	For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37	
Third Dorth	38	Estimated tax penalty (see instructions)		
Third Party Designee		by you want to allow another person to discuss this return with the IRS? See structions	below.	× No
Deelgilee	De	signee's Phone Personal ident		
		ne no. number (PIN)		
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and t lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic		, ,
Here				nt you an Identity
	10			IN, enter it here
Joint return?		SOFTWARE ENGINEER (see	e inst.)	
See instructions. Keep a copy for	Sp			nt your spouse an ection PIN, enter it here
your records.			e inst.)	
	Ph	one no. (201)496-0984 Email address RAHULVASAIKAR47@GMAIL.COM		
Deid	Pre	eparer's name Preparer's signature Date PTIN		Check if:
Paid				Self-employed
Preparer Use Only	Fir	m's name GLOBAL TAXES LLC Pho	one no.	
	Fir	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm	n's EIN	
Go to www.irs.ge	ov/Forn	n1040 for instructions and the latest information. BAA REV 03/18/23 PRO		Form 1040 (2022)

SCHEDULE	1
(Form 1040)	

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

Attachment Sequence No. 01 Your social security number

Name(s)	sho	wn on Fo	rm 1040,	1040-SR,	or 1040-NR
RAHUL	V	VASAIK	AR		

Department of the Treasury

Internal Revenue Service

855-52-1544	
000 02 1011	

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony 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. Atta	ach Schedule E .	5	-15,776.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
ĥ	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
I	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	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
ο	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE 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 nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount:			
	Other Income from box 3 of 1099-Misc 1.	8z 1.		
9	Total other income. Add lines 8a through 8z		9	1.
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NR, line 8	10	-15,775.
	normark Reduction Act Nation and your tax return instructions		<u></u>	

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

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee officials. Attach Form 2106	-basis government	12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN	·		
С	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 k		24a	-	
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b		
•	Nontaxable amount of the value of Olympic and Paralympic medals	240	-	
С	and USOC prize money reported on line 8m	24c		
d		24d		
e	Repayment of supplemental unemployment benefits under the Trade			
Ŭ	Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g		24g		
•	Attorney fees and court costs for actions involving certain unlawful			
		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			
		24k		
Z	Other adjustments. List type and amount:			
07		24z	65	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		00	
			26	la 1 (Farm 1040) 0000
	ВАА	REV 03/18/23 PRO	Scheal	ile 1 (Form 1040) 2022

 \bigcirc

Additional Credits and Payments

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

OMB No. 1545-0074 20 2

	Contract to Form 1040, 1040-SR, or 1040-INR. Go to www.irs.gov/Form1040 for instructions and the latest information.						
	()	rm 1040, 1040-SR, or 1040-NR			cial s	Sequence No. 03 security number	
Par	UL V VASAI	fundable Credits		855-5	2-1	544	
1	•	credit. Attach Form 1116 if required			1		
2	Form 2441	child and dependent care expenses from Form 244			2		
3	Education c	redits 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 nonre	fundable credits:					
а	General bus	siness credit. Attach Form 3800	6a				
b	Credit for p	rior year minimum tax. Attach Form 8801	6b				
С	Adoption cr	edit. Attach Form 8839	6c				
d	Credit for th	e elderly or disabled. Attach Schedule R	6d				
е	Alternative r	motor vehicle credit. Attach Form 8910	6e				
f	Qualified plu	ug-in motor vehicle credit. Attach Form 8936	6f				
g	Mortgage ir	terest credit. Attach Form 8396	6g				
h	District of C	olumbia first-time homebuyer credit. Attach Form 8859	6h				
i	Qualified ele	ectric vehicle credit. Attach Form 8834	6i				
j	Alternative f	uel vehicle refueling property credit. Attach Form 8911	6j				
k	Credit to ho	Iders of tax credit bonds. Attach Form 8912	6k				
I	Amount on	Form 8978, line 14. See instructions	61				
z	Other nonre	fundable credits. List type and amount:					
			6z				
7	Total other	nonrefundable credits. Add lines 6a through 6z			7		
8		through 5 and 7. Enter here and on Form 1040, 1040	-SR, or 104	0-NR,	~		
	line 20			••	8		
For Pa	perwork Reduct	ion Act Notice, see your tax return instructions.	REV 03/18/23 I	· · · ·		ued on page 2) ule 3 (Form 1040) 2022	
	-perment neudot	BAA	112 0 00/10/201		Sheut		

Schedule 3 (Form 1040) 2022

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962	9		
10	Amount paid with request for extension to file (see instructions)	10		
11	Excess social security and tier 1 RRTA tax withheld	11		327.
12	Credit for federal tax on fuels. Attach Form 4136	12		
13	Other payments or refundable credits:			
а	Form 2439			
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021			
c d	Reserved for future use 13c Credit for repayment of amounts included in income from earlier years			
е	Reserved for future use			
f	Deferred amount of net 965 tax liability (see instructions) 13f			
g h	Reserved for future use13gCredit for qualified sick and family leave wages paid in 2022from Schedule(s) H for leave taken after March 31, 2021, andbefore October 1, 202113h			
z	Other payments or refundable credits. List type and amount: 13z			
14	Total other payments or refundable credits. Add lines 13a through 13z	14		
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31	15		327.
	BAA REV 03/18/23 PRO	Schedu	ıle 3 (Form 104	40) 2022

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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. 2022 Attachment Sequence No. 12

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

RAHUL V VASAIKAR

Your social security number

855-52-1544

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X 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.		(d) Proceeds	(e) Cost	(g) Adjustment		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	to gain or loss from Form(s) 8949, Part I, line 2, column (g)		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	249.	263.			-14.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	39.	33.			б.
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 (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-8.

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

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.		(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	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.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		11			
12	Net long-term gain or (loss) from partnerships, S corporat	dule(s) K-1	12			
13	Capital gain distributions. See the instructions		13			
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions		14	()		
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•			15	

Part	III Summary			
16	Combine lines 7 and 15 and enter the result	16		-8.
	• 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.			
17	Are lines 15 and 16 both gains?			
	Yes. Go to line 18.			
	□ No. Skip lines 18 through 21, and go to line 22.			
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	18		
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see	10		
	instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	Are lines 18 and 19 both zero or blank and you are not filing Form 4952?			
20	 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. 			
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:			
	 The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) 	21 (8.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.			
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			
	REV 03/18/23 PRO	Sche	dule D (Form 10	40) 2022

Form **8949**

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.



Internal Revenue Service Name(s) shown on return

RAHUL V VASAIKAR

Department of the Treasury

Social security number or taxpayer identification number
855-52-1544

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

		And a second second second second	and the second second second		1000 D	subserved by a site of a	vasn't reported	
118	Short-term	transactions	CONTER ON	Formisi	ILIYY-K Show	wind hasis w	vasn't renorted	to the IRS
		110100101101101	cponed on	1 0111(3)	1000 0 0100		vasii t ispontou	

C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see <i>Column (e)</i> in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).	
Robinhood Securities LLC	01/01/22	12/31/22	249.	246.			3.	
COINBASE	01/01/22	12/31/22	0.	17.			-17.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your 1e 2 (if Box B	249.	263.			-14.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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

Form **8949**

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.



Internal Revenue Service Name(s) shown on return

RAHUL V VASAIKAR

Department of the Treasury

Social security number or taxpayer id	entification number
855-52-1544	

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see <i>Column (e)</i> in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).	
Robinhood Crypto LLC	01/01/22	12/31/22	39.	33.			б.	
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and inc e is checked), lir	lude on your ne 2 (if Box B	39.	33.			6.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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

SCHEDULE	Ε
(Form 1040)	

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

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

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

Your soci	al security number
	Attachment Sequence No. 13
CS, etc.)	2022

RAH	JL V VASAIKAR					8	55-52	2-1544	
Par		d Roy	alties						
	Note: If you are in the business of renting personal propert rental income or loss from Form 4835 on page 2, line 40.	ty, use s	Schedule	C. See	instru	ctions. If you are	an indiv	vidual, rep	ort farm
Α	Did you make any payments in 2022 that would require you t	to file F	Form(s) 1	0002 9	loo ind	structions			
	If "Yes," did you or will you file required Form(s) 1099?								
 1a	Physical address of each property (street, city, state, ZIP			· ·			<u>· ·</u>		
		,							
	SAKET KAPRA VILLAGE ECIL, HYDERABAD IN	5000	62						
B	12738 WOOD TRAIL BLVD TAMPA FL 33625								
<u>C</u>					_				
1b	Type of Property (from list below) 2 For each rental real estate proper above, report the number of fair r				⊢a	ir Rental F Days	erson Da	al Use	QJV
Α	above, report the number of hard gersonal use days. Check the QJ			Α		365		0	
B	if you meet the requirements to fi			B		365		0	
C	qualified joint venture. See instruct	ctions.	·	C					
Туре	of Property:								
	Single Family Residence 3 Vacation/Short-Term Rent	tal	5 Land		7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	Ities	8	Other (describe	e)		
						Properties			
Incor	ne.	ŀ		Α		B	•		С
3	Rents received	3			00.		300.		<u> </u>
4	Royalties received	4		-		- / -			
Ехре									
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,0	00.				
8	Commissions	8							
9	Insurance	9				9	909.		
10	Legal and other professional fees	10							
11	Management fees	11		8	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12				8,1	L25.		
13		13		2 1	20				
14 15	Repairs	14 15		3,1)00.)00.		
16	Taxes	16		د, د	10.		542.		
17		17		2,9	50.		000.		
18	Depreciation expense or depletion	18				270			
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		11,1	80.	21,5	576.		
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If								
	result is a (loss), see instructions to find out if you must								
	file Form 6198	21	-	-10,5	80.	-15,7	776.		
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22 (0.)			()
23a	Total of all amounts reported on line 3 for all rental proper		• • •	• •	23a	6,4	100.		
b	Total of all amounts reported on line 4 for all royalty proper	erties	• • •	• •	23b	0.1	0.5		
C d	Total of all amounts reported on line 12 for all properties Total of all amounts reported on line 18 for all properties	• •		• •	23c	8,1	25.		
d	Total of all amounts reported on line 18 for all properties Total of all amounts reported on line 20 for all properties	• •	• • •	• •	23d 23e	32,7	756		
е 24	Income. Add positive amounts shown on line 21. Do not		· · ·		236	34,1	24		
24 25	Losses. Add royalty losses from line 21 and rental real estate		-		nter to	tal losses here	24	(15,776.)
25 26	Total rental real estate and royalty income or (loss).						20	· -	
-0	here. If Parts II, III, IV, and line 40 on page 2 do not a								
	Schedule 1 (Form 1040), line 5. Otherwise, include this an						26	-	-15,776.
For P	aperwork Reduction Act Notice, see the separate instructions.		NP			-15,776.			orm 1040) 2022

For Paperwork Reduction Act Notice, see the separate instructions.

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-2294

Name(s) shown on return

RAHUL V VASAIKAR

Your taxpayer identification number 855-52-1544

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

Use this form if your taxable income, before your qualified business income deduction, is at or below \$170,050 (\$340,100 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number		Qualified business income or (loss)
i	RAHUL V VASAIKAR	855-52-1544		0.
ii				
iii				
iv				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2 0.		
3		3 ()		
4		4 0.		
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	0.
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 ()		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero	8		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	
10	Qualified business income deduction before the income limitation. Add lines 5 and	1	10	0.
11		119,794.		
12		2 <u>1.</u>		
13	Subtract line 12 from line 11. If zero or less, enter -0	3 119,793.	44	02 050
14 15	Income limitation. Multiply line 13 by 20% (0.20)		14	23,959.
15	the applicable line of your return (see instructions)		15	0.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than z		16	(0.)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and		-	
	zero, enter -0		17	1
For Priv	vacy Act and Paperwork Reduction Act Notice, see instructions. REV 03/18/	/23 PRO		Form 8995 (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

Identifying number 855-52-1544

RAHU	JL V VASAIKAR	855-52-	-1544
Par	2022 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I.		
	al Real Estate Activities With Active Participation (For the definition of active participation, see Spec sance for Rental Real Estate Activities in the instructions.)	ial	
1a b c d	Activities with net income (enter the amount from Part IV, column (a))1aActivities with net loss (enter the amount from Part IV, column (b))1bPrior years' unallowed losses (enter the amount from Part IV, column (c))1cCombine lines 1a, 1b, and 1c)) . 1d	
All Ot	her Passive Activities		
2a b c d	Activities with net income (enter the amount from Part V, column (a))Activities with net loss (enter the amount from Part V, column (b))Prior years' unallowed losses (enter the amount from Part V, column (c))Combine lines 2a, 2b, and 2c	0. 0.)) . 2d	-10,580.
3	Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your retu all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report t losses on the forms and schedules normally used	the	-10,580.
	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.

Par	t II Special Allowance for Re	ental Real Estate	Activities With	Active Participa	ation		
	Note: Enter all numbers in P	art II as positive amo	ounts. See instruc	tions for an examp	ole.		
4	Enter the smaller of the loss on line	1d or the loss on lir	1е3			4	
5	Enter \$150,000. If married filing sep	arately, see instructi	ions	5			
6	Enter modified adjusted gross incor	ne, but not less thar	n zero. See instruc	tions 6			
	Note: If line 6 is greater than or equ on line 9. Otherwise, go to line 7.	al to line 5, skip line	es 7 and 8 and ent	ter -0-			
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 fili	ng separately, see	instructions	8	
9	Enter the smaller of line 4 or line 8					9	0.
Par	t III Total Losses Allowed						
10	Add the income, if any, on lines 1a and 2a and enter the total				10	0.	
11							0.
Par	t IV Complete This Part Befo						
	Name of activity	Current year		Prior years Ove		erall gain or loss	
Name of activity		(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c) (d) Ga		٦	(e) Loss

For Paperwork Reduction Act Notice, see instructions. BAA

Total. Enter on Part I, lines 1a, 1b, and 1c

REV 03/18/23 PRO

Form 8582 (2022)

Form 8582 (2022)					Page 2
Part V Complete This Part Befor	e Part I, Lines 2	a, 2b, and 2c. S	See instruc	ctions.	
Name of activity	Current year Prio		Prior y	ears Over	all gain or loss
Name of activity	(a) Net income (line 2a)	(b) Net loss (line 2b)	(c) Unall loss (lin	owed e 2c) (d) Gain	(e) Loss
SAKET KAPRA VILLAGE	0.	10,580.			10,580.
Total. Enter on Part I, lines 2a, 2b, and 2c	0.	10,580.			
Part VI Use This Part if an Amoun			See instruc	ctions.	
	Form or schedule				
Name of activity	and line number to be reported on (see instructions)	(a) Loss	(b) Ra	atio (c) Specia allowanc	al e column (c) from column (a).
	1				
Total			1.0	0	
Part VII Allocation of Unallowed L	_osses. See instr	uctions.			
Name of activity	Form or sche and line nur to be reporte (see instruct	mber (a)	Loss	(b) Ratio	(c) Unallowed loss
SAKET KAPRA VILLAGE	E Ln 2	2	10,580.	1.00000000	10,580.
Total			10,580.	1.00	10,580.
Part VIII Allowed Losses. See instr	uctions.				
Name of activity	Form or sch and line nur to be reporte (see instruct	mber ed on (a)	Loss	(b) Unallowed loss	(c) Allowed loss
SAKET KAPRA VILLAGE	E Ln 2	2	10,580.	10,580.	0.
	1				
Total	<u></u>		10,580.	10,580.	0.
				REV 03/18/23 PRO	Form 8582 (2022)