Department of the Treasury Calendar Year — Internal Revenue Service

Due 04/18/2023

# 2023 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

949.

REV 02/24/23 PRO

1555

686-70-8647 DHRUVA JULOORI

482 TRISTANIA TERRACE SUNNYVALE CA 94086

Department of the Treasury Calendar Year — Internal Revenue Service

Due 06/15/2023

# 2023 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

949.

REV 02/24/23 PRO

1555

686-70-8647 DHRUVA JULOORI

482 TRISTANIA TERRACE SUNNYVALE CA 94086

Department of the Treasury Calendar Year — Internal Revenue Service

Due 09/15/2023

# 2023 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

949.

REV 02/24/23 PRO

1555

686-70-8647 DHRUVA JULOORI

482 TRISTANIA TERRACE SUNNYVALE CA 94086

Department of the Treasury Calendar Year — Internal Revenue Service

Due 01/16/2024

# 2023 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

949.

REV 02/24/23 PRO

1555

686-70-8647 DHRUVA JULOORI

482 TRISTANIA TERRACE SUNNYVALE CA 94086

## 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

	5.000		_			
Submi	ssion Identification Number (SID)					
Taxpaye	r's name	Social securi	ty numl	ber		
DHRU	JVA JULOORI	686-70	-864	7		
Spouse's	s name	Spouse's soo	ial sec	urity numb	er	
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	 er year you a	ire all	thorizing	1 )	
	whole dollars only on lines 1 through 5.	i year you c	iic au	tilonzing	<i>j·)</i>	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
	Adjusted gross income		1	23	0,39	98.
	Total tax		2		0,54	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		1,80	
4	Amount you want refunded to you		4		1,26	
5	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our ret	urn)	
my knoreturn (control to send for any Agent to payment authorize payment business taxes to personal	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I about original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account induction of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation received confidential information necessary to answer inquiries and resolve issues related to the alignment of the payment (PIN) below is my signature for the income tax return (original or amended) I and Financial Withdrawal Consent.	ve are the amnitter, or electricition of the tal. J.S. Treasury a dicated in the talion to debit the ethe authorizates must be processing opayment. I fur	ounts for the counts of the co	from the inturn origin ssion, (b) designated paration so to this according to revoke ved no la dectronic pokenowledge.	ncom lator ( the red d Fina oftwal count. (can ter the payme je tha	e tax (ERO) eason ancial re for . This cel) a nan 2 ent of at the
	yer's PIN: check one box only				1	
X		my PIN 0	8 (	6   4   7	]	s my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	as	oiiiy
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN metibelow.					
Your si	ignature ▶ Date ▶					
Snous	e's PIN: check one box only				_	
	I authorize to enter or generate	my PIN			20	s my
	ERO firm name	_	ter five	digits, but	_	illy
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN metion below.					
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	/				
Part I	Certification and Authentication — Practitioner PIN Method Only					
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 4 9 Don't ent	6 6 erallze		8 9	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of	ax return (orig	inal or urn in a	amended) accordanc		
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To	Do So				

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.

one box. If you checked the MRS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:  Your first name and middle initial  Last name    Your social security number	Filing Status Check only	<b>S X S</b>	Single Married filing jointly	Marrie	ed filing separatel	y (MFS)	Head of	hous	ehold (HOF	H)		ifying surv ıse (QSS)	iving
DETRUVA   To price the control of					our spouse. If yo	u check	ed the HOH o	r QSS	S box, ente	r the c	hild's	name if the	e qualifying
If joint return, spouse's first name and middle initial   Last name   Return   Ret	Your first name	and mi	ddle initial	Last na	me					Yo	ur so	cial security	y number
Apt. no.   Presidential Election Campaign	DHRUVA			JULO	ORI					6	686-70-8647		
Check here if you, or your   Check here if you have a freely be to get your as or refund.   Check here	If joint return, s	pouse's	first name and middle initial	Last na	me					Sp	ouse'	s social sec	urity number
State   City, town, or post office. If you have a foreign address, also complete spaces below.   CAA	Home address	(numbe	r and street). If you have a P.O. box, see	e instruction	ons.				Apt. no.				
SUNDITYVALE Foreign country name Foreign province/state/county Foreign postal code Foreign province/state/county Foreign postal code For	482 TRIS	STAN	IA TERRACE					$\perp$					
Foreign country name	City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete s	paces below.							0,	•
Spouse instructions   Gardinary   Check the box if qualifies for (see instructions)   Spouse instructions   Gardinary   Gard								_					change
Assets sexchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)	Foreign country	y name			Foreign province/sta	ate/count	ty	Fore	eign postal co	ode   yo	ur tax	_	Spouse
Standard Deduction Deduction	Digital												<b>V</b> N.
Age/Blindness  You:   Were born before January 2, 1958   Are blind  Spouse:   Was born before January 2, 1958   Is blind  Dependents (see instructions): (2) Social security number	-							asse	t)? (See in:	struction	ons.)	∐ Yes	No No
Comparison   Com	Standard Deduction			•			•						
If more than four dependents, see instructions and check here	Age/Blindness	You:	Were born before January 2,	1958 [	Are blind	Spouse	: Was bo						
If more than four dependents, see instructions and check here	Dependents	s (see	instructions):			urity		nip	(4) Check th	e box if	qualif	ies for (see i	nstructions):
dependents, see instructions and check here	If more	<b>(1)</b> Fi	rst name Last name		number		to you		Child ta	x credi	t	Credit for other dependents	
Income									L	ᆜ		L	
Income  Income  Income  Income  Attach Form(s) W-2 here. Also W-2 here Also W-2 here. Also W-2 here. Also W-2 here. Also W-2 here. Also W-2 here Also W-2 here. Also Here. Also W-2 here. Also Here. Also W-2 her		s ——								<u> </u>			
Income  1a Total amount from Form(s) W-2, box 1 (see instructions)		, —								<u> </u>		L	
b Household employee wages not reported on Form(s) W-2 Attach Form(s) W-2 here, Also attach Forms W-2 here, Also attach Forms W-2G and Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  d Taxable dependent care benefits from Form 8839, line 26  f Employer-provided adoption benefits from Form 8839, line 29  ff Wages from Form 8919, line 6  ff Wages from Form 8919, line 6  ft Other earned income (see instructions)  d Nontaxable combat pay election (see instructions)  d Add lines 1 a through 1h  d It Add dilines 1 a through 1h  d It A distributions  d It	nere								L				
Attach Forms W-26 and 1099-Ri ft ax was withheld. If you did not get a Form W-2, see instructions.  If you did not get a Form W-2, see instructions.  If required.  If required.  If a Qualified dividends . 3a Qualified dividends . 3a Qualified filing separately. S12,950  Married filing household, s19,400  Married filing house	Income			,	,								6,490.
W-2 here. Also attach Forms W-2G and 1099-Ri f tax was withheld. If you did not get a Form W-2, see instructions  W-2, see instructions.  It was withheld. If you did not get a Form W-2, see instructions  W-2, see instructions.  It was withheld. If you did not get a Form W-2, see instructions  V-2, see instructions.  It was withheld. If you did not get a Form W-2, see instructions  V-2, see instructions.  It was withheld. If you did not get a Form W-2, see instructions  V-2, see instructions.  It was withheld. If you did not get a Form W-2, see instructions  V-2, see instructions.  It was withheld. If you did not get a Form W-2, see instructions)  V-2, see instructions.  It was withheld. It was withheld. If you did not get a Form W-2, see instructions)  V-2, see instructions.  It was withheld. It was withheld. If you did not get a Form W-2, see instructions)  V-2, see instructions.  It was withheld. It was withheld. It was withheld. If you did not get a Form W-2, see instructions)  V-2, see instructions.  It was withheld. If you did not get a Form W-2, see instructions)  It was withheld. It was	Attach Form(s)			•									
W-2G and 1099-R if tax was withheld. If you did not get a Form Ways get a Form Ways as withheld. If you did not get a Form Ways get a Form Ways as withheld. If you did not get a Form Ways ge	W-2 here. Also		·	•	•						_		
1099-Rif tax   was withheld.   f   Employer-provided adoption benefits from Form 8839, line 29   1f					` ,	e mstru	ictions)						
Wages from Form 8919, line 6			•		·						_		
See instructions   See instruc											_		
W-2, see instructions.  I Nontaxable combat pay election (see instructions)  Add lines 1a through 1h  Attach Sch. B if required.  2a								•					0
Add lines 1a through 1h  Attach Sch. B  Attach Sch. Sch. Sch. Sch. Sch. Sch. Attach Schedule D if required. If not required, check here (see instructions)  Attach Sch. B  Attach Sch. Sch. Sch. Sch. Sch. Sch. Sch. Attach Schedule D if required. If not required, check here  Attach Sch. B  Attach Sch. B  Attach Sch. Sch. Sch. Sch. Sch. Sch. Sch. Sc			,	,				i İ					
Attach Sch. B if required.  3a Qualified dividends 3a 32.  4a IRA distributions 4a b Taxable amount 4b  Standard Deduction for—Single or Married filing separately, \$12,950	instructions.		• •	300 111311	uctions)						17	25	6 490
if required.  3a Qualified dividends 3a 32. b Ordinary dividends	Attach Sch B			2a		 h T	 axable interes	t.			_		
4a IRA distributions 4a b Taxable amount 4b  Standard Deduction for—Single or Married filing separately, \$12,950  Married filing jointly or Qualifying surviving spouse, \$25,900  Head of household, \$19,400  Head of household, \$19,400  If you delect to income from Schedule 1, line 26  Standard deduction or itemized deductions (from Schedule A)  IRA distributions 4a b Taxable amount 5b  Taxable amount 6b  Taxable amount 6bb			· -		32.						_		
Standard Deduction for—Single or Married filing separately, \$12,950  Married filing jointly or Qualifying source, \$25,900  Head of household, \$19,400  If you checked any box under Standard Deduction, \$200 and \$													
Comparison of the diling separately, \$12,950   Social security benefits   Ga	Standard												
Single or Married filing separately, \$12,950  Married filing jointly or Qualifying surviving spouse, \$25,900  Head of Household, \$19,400  If you checked any box under <i>Standard Deduction</i> ,  Deduction,  Single or Married filing separately, \$12,950  If you elect to use the lump-sum election method, check here (see instructions)  Capital gain or (loss). Attach Schedule D if required. If not required, check here  7	Deduction for-	6a	<del>-</del>	6a							6b		
\$12,950  Married filing jointly or Qualifying surviving spouse, \$25,900  Head of household, \$19,400  If you checked any box under Standard Deduction, Peduction, Deduction, Deduction, Deduction, Deduction, Deduction, Deduction, Deduction, Description Schedule 1, line 10 in required, check nere in the required		С	_	election r	nethod, check he	ere (see	instructions)			. 🗆			
Married filing jointly or Qualifying 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 230, 398.  10 Adjustments to income from Schedule 1, line 26 10 Subtract line 10 from line 9. This is your adjusted gross income 11 230, 398.  12 Standard deduction or itemized deductions (from Schedule A) 12 12, 950.  13 Qualified business income deduction from Form 8995 or Form 8995-A 13 Add lines 12 and 13 14 Add lines 12 and 13 15 Subtract line 14 from line 11. If zero or less enter -0- This is your taxable income 15 217, 448		7	Capital gain or (loss). Attach Sche	edule D if	required. If not r	equired	, check here			. 🗆	7		-29.
Qualifying surviving spouse, \$25,900Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income9230, 398.Head of household, \$19,40011Subtract line 10 from line 9. This is your adjusted gross income11230, 398.If you checked any box under Standard Deduction, \$19,40012Standard deduction or itemized deduction from Form 8995 or Form 8995-A1314Add lines 12 and 131412,950.Deduction, Deduction, 15Subtract line 14 from line 11. If zero or less enter -0- This is your taxable income15217,448	Married filing	8	Other income from Schedule 1, lir	ne 10							8	-2	6,168.
surviving spouse, \$25,900  Head of household, \$19,400  If you checked any box under Standard Deduction, Peduction, Peduction, 15  Subtract line 10 from line 9. This is your adjusted gross income		9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is your <b>total</b>	income	e				9		
Head of household, \$19,400  It you checked any box under Standard Deduction, Deduction, Deduction, 15 Subtract line 10 from line 9. This is your adjusted gross income	surviving spouse,	10	Adjustments to income from Sche	edule 1, l	ine 26						10		
\$19,400	Head of	11	Subtract line 10 from line 9. This i	s your <b>a</b> c	djusted gross in	come					11	23	0,398.
13 Qualified business income deduction from Form 8995 or Form 8995-A		12	Standard deduction or itemized	deduct	ions (from Sched	ule A)					12	1	2,950.
Standard         14         Add lines 12 and 13         1.         14         12,950           Deduction,         15         Subtract line 14 from line 11. If zero or less, enter -0. This is your taxable income.         15         217,448	If you checked	13	Qualified business income deduc-	tion from	Form 8995 or Fo	orm 899	5-A				13		
	Standard	14	Add lines 12 and 13								14	1	2,950.
		15	Subtract line 14 from line 11. If ze	ro or les	s, enter -0 This	is your t	taxable incon	ne			15	21	7,448.

Form 1040 (202)	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	49,854.
Credits	17	Amount from Schedule 2, lir	те 3					. 17	
	18	Add lines 16 and 17						. 18	49,854.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			. 19	
	20	Amount from Schedule 3, lir	те 8					. 20	
	21	Add lines 19 and 20						. 21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. 22	49,854.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .			. 23	690.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					. 24	50,544.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a	51,1	17.	
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c	6	88.	
	d	Add lines 25a through 25c						. 25d	51,805.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return			. 26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	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							
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable cr	edits .	. 32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				. 33	51,805.
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>over</b>	paid .	. 34	1,261.
	35a	Amount of line 34 you want			is attached, che	ck here .		□ 35a	1,261.
Direct deposit?	b	Routing number 0 7 1			c Type:	Checking	Savi	ngs	
See instructions.	d	Account number 9 3 1	8 3 5 7	9 2					
	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			
Third Party Designee		you want to allow another structions	•				<b>'es.</b> Comp	lete below.	<b>⋈</b> No
		signee's		Phone				identification	
		me		no.			number (F		
Sign Here		der penalties of perjury, I declare till lief, they are true, correct, and com							
11010	Yo	ur signature		Date	Your occupation				ent you an Identity PIN, enter it here
loint roturn?					SOFGTWARE	FNCINE	rp	(see inst.)	III, enter it here
Joint return? See instructions. Keep a copy for your records.	Sp	ouse's signature. If a joint return,	ooth must sign.	Date	Spouse's occupat		ыĸ		ent your spouse an ection PIN, enter it here
	Ph	one no.		Email address	DHRUVA.JULOO	RI2794@GMA	AIL.COM		
Datal	Pre	eparer's name	Preparer's signat	ure		Date	PT	IN	Check if:
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/04/2	2023 PO	2082703	Self-employed
Preparer	Fir	m's name GLOBAL TA	XES LLC						(678)965-9522
Use Only	Fir		Y CT E BRU	NSWICK N	J 08816			Firm's EIN	84-3171965
Co to ununu ima m	a//_a	n1040 for instructions and the late	at information						F 1040 (0000)

# 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.

OHRU	JVA JULOORI		686-70-8	647
Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received			
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C			-26,168.
4	Other gains or (losses). Attach Form 4797			
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach			
6	Farm income or (loss). Attach Schedule F			
7	Unemployment compensation	,	7	
8	Other income:		,	
а	Net operating loss		)	
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555		)	
е	Income from Form 8853	_		
f	Income from Form 8889	_		
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
į	Prizes and awards	_		
j	Activity not engaged in for profit income			
k	Stock options			
ı	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 8I			
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)			
n o	Section 951A(a) inclusion (see instructions)			
_	Section 461(I) excess business loss adjustment			
p 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	; (		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan 8t	:		
u	Wages earned while incarcerated 8u	ı		
Z	Other income. List type and amount:			
	8z			
9	Total other income. Add lines 8a through 8z		9	

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

-26,168.

10

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 governr			
	officials. Attach Form 2106	L	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	L	17	
18	Penalty on early withdrawal of savings	L	18	
19a	Alimony paid		I9a	
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	L	23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
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)			
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	_		
J	Housing deduction from Form 2555	_		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
_	1041)			
Z	Other adjustments. List type and amount:24z			
25	Total other adjustments. Add lines 24a through 24z		25	
25 26	,		23	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	1 01111 1040 01 1040-011, IIIIE 10, 01 1 01111 1040-1110, IIIIE 10a		<b>2</b> 0	

#### SCHEDULE 2 (Form 1040)

15

16

Department of the Treasury Internal Revenue Service

### **Additional Taxes**

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

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

OMB No. 1545-0074

2022

Attachment
Sequence No. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number DHRUVA JULOORI 686-70-8647 Part I Tax 1 Alternative minimum tax. Attach Form 6251 . . . . . . 1 2 2 Excess advance premium tax credit repayment, Attach Form 8962 . . . . . . . . 3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17. 3 Part II **Other Taxes** 4 Self-employment tax. Attach Schedule SE . . . . . . . . . . . 4 5 Social security and Medicare tax on unreported tip income. Attach Form 4137 5 Uncollected social security and Medicare tax on wages. Attach 6 6 7 Total additional social security and Medicare tax, Add lines 5 and 6 . . . 7 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. 8 8 9 Household employment taxes. Attach Schedule H . . . . . . . . . . . . . . . . . . 9 Repayment of first-time homebuyer credit. Attach Form 5405 if required . . . . . 10 10 Additional Medicare Tax. Attach Form 8959 11 11 687. 12 12 3. 13 Uncollected social security and Medicare or RRTA tax on tips or group-term life 13 Interest on tax due on installment income from the sale of certain residential lots 14 14

Interest on the deferred tax on gain from certain installment sales with a sales price

Recapture of low-income housing credit. Attach Form 8611 . . . . . . . . . . . .

(continued on page 2)

15

16

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

Schedule 2 (Form 1040) 2022

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

### Part II Other Taxes (continued)

7	Other additional taxes:				
а	Recapture of other credits. List type, form number, and amount:				
		17a			
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b			
С	Additional tax on HSA distributions. Attach Form 8889	17c			
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d			
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e			
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f			
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g			
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h			
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	<b>17</b> i			
j	Section 72(m)(5) excess benefits tax	17j			
k	Golden parachute payments	17k			
I	Tax on accumulation distribution of trusts	171			
m	Excise tax on insider stock compensation from an expatriated corporation	17m			
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n			
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170			
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p			
q	Any interest from Form 8621, line 24	17q			
Z	Any other taxes. List type and amount:				
		17z			
8	Total additional taxes. Add lines 17a through 17z		18		
9	Reserved for future use		19		
20	Section 965 net tax liability installment from Form 965-A	20			
21	Add lines 4, 7 through 16, and 18. These are your <b>total other taxe</b>		0.1	1	
	on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21		690.

# SCHEDULE C (Form 1040)

# Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

	of proprietor						I security number (SSN)
DHRU		n inc	luding product or comice /	o inct···	uotiono)		-70-8647
Α	Principal business or profession	ווכ, inc	iuding product or service (se	e instri	uctions)		er code from instructions
	SOFTWARE SERVICES						5 1 9 2 0 0
С	Business name. If no separate	nızua e	ess name, leave blank.			D Emp	ployer ID number (EIN) (see instr.)
	SOFTWARE SERVICES		, 400 mp to				
E	Business address (including si		′				
	City, town or post office, state						
F	Accounting method: (1)	_	• • • •				
G				_	2022? If "No," see instructions for I		_
Н .			-				
'.					n(s) 1099? See instructions		
J		e requi	red Form(s) 1099?				L Yes L No
Par							
1					this income was reported to you or	I	
•	•				1	1	
2							
3							
4							+
5 6					refund (see instructions)		+
			•		•		
7 Part			es for business use of yo				
8	Advertising	8		18	Office expense (see instructions)	18	
	ğ	-		19	Pension and profit-sharing plans		
9	Car and truck expenses (see instructions)	9	9,368.	20	Rent or lease (see instructions):	13	
10	Commissions and fees .	10	7,300.	a	Vehicles, machinery, and equipmen	20a	
11	Contract labor (see instructions)	11		b	Other business property		12,000.
12	Depletion	12		21	Repairs and maintenance		12,000.
13	Depreciation and section 179			22	Supplies (not included in Part III)		
	expense deduction (not			23	Taxes and licenses		
	included in Part III) (see instructions)	13		24	Travel and meals:		
14	Employee benefit programs			a	Travel	24a	
14	(other than on line 19) .	14		b	Deductible meals (see		
15	Insurance (other than health)	15			instructions)	24b	4,800.
16	Interest (see instructions):			25	Utilities		·
а	Mortgage (paid to banks, etc.)	16a		26	Wages (less employment credits)	26	
b	Other	16b		27a	Other expenses (from line 48) .	27a	
17	Legal and professional services	17		b	Reserved for future use	27b	
28	Total expenses before expen	ses fo	r business use of home. Add	l lines 8	8 through 27a	28	26,168.
29	Tentative profit or (loss). Subtr	ract lin	e 28 from line 7			29	-26,168.
30	Expenses for business use of	of your	home. Do not report these	e expe	nses elsewhere. Attach Form 8829	)	
	unless using the simplified me						
	Simplified method filers only						
	and (b) the part of your home						
			-	ter on I	ine 30	30	
31	Net profit or (loss). Subtract	line 30	from line 29.		1		
	<ul> <li>If a profit, enter on both Sch checked the box on line 1, see</li> </ul>	e instru	• • • • • • • • • • • • • • • • • • • •			31	-26,168.
	• If a loss, you must go to line				J		
32	If you have a loss, check the b	oox tha	at describes your investment	in this	activity. See instructions.		
	• If you checked 32a, enter th	e loss	on both Schedule 1 (Form	1040), I	line 3, and on Schedule		<b>V</b>
	SE, line 2. (If you checked the	box or	line 1, see the line 31 instruc	tions.)	Estates and trusts, enter on		All investment is at risk.
	Form 1041, line 3.			,	<u> </u>	32b	Some investment is not at risk.
	<ul> <li>If you checked 32b, you mu</li> </ul>	st atta	.cn Form 6198. Your loss ma	ay be lii	mited. '		at 115N.

BAA

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

Part	Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory: <b>a</b> Cost <b>b</b> Lower of cost or market <b>c</b> Other (att	aab ay	nlanation)	
34	value closing inventory: <b>a</b> $\bigsqcup$ Cost <b>b</b> $\bigsqcup$ Lower of cost or market <b>c</b> $\bigsqcup$ Other (att Was there any change in determining quantities, costs, or valuations between opening and closing inventor if "Yes," attach explanation	ory?	planation)	□No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		
Part		truck		
43	When did you place your vehicle in service for business purposes? (month/day/year) 05/10/2019			
44	Of the total number of miles you drove your vehicle during 2022, enter the number of miles you used your	vehicle	e for:	
а	Business 15,500 b Commuting (see instructions) c	Other		8,500
45	Was your vehicle available for personal use during off-duty hours?		🗌 Yes	⊠ No
46	Do you (or your spouse) have another vehicle available for personal use?		X Yes	☐ No
47a	Do you have evidence to support your deduction?		🗌 Yes	⊠ No
b	If "Yes," is the evidence written?		🗌 Yes	☐ No
Part	V Other Expenses. List below business expenses not included on lines 8–26 or lines	ne 30.		
48	Total other expenses. Enter here and on line 27a	48		

#### SCHEDULE D (Form 1040)

### **Capital Gains and Losses**

OMB No. 1545-0074

Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 12 Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Name(s) shown on return Your social security number 686-70-8647 DHRUVA JULOORI 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. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I 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 Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. line 2. column (a) with 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 283. 323. 13. -27. 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 -27. 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 Form(s) 8949, Part II, (sales price) (or other basis) 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 56. 58. -2. Totals for all transactions reported on Form(s) 8949 with Box E checked . . . . . . . . . . . . . . . . . . 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 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14

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

-2.

15

Schedule D (Form 1040) 2022 Page 2

### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -29. • 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 29.) 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.

### **Sales and Other Dispositions of Capital Assets**

Department of the Treasury Internal Revenue Service

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. Attachment Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return	Social security number or taxpayer identification number
DHRUVA JULOORI	686-70-8647

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 (C) Short-term transactions			_	sis <b>wasn't</b> report	ed to the IF	RS		
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			(h) Gain or (loss) Subtract column (e)	
	(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)		and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).	
Apex	Clearing	01/01/22	12/31/22	140.	176.	W	13.	-23.	
Apex	Clearing	01/01/22	12/31/22	101.	108.			-7.	
Robir	nhood Securities LLC	01/01/22	12/31/22	42.	39.			3.	
neg Sch	als. Add the amounts in columns attive amounts). Enter each total and provided by line 10 (if Box A above by its is above by its provided by the 2 (if Box A).	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	283	373		12	-27	

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.

Form 8949 (2022) Attachment Sequence No. **12A** Page **2** 

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side DHRUVA JULOORI

Social security number or taxpayer identification number  $686-70-8647\,$ 

Before you check Box D, E, or F 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 II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.

<ul><li>✗ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on	Form(s) 1099	-B showing bas				e)
(a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> below	See the separate instructions.		(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)		and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/21	12/31/22	56.	58.			-2.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	56.	58.			-2.

**Note:** If you checked Box D 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.

# 8959 Form

Department of the Treasury Internal Revenue Service

### **Additional Medicare Tax**

If any line does not apply to you, leave it blank. See separate instructions.

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

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2022

Attachment Sequence No. 71

Name(s) shown on return

DHRUVA JULOORI

Your social security number

DHR	JVA JULOORI 686-	70-86	47
Par	Additional Medicare Tax on Medicare Wages		
1	Medicare wages and tips from Form W-2, box 5. If you have more than one		
	Form W-2, enter the total of the amounts from box 5		
2	Unreported tips from Form 4137, line 6		
3	Wages from Form 8919, line 6		
4	Add lines 1 through 3		
5	Enter the following amount for your filing status:		
	Married filing jointly \$250,000		
	Married filing separately		
	Single, Head of household, or Qualifying surviving spouse \$200,000 5 200,000.		
6	Subtract line 5 from line 4. If zero or less, enter -0	6	76,364.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to	_	
D	Part II	7	687.
Part			
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you		
•	had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) 8	-	
9	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately		
10	Single, Head of household, or Qualifying surviving spouse \$200,000 9  Enter the amount from line 4	-	
10 11	Subtract line 10 from line 9. If zero or less, enter -0	-	
12	Subtract line 11 from line 8. If zero or less, enter -0	12	
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and	12	
13	go to Part III	13	
Part		1.0	
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14		
17	(see instructions)		
15	Enter the following amount for your filing status:	-	
	Married filing jointly \$250,000		
	Married filing separately \$125,000		
	Single, Head of household, or Qualifying surviving spouse \$200,000		
16	Subtract line 15 from line 14. If zero or less, enter -0	16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009).		
	Enter here and go to Part IV	17	
Part	IV Total Additional Medicare Tax		
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR		
	or 1040-SS filers, see instructions), and go to Part V	18	687.
Part			
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form		
	W-2, enter the total of the amounts from box 6		
20	Enter the amount from line 1	_	
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax		
	withholding on Medicare wages	_	
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Additional Medicare Tax		
	withholding on Medicare wages	22	688.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box		
	14 (see instructions)	23	
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with		
	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR or 1040-SS filers, see instructions)	24	688.
			UUU -

BAA

### Form **8960**

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

Department of the Treasury Internal Revenue Service

Name(s) shown on your tax return

Attach to your tax return.

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

OMB No. 1545-2227

2022
Attachment Sequence No. 72

Your social security number or EIN

DHR	JVA JULOORI			686-	70-86	47
Part	I Investment Income ☐ Section 6013(g) election (see instructions)					
	Section 6013(h) election (see instructions)					
	Regulations section 1.1411-10(g) election (see in	nstruct	ions)			
1	Taxable interest (see instructions)				1	73.
2	Ordinary dividends (see instructions)			. [	2	32.
3	Annuities (see instructions)			. [	3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see					
	instructions)	4a	-26,1	L68.		
b	Adjustment for net income or loss derived in the ordinary course of a non-					
	section 1411 trade or business (see instructions)	4b	26,1	L68.		
С	Combine lines 4a and 4b			. [	4c	0.
5a	Net gain or loss from disposition of property (see instructions)	5a		-29.		
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b				
С	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c				
d	Combine lines 5a through 5c	$\overline{}$			5d	-29.
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)			. [	6	
7	Other modifications to investment income (see instructions)				7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7				8	76.
Part	II Investment Expenses Allocable to Investment Income and Modifi	icatio	ns			
9a	Investment interest expenses (see instructions)	9a				
b	State, local, and foreign income tax (see instructions)	9b				
С	Miscellaneous investment expenses (see instructions)	9с				
d	Add lines 9a, 9b, and 9c				9d	
10	Additional modifications (see instructions)				10	
11	Total deductions and modifications. Add lines 9d and 10				11	
Part	<u> </u>			4-7		
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, cestates and trusts, complete lines 18a–21. If zero or less, enter -0				10	7.6
	Individuals:				12	76.
13	Modified adjusted gross income (see instructions)	13	230,3	200		
14	Threshold based on filing status (see instructions)	14	200,0			
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	30,3			
16	Enter the smaller of line 12 or line 15			,,,,,,	16	76.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). <b>En</b>			lude		
	on your tax return (see instructions)				17	3.
	Estates and Trusts:	11				
18a	Net investment income (line 12 above)	18a				
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b				
С	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0	18c				
19a	Adjusted gross income (see instructions)	19a				
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b				
С	Subtract line 19b from line 19a. If zero or less, enter -0	19c				
20	Enter the smaller of line 18c or line 19c			-	20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.4 include on your tax return (see instructions)	,			21	

DHRUVA JULOORI 686-70-8647 1

### **Additional Information From 2022 Federal Tax Return**

# Schedule C (SOFTWARE SERVICES): Profit or Loss from Business Line 20b

**Itemization Statement** 

Description	Amount		
RENT(12M*\$1000P.M)	12,000.		
Total	12,000.		