Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

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

Submission Identification Number (SID)

Тахрау	ver's name	Social security	number
SOH	IAM KULKARNI	283-91-	6893
Spouse	e's social security number		
Par	t I Tax Return Information – Tax Year Ending December 31, 2022 (En	ter year you are	e authorizing.)
	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 81,751.
2	Total tax	[2 10,725.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 12,930.
4	Amount you want refunded to you	[4 2,205.
5		-	5

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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 TAX	XES LLC	to enter or generate my PIN
-------------------------	---------	-----------------------------

1	6	8	9	3	as					
	Enter five digits, but don't enter all zeros									

my

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 🕨

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

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 ►				
Practitioner PIN Method Returns Only—continue below					
Part III Certif	ation and Authentication – Practitioner PIN Method Only				
ERO's EFIN/PIN. E	ter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2 4 9 6 6 1 9 8 9 Don't enter all zeros				

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 🕨	
	ERO Must Retain This Form — See Ibmit This Form to the IRS Unless		
For Denemoral Deduction Act Nation	very tex veture instructions		Earm 8879 (Payr 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/24/23 PRO

1040		rtment of the Treasury—Internal Revenue Servi 5. Individual Income Tax		urn	202	2	OMB No. 1545	-0074	IRS Use Only	∕—Do not w	vrite or staple i	in this space.
Filing Status Check only one box.	lf yo	Single D Married filing jointly D warried filing jointly D warried the MFS box, enter the n on is a child but not your dependent	ame of y	ed filing se		,				spou	lifying surv use (QSS) a name if th	0
Your first name	and mi	ddle initial	Last na	me						Your so	cial securit	y number
SOHAM			KULK	ARNI						283-	91-6893	3
	ouse's	first name and middle initial	Last na									curity number
												-
Home address (numbe	r and street). If you have a P.O. box, see	instructio	ons.				A	vpt. no.	Preside	ntial Electio	on Campaign
15255 VI	ΝΤΑ	GE PRESERVE PKWY						1	401		here if you,	
		ce. If you have a foreign address, also co	omplete s	paces belo	w.	Sta	ate	ZIP c	-			tly, want \$3
HOUSTON						T	x	770	70		ow will not	Checking a change
Foreign country	name		F	Foreign pro	vince/state	/coun	ty	Foreig	n postal code	1 .	k or refund.	•
											You	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a						•	,	. ,	Yes	🗙 No
Standard	Som	eone can claim: 🗌 You as a de	pendent	t 🗌 Y	our spous	se as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or you	i were a d	ual-status	alier	1					
Age/Blindness	You	Were born before January 2, 1	958 F	Are blin	d Sn	ouse	• 🗌 Was bor	n hefr	ore January	2 1958	Is bli	ind
			000 L	1			(3) Relationsh					instructions):
Dependents		rst name Last name			cial securit iumber	У	to you	ip (Child tax c	· · ·	ı ,	her dependents
lf more than four	(.,						-			roun	[
dependents,											[
see instructions and check											[
here											[
	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructi	ons)					. 1a		
Income	b	Household employee wages not re			,					. 1b		/1/0101
Attach Form(s)	c	Tip income not reported on line 1a	•							. 1c		
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep								. 1d		
W-2G and	e	Taxable dependent care benefits f								. 1e		
1099-R if tax	f	Employer-provided adoption bene								. 1f		
was withheld.	g	Wages from Form 8919, line 6 .								. 1g		
If you did not get a Form	h	Other earned income (see instruct								. 1h		0.
W-2, see	i	Nontaxable combat pay election (,				1i					
instructions.	z	Add lines 1a through 1h								. 1z	: 9	91,646.
Attach Sch. B	2a		2a				axable interest	t.		. 2b		
if required.	3a	Qualified dividends	3a		361.	ЬC	Ordinary divide	nds .		. 3b)	471.
	4a	IRA distributions	4a			bТ	axable amoun	t		. 4b	•	
Standard	5a	Pensions and annuities	5a			bТ	axable amoun	t		. 5b		
Deduction for-	6a	Social security benefits	6a			bТ	axable amoun	t		. 6b		
 Single or Married filing 	с	If you elect to use the lump-sum e	lection r	method, c	heck here	(see	instructions)		[
separately, \$12,950	7	Capital gain or (loss). Attach Sche	dule D if	f required.	If not req	uired	l, check here		[7		-6.
 Married filing 	8	Other income from Schedule 1, lin	ie 10							. 8	-1	LO,360.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is yo	ur total in	com	е			. 9		31 , 751.
surviving spouse, \$25,900	10	Adjustments to income from Sche	dule 1, l	line 26						. 10		
Head of	11	Subtract line 10 from line 9. This is	s your a	djusted g	ross inco	me				. 11	8	31 , 751.
household, \$19,400	12	Standard deduction or itemized	deduct	ions (from	Schedule	e A)				. 12		12,950.
 If you checked 	13	Qualified business income deduct	ion from	Form 899	95 or Forn	n 899	95-A			. 13		1.
any box under Standard	14	Add lines 12 and 13								. 14	1	12,951.
Deduction	15	Subtract line 14 from line 11. If zer	ro or les	s, enter -0	This is	your	taxable incom	e.		. 15		58,800.

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 🗌 881	4 2 4972	3		16	10,725.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	10 , 725.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	10,725.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	10,725.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 12	,930.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction				25c			
	d	Add lines 25a through 25c						25d	12,930.
15	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return			26	
If you have a qualifying child,	27	Earned income credit (EIC)			No	27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30		1	
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	Indable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	12,930.
Refund	34	If line 33 is more than line 24						34	2,205.
Refutio	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	is attached, cheo	ck here	. 🗆	35a	2,205.
Direct deposit?	b	Routing number 1 1 1					Savings		
See instructions.	d	Account number 5 4 3					Ũ		
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	This is the amo	ount vou owe					
You Owe		For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	n with the IRS?	See			
Designee		structions	· · · · ·			. 🗌 Yes. Co	omplete b	elow.	X No
		signee's		Phone			onal identif	ication	
	nai			no.			ber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here		ur signature		Date	Your occupation		1	• •	nt you an Identity
	10	ui signature		Date	Tour occupation				IN, enter it here
Joint return?					PROCESS EN	IGINEER	(see i	nst.)	
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupati	on			nt your spouse an
Keep a copy for your records.							Ident (see i		ection PIN, enter it here
,							(1131.)	
		one no. (979) 676-671		Email address	SOHAM.KULKARN	12694@GMAIL.CO			Charleife
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	03/07/2023	P02082		Self-employed
Use Only		m's name GLOBAL TA			T 0001 C				(678) 965-9522
			Y CT E BRU	NSWICK N	1 08810		Firm'	s EIN	84-3171965
Go to www.ire a	ov/Form	1010 for instructions and the late	et information			DEV 00/04/00 DDO			Earm 1040 (2022)

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

BAA REV 02/24/23 PRO

Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

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 2

Attachment

Internal Revenue Service		Sequence No. 01	
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soci	al security number
SOHAM KULKARNI	283-91	-6893	

Par	t 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. Att		5	-10,360.
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		
h	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		
0	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	_	
	Wages earned while incarcerated	8u	_	
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	10.000
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF	k, or 1040-NK, line 8	10	-10,360.

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	e-basi	s gov	ernment		
	officials. Attach Form 2106				12	
13	Health savings account deduction. Attach Form 8889				13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903				14	
15	Deductible part of self-employment tax. Attach Schedule SE				15	
16	Self-employed SEP, SIMPLE, and qualified plans				16	
17	Self-employed health insurance deduction				17	
18	Penalty on early withdrawal of savings				18	
19a	Alimony paid				19a	
b	Recipient's SSN	· _				
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:					
а	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				
С	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				
е	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	e. Ente	er here	e and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA	REV	02/24/23 F	PRO	Schedu	le 1 (Form 1040) 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.

20 Attachment Sequence No. 12

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

SOHAM KULKARNI

Your social security number

283-91-6893

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)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss fro Form(s) 8949, Pa line 2, column (d	rt I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	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.				9)	
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	171.	281.			-110.
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 (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	-	6	()		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise		7	-110.		

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

This fame was the second state as we also if the second off a sector to the		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	s from Part II,	(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.					
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	tions, estates, and	trusts from Scheo	dule(s) K-1	12	
13	Capital gain distributions. See the instructions		13	104.		
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	104.
For F	Paperwork Reduction Act Notice, see your tax return instruction				Schedu	ile D (Form 1040) 2022

Part III

Part	III Summary	· · · · ·
16	Combine lines 7 and 15 and enter the result	16 –6.
	 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?	
	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
10		
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	19
20	 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? 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 (6.)
	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 02/24/23 PRO	Schedule D (Form 1040) 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 SOHAM KULKARNI

Department of the Treasury

283-91-6893

Social security number or taxpayer identification number

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)

(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 (e) Cost or other basis See the separate instructions.			
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.) disposed of (Mo., day, yr.)		(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) (g) Code(s) from instructions Amount of adjustment		
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	171.	281.			-110.
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 ne 2 (if Box B	171.	281.			-110.

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)	

OMB No. 1545-0074

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

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

2022	
Attachment	

	Revenue Service		Go to www.irs.gov/ScheduleE f					formation.		Attachm Sequenc	ent ce No. 13	
Name(s) shown on return								Your soci	al security r		
`	AM KULKARNI									1-6893		
Part			s From Rental Real Estate a	nd Ro	valtioe				205 5	1 0000		
I al l	Note: If you a	ire in t	the business of renting personal prop ss from Form 4835 on page 2, line 40	ertv. use	e Schedu	l e C . See	e instruc	ctions. If you	are an indiv	vidual, repo	ort farm	
Α			ents in 2022 that would require yo		Form(s)	1099? 5	See ins	tructions .		. 🗌 Ye	s 🕅 No	
					. ,							
1a			ach property (street, city, state, Z									
					6)							
Α	PLOT NO.51	KO	THRUD PUNE IN 411038									
B												
С							_					
1b	Type of Property	2	For each rental real estate prop				Fa	ir Rental	Person		QJV	
	(from list below)	-	above, report the number of fai personal use days. Check the 0					Days	Days			
<u>A</u>	3	-	if you meet the requirements to			A		365		0		
B		-	qualified joint venture. See inst			B						
С						C						
	of Property:											
	Single Family Resi			ental	5 Lan			Self-Rental				
2	Multi-Family Resid	lence	4 Commercial		6 Roy	/alties	8	Other (desc	ribe)			
								Propert	ies:			
ncon	ne:					Α		B			С	
3	Rents received .			. 3		6	11.					
4												
Ехреі												
5				. 5								
6	•		structions)									
7			ance			2,4	54.					
8	•					,						
9												
10			sional fees									
11						2,3	91.					
12	•		I to banks, etc. (see instructions)			_, -						
13												
14						2,7	01.					
15	•						84.					
16	Taxes			. 16		,						
17	Utilities			. 17		1,7	41.					
18	Depreciation exp	ense	or depletion									
19	Other (list)		·	10								
20	· · · · · · · · · · · · · · · · · · ·		nes 5 through 19			10,9	71.					
21	Subtract line 20 f	rom l	ine 3 (rents) and/or 4 (royalties). I	f								
			nstructions to find out if you mus									
				. 21		-10,3	60.					
22	Deductible rental	real	estate loss after limitation, if any	′,								
			structions)		(10,36	50.))	(
23a	Total of all amour	nts re	ported on line 3 for all rental prop		·		23a		611.			
b			ported on line 4 for all royalty pro				23b					
с			ported on line 12 for all propertie				23c					
d			ported on line 18 for all propertie				23d					
е			ported on line 20 for all propertie				23e	10),971.			
24			amounts shown on line 21. Do n		ude any	losses			. 24			
25			sses from line 21 and rental real est		-		Enter to	tal losses he		(1	0,360.	
26	-	-	te and royalty income or (loss)									

For Paperwork Reduction Act Notice, see the separate instructions.

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

-10,360.

NPA

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 12

Attachment Sequence No. 55

Name(s) shown on return		Your taxpaye	r identification number
SOHAM KIILKARNT	r	283-91-	-6893

SOHAM KULKARNI

0093

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			(c) Qualified business income or (loss)		
i						
ii						
iii						
iv						
v						
2	Total qualified business income or (loss). Combine lines 1i through 1v,					
	column (c)	2				
3	Qualified business net (loss) carryforward from the prior year	3 ()				
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4				
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5			
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)					
	(see instructions)	6 6.				
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior	7 (
•		7 ()				
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8 6.				
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	1.		
10	Qualified business income deduction before the income limitation. Add lines 5 and		10	<u> </u>		
11		11 68,801.		±•_		
12		12 361.				
13	Subtract line 12 from line 11. If zero or less, enter -0					
14	Income limitation. Multiply line 13 by 20% (0.20)		14	13,688.		
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also	enter this amount on				
	the applicable line of your return (see instructions)	15	1.			
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	(0.)		
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and	nd 7. If greater than				
	zero, enter -0		17	(0.)		
For Pri	vacy Act and Paperwork Reduction Act Notice, see instructions. REV 02/2	24/23 PRO		Form 8995 (2022)		