## Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

### IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submission	n Identification Number (SID)				
Taxpayer's nar	me	Social securi	ty numb	er	
KARTIK	BANSAL	796-34	-6255	5	
Spouse's name		Spouse's soo			r
Doubl	Toy Datum Information Toy Year Ending December 24			به مانداد ما	<u>,                                      </u>
Part I	<u> </u>	nter year you a	ire aui	nonzing	.)
	e dollars only on lines 1 through 5.				
	n 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  usted gross income		11	1 0 /	1,125.
-	al tax		2		1,958.
	eral income tax withheld from Form(s) W-2 and Form(s) 1099		3		692.
	ount you want refunded to you		4		734.
	ount you owe		5		1,/51.
Part II	Taxpayer Declaration and Signature Authorization (Be sure you get a	nd keep a cop	y of y	our retu	ırn)
Under penalt my knowledg return (origin to send my r for any delay Agent to initipayment of nauthorization payment, I n business day taxes to recepersonal ider Electronic Fu Taxpayer's X I a	ties of perjury, I declare that I have examined a copy of the income tax return (original or amerige and belief, it is true, correct, and complete. I further declare that the amounts in Part I all or amended) I am now authorizing. I consent to allow my intermediate service provider, traceturn to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the ate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accounting federal taxes owed on this return and/or a payment of estimated tax, and the financial insit is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation is prior to the payment (settlement) date. I also authorize the financial institutions involved in eleve confidential information necessary to answer inquiries and resolve issues related to the indiffication number (PIN) below is my signature for the income tax return (original or amended and Withdrawal Consent.  Se PIN: check one box only  Taxes LLC to enter or generative on the income tax return (original or amended) I am now authorizing.	anded) I am now aurabove are the amansmitter, or electron rejection of the the U.S. Treasury at tindicated in the titution to debit the innate the authorizing requests must be the processing of the payment. I furth all I am now authorizing readers are my PIN	thorizing ounts from the following the control of t	g, and to the rom the in urn original sion, (b) the designated variation so this according to the certonic parameters of the cert	he best of icome tax ator (ERO) he reason Financial fitware for ount. This (cancel) a er than 2 ayment of e that the cable, my
be	you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN nelow.  Date  Date	nethod. The ER0  ▶ 03/09/2023	) must	complet	e Part III
Your signat	ure F	03/03/2023			
Spouse's F	PIN: check one box only				
∐ la	uthorize to enter or gener	,			as my
oic	gnature on the income tax return (original or amended) I am now authorizing.			digits, but r all zeros	
☐ I w	vill enter my PIN as my signature on the income tax return (original or amended) I a you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN relow.				
Spouse's si	ignature ▶ Date	<b>&gt;</b>			
	Practitioner PIN Method Returns Only—continue be	low			
Part III	Certification and Authentication — Practitioner PIN Method Only				
ERO's EFIN	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 9 Don't ent	6 6 er all ze		3 9
authorized to	the above numeric entry is my PIN, which is my signature for the electronic individual incorp file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am soft the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers	submitting this retu	urn in a	ccordance	
ERO's signa	ature ► Date	<b>&gt;</b>			
	ERO Must Retain This Form — See Instruction				
	Don't Submit This Form to the IRS Unless Requested	10 DO 20			

# E 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	s 🔀 S	Single  Married filing jointly	Marrie	ed filing separately	(MFS)	☐ Head of	household (HOH)		ifying su		l
Check only one box.	If yo	u checked the MFS box, enter the n	name of y	our spouse. If you	ı check	ed the HOH or	QSS box, enter the		use (QSS name if	,	alifying
	pers	on is a child but not your dependen	t:								
Your first name	and mi	ddle initial	Last nar	me				Your social security number			
KARTIK			BANS	AL				796-34-6255			
If joint return, s	pouse's	first name and middle initial	Last nar	me				Spouse's	s social s	ecurity I	number
Home address	(numbe	er and street). If you have a P.O. box, see	l e instructio	ons.			Apt. no.	Preside	ntial Elec	tion Ca	 mpaign
1146 HAI	RRISC	ON ST					529		ere if you		
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete sp	paces below.	Sta	te	ZIP code		if filing jo this func		
SEATTLE					WZ	A	98109	0	ow will no		0
Foreign country name			F	oreign province/sta	te/count	ty	Foreign postal code	your tax	or refun	.t	
									You	;	Spouse
Digital		ny time during 2022, did you: (a) rec	•				• ,.	. ,	□ <b>v</b>	. <b>X</b> I	NI.
Assets		ange, gift, or otherwise dispose of		<u>_</u>			asset)? (See Instru	ctions.)	Yes		NO
Standard Deduction	_	eone can claim:		•		a dependent					
Age/Blindness	You:	☐ Were born before January 2, 1	1958	Are blind S	Spouse	: Was bor	n before January 2	2, 1958	☐ Is I	olind	
Dependent				(2) Social secu	ritv	(3) Relationsh	(4) Ob   - +     -		ies for (se	e instru	ctions):
If more	(1) First name Last name			number		to you	Child tax cr	edit	Credit for other dependent		pendents
than four											
dependents,											
see instruction and check	S ——										
here	]										
Income	1a	Total amount from Form(s) W-2, b	oox 1 (see	e instructions) .				. 1a	1	94,4	148.
	b	Household employee wages not r	eported	on Form(s) W-2 .				. 1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)									
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26									
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29									
If you did not	g	Wages from Form 8919, line 6									
get a Form W-2, see	h	Other earned income (see instruct	structions)						_		0.
instructions.	i	Nontaxable combat pay election (see instructions)									
	z	Add lines 1a through 1h	·					. 1z	1	94,4	
Attach Sch. B	2a	Tax-exempt interest	2a			axable interes		. 2b			62.
if required.	<u>3a</u>	Qualified dividends	3a	288.		ordinary divide		. 3b			288.
	4a	IRA distributions	4a			axable amoun		. 4b			
Standard Deduction for—	5a	_	5a			axable amoun		. 5b			
Single or	6a	,	6a			axable amoun	t	. 6b	-		
Married filing separately,	C	If you elect to use the lump-sum e		*	`	,		\			0
\$12,950	7	Capital gain or (loss). Attach Sche					L	J 7		10 /	9.
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lir						. 8		-10,6	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-				. 9		84,1	
\$25,900	10	Adjustments to income from Sche	•					. 10		011	105
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is Standard deduction or itemized						. 11			125.
\$19,400 If you checked	12 13	Qualified business income deduction		`	,	 5_Δ		. <u>12</u> . 13		<u> </u>	950.
any box under	14							. 13		12 (	
Standard Deduction,	15			 s enter-0- This i						12,5 171,1	9 <u>50.</u> 175
see instructions.	13	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>								. / ⊥ <b>,</b> ⊥	_ / J .

Form 1040 (2022	2)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	34,958.	
Credits	17	Amount from Schedule 2, lir	ne 3					17		
	18	Add lines 16 and 17						18	34,958.	
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lir	ne 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	34,958.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .			23	0.	
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	34,958.	
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				<b>25a</b> 3	9,692.			
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	39,692.	
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return			26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27				
	28	Additional child tax credit from	m Schedule 8812			28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	ne 15			31				
	32	Add lines 27, 28, 29, and 31	,	-	-			32		
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	39,692.	
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	4,734.	
	35a	Amount of line 34 you want			is attached, che	ck here	🗌	35a	4,734.	
Direct deposit?	b	Routing number 0 8 3 0 0 0 1 3 7 c Type: X Checking Savings								
See instructions.	d	Account number 7 0 7	7   9   9   7	8 6						
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37		
	38	Estimated tax penalty (see in	nstructions) .			38				
<b>Third Party</b>		you want to allow another	•							
Designee							Complete I		⊠ No	
		signee's me		Phone no.		sonal identi ber (PIN)	fication			
Sign	Un	der penalties of perjury, I declare flief, they are true, correct, and com			, , ,		,		, ,	
Here	Yo	ur signature		Date	Your occupation		If the	· · · e IRS ser	nt vou an Identity	
		Kartik Bankel							IN, enter it here	
Joint return?		Carll			SR.PRODUC'		(see	inst.)		
See instructions. Keep a copy for your records.	Sp	Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupat	ion	Iden	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Ph	one no. (412) 708-550	7	Email address	KARTIKBANSA	L007@GMAIL.C	OM			
Doid	Pre	eparer's name	Preparer's signat	ure	-	Date	PTIN		Check if:	
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/06/2023	P0208	2703	Self-employed	
Preparer	Fir	m's name GLOBAL TA	XES LLC				Phor	ne no. (	678)965-9522	
Use Only	Fir							's EIN	84-3171965	

# SCHEDULE 1 (Form 1040)

#### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2022

Attachment Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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

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

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

KART	IK BANSAL	796-3	-34-6255				
Par	t 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. Attac			5	-10,682.		
6	Farm income or (loss). Attach Schedule F			6			
7	Unemployment compensation			7			
8	Other income:						
а	Net operating loss	8a (	)				
b		3b					
С		Вс					
d		3d (	)				
е	Income from Form 8853	Ве					
f	Income from Form 8889	8f					
g		3g					
h		8h					
i	Prizes and awards	8i					
j	Activity not engaged in for profit income	8j					
k	Stock options	8k					
- 1	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)	3m					
n	· · · · · · · · · · · · · · · · · · ·	8n					
0	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Во					
р	•	Вр					
q	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	Bq					
r	1 1 5 1	8r					
S	Nontaxable amount of Medicaid waiver payments included on Form						
	· · · · · · · · · · · · · · · · · · ·	8s (	)				
t	Pension or annuity from a nonqualifed deferred compensation plan or						
	•	8t					
u		Bu					
Z	Other income. List type and amount:						

Total other income. Add lines 8a through 8z . . . . . . . .

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

-10**,**682.

9

10

8z

Schedule 1 (Form 1040) 2022 Page **2** 

Par	t 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	
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	, , , , ,	24a		
b	Deductible expenses related to income reported on line 8l from the			
		24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	· · · · · · · · · · · · · · · · · · ·	24c		
d	' '	24d		
е	Repayment of supplemental unemployment benefits under the Trade			
	F	24e	_	
f		24f	-	
g	• • • • • • • • • • • • • • • • • • • •	24g	-	
h	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			
		24i	-	
j		24j	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	- 41		
		24k	-	
Z	Other adjustments. List type and amount:	0.4		
0-		24z	0.5	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .	. Enter here and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

#### SCHEDULE D (Form 1040)

Department of the Treasury

#### **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** 

Internal Revenue Service Name(s) shown on return Your social security number 796-34-6255 KARTIK BANSAL Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? 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 (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (g) line 2. column (a) 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 . . . . . . . . . . . . . . 620. 611. 9. 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 . . . . . . . . . . . . . . . Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . . . . . 7 9. 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 (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (or other basis) Form(s) 8949, Part II, (sales price) combine the result whole dollars. line 2. column (a) with column (a) 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 9 Totals for all transactions reported on Form(s) 8949 with 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

14

15

Schedule D (Form 1040) 2022 Page **2** 

#### Part III Summary 16 Combine lines 7 and 15 and enter the result 16 9. • 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 • 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 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. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X 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.

### 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. OMB No. 1545-0074 Attachment

Sequence No. 12A

Internal Revenue Service Name(s) shown on return KARTIK BANSAL

Department of the Treasury

Social security number or taxpayer identification number 796-34-6255

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 F	orm 1099-B	·				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> 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 Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) an combine the result with column (g).	
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	620.	611.			9.	
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked) or line 3 (if Box 6).	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	620.	611.			9.	

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.

#### **SCHEDULE E** (Form 1040)

#### **Supplemental Income and Loss**

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

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return KARTIK BANSAI

Your social security number 796-34-6255

NAN.	II DANSAL						190-5	4-0233	,		
Par	Income or Loss From Rental Real Estate and Note: If you are in the business of renting personal propert rental income or loss from Form 4835 on page 2, line 40.			C. See	instru	ctions. If you are	an indiv	/idual, rep	oort farm		
Α	Did you make any payments in 2022 that would require you	to file F	orm(e) 1	0002 5	Soo inc	etructions			oe 🛛 N	In.	
		Yes," did you or will you file required Form(s) 1099?								lo	
1a	Physical address of each property (street, city, state, ZIP										
Α	B-104, NABARD VIHAR SECTOR 66 MOHALI P	PIIN.TAF	3 TN 1	6006	2						
В	B 1017 MIDING VIIIN BEGION OF HOMEL I	0110111	J 111 1	0000							
C											
1b	Type of Property (from list below)  2 For each rental real estate proper above, report the number of fair r					ir Rental Days		onal Use Days		QJV	
Α	personal use days. Check the QJ			Α		365		0	$\vdash \sqcap$		
В	if you meet the requirements to fi	ile as a		В		300			$\vdash \vdash$		
C	qualified joint venture. See instruc	ctions.	ŀ	C							
	of Property:										
1	Single Family Residence 3 Vacation/Short-Term Rent Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (describ	oe)				
						Properties	s:				
Incor	ne:			Α		В			С		
3	Rents received	3		6	37.						
4	Royalties received	4									
Expe											
5	Advertising	5									
6	Auto and travel (see instructions)	6									
7	Cleaning and maintenance	7		2.7	68.						
8	Commissions	8									
9	Insurance	9									
10	Legal and other professional fees	10									
11	Management fees	11		1.8	56.						
12	Mortgage interest paid to banks, etc. (see instructions)	12		<b>±</b> , 0	•••						
13	Other interest	13									
14	Repairs	14		2.6	77.						
15	Supplies	15			31.						
16	Taxes	16		2,0	<u> </u>						
17	Utilities	17		1 Δ	87.						
18	Depreciation expense or depletion	18		Τ, ¬	07.						
19	Other (list)	19									
20	Total expenses. Add lines 5 through 19	20		11,3	1 0						
		20		11,5	19.						
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 <b>Form 6198</b>	21	_	-10,6	82.						
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22 (		10,68	32.)	(	)	(		)	
23a	Total of all amounts reported on line 3 for all rental proper	rties		· .	23a		637.				
b	Total of all amounts reported on line 4 for all royalty prope				23b						
С	Total of all amounts reported on line 12 for all properties				23c						
d					23d						
e	Total of all amounts reported on line 20 for all properties				23e	11.	319.				
24	Income. Add positive amounts shown on line 21. <b>Do not</b>			sses			24				
25	Losses. Add royalty losses from line 21 and rental real estate		•		nter to	otal losses here		(	10,682	21	
26	Total rental real estate and royalty income or (loss).							1	,	<u> </u>	
20	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	apply t	o you, a	also er	nter th	nis amount on			-10.68	3.2	
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