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	S	ocial security	y numb	er		
SUS	HEEL SAMANTH KIRA KARNE		324-49-	9271	L		
Spouse's name Spouse's social security r							
	Susheel samanth kiran Karne						
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter year you are authorizing.)							
Enter	Enter whole dollars only on lines 1 through 5.						
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income			1	81,605.		
2	Total tax			2	10,218.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	13,350.		
4	Amount you want refunded to you			4	3,132.		
5	Amount you owe			5			
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)							

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL T	AXES	LLC	to enter or generate my PIN
				ERO firm name	

	99271								
Enter five digits, but don't enter all zeros									

my

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 s	ignature D	ate 🕨	•							
	Practitioner PIN Method Returns Only—continue	bel	ow							
Part III	Certification and Authentication – Practitioner PIN Method Only									
ERO's EFII	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	 	 6 nter a		2	7	1	

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 >			
) Must Retain This Form — See Inst it This Form to the IRS Unless Requ		
For Denominant's Deduction Act Nation and you	tov vehicle instructions		Earm 8879 (Bay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/16/24 PRO

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use Only	y−Do not w	/rite or sta	aple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, enc	ling			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	ame						Your so	cial sec	curity number
SUSHEEL	SAM	ANTH KIRA	KAR	NE						324	49	9271
-		s first name and middle initial	Last r							Spouse	's social	l security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.	Preside	ntial Ele	ection Campaigr
22466 BE	CLL (СТ										ou, or your
City, town, or p								0	jointly, want \$3 nd. Checking a			
	FARMINGTON HILLS MI 48335 box						box bel	below will not change				
Foreign country name Foreign province/state/county Foreign postal code yo					your tax	_	_					
											L Yo	ou Spouse
Filing Status		Single					Head of he	ouseh	old (HOH)			
Check only		Married filing jointly (even if only or	ne hac	l income)			□ - ··· ·			()		
one box.		Married filing separately (MFS)					, ,		ing spouse	. ,		
		you checked the MFS box, enter the alifying person is a child but not you									ild's na	me if the
	qu	anying person is a child but not you	ii uepe									
Digital		ny time during 2023, did you: (a) rece									_	
Assets	exch	hange, or otherwise dispose of a digi	tal ass	set (or a fi	nancial inter	est ir	n a digital asse	t)? (Se	e instructio	ns.)		es 🛛 No
Standard	_	neone can claim: 🗌 You as a de	•				a dependent					
Deduction		Spouse itemizes on a separate return	n or yo	ou were a	dual-status	alien	1					
Age/Blindness	S You	: 🗌 Were born before January 2, 1	959	Are b	lind Spo	ouse	: 🗌 Was bor	n befo	ore January	2, 1959		s blind
Dependents	s (see	instructions):		(2) \$	Social security	,	(3) Relationsh	ip (4) Check the b	ox if quali	ifies for ((see instructions):
If more		irst name Last name			number		to you		Child tax o	redit	Credit fo	or other dependents
than four												
dependents, see instructions												
and check	, <u> </u>											
here 🗌												
Income	1a	Total amount from Form(s) W-2, be			,						_	88,325.
Attach Form(s)	b	Household employee wages not re	•		.,					. <u>1b</u>		
W-2 here. Also attach Forms	c	Tip income not reported on line 1a			-					. 10	-	
W-2G and	d	Medicaid waiver payments not rep			, ,		-	• •		. 1d		
1099-R if tax was withheld.	e f	Taxable dependent care benefits f Employer-provided adoption bene						• •		. 1e	-	
lf you did not	f				,			• •		· 19		
get a Form	9 h	Wages from Form 8919, line 6 . Other earned income (see instructi				• •		• •		· · · · · · · · · · · · · · · · · · ·		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,				· · · · ·	.				
	z	Add lines 1a through 1h								. 1z		88,325.
Attach Sch. B	2a	Ŭ	2a			bТ	axable interest			. 2b	-	
if required.	3a		3a			bС	Drdinary divider	nds .		. 3b	,	
	4a	IRA distributions	4a			bТ	axable amount	t		. 4b		
Standard Deduction for—	5a	Pensions and annuities	5a			bΤ	axable amount	t		. 5b)	
 Single or 	6a	Social security benefits	6a			bΤ	axable amount	t		. 6b		
Married filing separately,	с	If you elect to use the lump-sum e	lectior	method,	check here	(see	instructions)		[
\$13,850 Married filing	7	Capital gain or (loss). Attach Schee	dule D	if require	d. If not requ	uired	, check here		[7		
jointly or	8	Additional income from Schedule								. 8		-6,720.
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,			our total ind	com	e			. 9		81,605.
\$27,700 • Head of	10	Adjustments to income from Sche								. 10		
household, \$20,800	11	Subtract line 10 from line 9. This is	-	-	-					. 11		81,605.
If you checked	12	Standard deduction or itemized								. 12		13,850.
any box under <i>Standard</i>	13	Qualified business income deducti	on fro	m Form 8	995 or Form	899	95-A	• •		. 13		10 050
Deduction, see instructions.	14	Add lines 12 and 13			•••••	• •	· · · ·		· · ·	. 14		13,850.
	15	Subtract line 14 from line 11. If zer	o or le	ss, enter	-U This is y	our	taxable incom	e.		. 15		67,755.

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

Form **1040** (2023)

Credits 17 Amount from Schedule 2, line 3 17 18 18 Add lines 16 and 17 18 10, 2 20 Child tax credit or credit for other dependents from Schedule 8812 19 21 Add lines 16 and 20 20 22 Subtract line 21 from line 18. If zero or less, enter -0 22 10, 2 23 Other taxes, including self-employment tax, from Schedule 2, line 21 23 24 24 Add lines 22 and 23. This is your total tax 24 10, 2 24 Add lines 22 and 23. This is your total tax 25 13, 350. 25 Federal income tax withheld from: 256 256 260 200 Subtract dax payments and amount applied from 2022 return 26 26 13, 3 26 Add lines 22, 82, 90, and 31. These are your total other payments and refundable credits 32 33 13, 3 36 Add lines 27, 82, 89, and 31. These are your total other payments and refundable credits 32 33 13, 3 37 Besignee Add lines 24, 26, and 32. These are your total payments 36 31 3, 3 38 Add lines 27, 82, 89, and 31. These are you	Form 1040 (2023	3)								Page
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33 Add lines 25d, 26, and 32. These are your total payments 33 13, 3 Refund 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 34 3, 1 Direct deposit? 5a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a 3, 1 Direct deposit? b Routing number 0 7 1 0 0 1 3 c Type: Checking Savings 36 Amount of line 34 you want applied to your 2024 estimated tax 36 Amount of line 34 you want applied to your 2024 estimated tax 36 Amount 37 Subtract line 33 from line 24. This is the amount you owe. For details on how to pay, go to www.irs.gov/Payments or see instructions 37 38 Estimated tax penalty (see instructions) 38 Stattact line 38 37 Designee Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. X No Designee's name Phone name Personal identification number (PIN) No Sign Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledg belief, they			,						. 32	
Refund 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid . 34 3,1 Jirect deposit? b Routing number 0 7 1 0 0 0 1 3 c Type: Checking Savings Jirect deposit? b Routing number 0 7 1 0 0 0 1 3 c Type: Checking Savings Jirect deposit? b Routing number 0 7 1 0 0 0 1 3 c Type: Checking Savings Jirect deposit? b Routing number 0 7 1 0 0 0 1 3 c Type: Checking Savings Jirect deposit? A account number 0 7 1 0						-				13,350.
35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a 3,1 Direct deposit? See instructions. b Routing number 0 7 1 0 0 1 3 c Type: X Checking Savings 36 Amount of line 34 you want applied to your 2024 estimated tax 36 Amount of line 34 you want applied to your 2024 estimated tax 36 Amount You Owe 37 Subtract line 33 from line 24. This is the amount you owe. For details on how to pay, go to www.irs.gov/Payments or see instructions 37 38 Estimated tax penalty (see instructions) 38 37 Designee Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. X No Designee's name Phone Personal identification number (PIN) Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledg belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any know Your signature Date Your occupation If the IRS sent you an Identif Protection PIN, enter it here (see inst.) <td>Refund</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>3,132.</td>	Refund									3,132.
Direct deposit? See instructions. b Routing number 0 7 1 0 0 0 1 3 c Type: C Tope:	neruna						•		_	3,132.
See instructions. d Account number 7 1 3 2 7 7 9 6 5 1 1 1 3 1 3 3 36 Amount of line 34 you want applied to your 2024 estimated tax	Direct deposit?		Bouting number 0 7 1 0 0	0 0 1 3				-		
36 Amount of line 34 you want applied to your 2024 estimated tax 36 Amount You Owe 37 Subtract line 33 from line 24. This is the amount you owe. For details on how to pay, go to www.irs.gov/Payments or see instructions 37 38 Estimated tax penalty (see instructions) 38 Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions 38 Designee's name Phone name Phone no. Personal identification number (PIN) Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledg belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any know Joint return? See instructions. Keep a copy for your records. Spouse's signature. If a joint return, both must sign. Date Your occupation Spouse's occupation If the IRS sent your spouse a Identity Protection PIN, enter it here (see inst.)	See instructions.								90	
Amount You Owe 37 Subtract line 33 from line 24. This is the amount you owe. For details on how to pay, go to www.irs.gov/Payments or see instructions			· · · · · · · · · · · · · · · · · · ·			d tax	36			
You Owe For details on how to pay, go to www.irs.gov/Payments or see instructions. 37 38 Estimated tax penalty (see instructions) 38 Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions 38 Designee's name Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. Sign Here Dust penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledg belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any know Your signature Joint return? Spouse's signature. If a joint return, both must sign. Date Your occupation Your signature If the IRS sent your spouse a Identity Protection PIN, enter (see inst.)	Amount		<i>i</i>	-						
38 Estimated tax penalty (see instructions) 38 Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. No Designee's name Phone name Phone no. Personal identification number (PIN) Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledg belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any know Joint return? Spouse's signature. If a joint return, both must sign. Date Your occupation If the IRS sent your spouse a Identity Protection PIN, enter (see inst.)		57				see instructions			. 37	
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Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledg belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any know Your signature Joint return? Date Your occupation If the IRS sent you an Identiti Protection PIN, enter it here (see inst.) See instructions. Keep a copy for your records. Spouse's signature. If a joint return, both must sign. Date Spouse's occupation If the IRS sent your spouse a Identity Protection PIN, enter it here (see inst.)	Decignee	De	signee's		Phone			•		
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Keep a copy for your records.		Spouse's signature. If a joint return, both must sign		sign. Date			-		If the IRS se	nt vour spouse an
		οp		Signi Date		opouoo o occupa.			Identity Prot	
Phone no. (312)607-0277 Email address SUSHEFT.KARNF9@CMATT. COM	your records.								(see inst.)	
		Ph	one no. (312)607-0277	Email a	address	SUSHEELKAR	NE9@GMAIL.	COM		
Preparer's name Preparer's signature Date PTIN Check if:	Paid	Pre	parer's name Preparer'	s signature			Date	PTIN	1	Check if:
Paid Drongerer SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/28/2024 P02082703		SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM P	RIYA RAM S	SAGAR	GUPTA TALLAM	02/28/202	1 P02	082703	Self-employed
Preparer Lice Only Firm's name GLOBAL TAXES LLC Phone no. (678)965-9	•	Fin	n's name GLOBAL TAXES LI	ıC					Phone no.	(678)965-9522
		Fin	n's address 245 ROONEY CT E	BRUNSWI	CK N	J 08816				84-3171965
	Go to www.irs.gc	ov/Forn	1040 for instructions and the latest informat	ion.		BAA	REV 02/16/24 PR)		Form 1040 (202

SCHEDULE	1
(Form 1040)	

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 3

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
SUSHEEL SAMANT	H KIRA KARNE	324-49	-9271

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. Atta	ach Schedule E .	5	-6,720.
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	_	
	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			
		8m	_	
n	Section 951(a) inclusion (see instructions)	8n	- 1	
0	Section 951A(a) inclusion (see instructions)	80	- 1	
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 Nontaxable amount of Medicaid waiver payments included on Form	8r	-	
S	1040, line 1a or 1d	8s (
	Pension or annuity from a nonqualifed deferred compensation plan or	<u>os (</u>	4	
t	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u	-	
z	Other income. List type and amount:			
2		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter	here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-6,720.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedul	le 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-ba	asis 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	Jury duty pay (see instructions)	la		
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit	lb		
с	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m	lc		
d	Reforestation amortization and expenses	ld		
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974	le		
f	Contributions to section 501(c)(18)(D) pension plans	4f		
g	Contributions by certain chaplains to section 403(b) plans 24	lg		
ĥ	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	lh 🛛		
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	4i		
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	lk		
z	Other adjustments. List type and amount:			
	24	lz		
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			
	Form 1040, 1040-SR, or 1040-NR, line 10	<u></u> .	26	
	BAA R	EV 02/16/24 PRO	Schedule 1	(Form 1040) 202

SCHEDULE E	
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

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

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

:.)	2023
	Attachment Sequence No. 13

Name(s)	chown	on	roturn	

	nent of the Treasury Revenue Service	Attac Go to <i>www.irs.go</i>	ch to Form 1040, pv/ScheduleE for					formation.		Attachn Sequen		
) shown on return									al security		
	HEEL SAMANTH								324-4	9-9271		
Part	Note: If you a	T Loss From Rental R are in the business of renting or loss from Form 4835 or	g personal proper			e C. See	instru	ctions. If you	are an indi	vidual, rep	ort farm	
Α [Did you make any p	payments in 2023 that wo	ould require you	to file	Form(s) 1	099? 5	See ins	structions .		. 🗌 Ye	es 🛛 No	
BI	f "Yes," did you or	will you file required For	m(s) 1099?							. 🗌 Ye	es 🗌 No	
1a		s of each property (stree										
Α	STRCTLLA KAN	RIMNAGAR TELANGAN	NA IN 5053	301	,							
B	395 STONEHEI		SBURG PA 17		-7009							
1b	Type of Property (from list below) 2 For each rental real estate property above, report the number of fair rent							ir Rental Days	Personal Use Days		QJV	
Α	3	personal use day						0				
B	2	if you meet the re	equirements to f	file as	a	B 152			213			
С		qualified joint ven	iture. See instru	ictions	5.	C						
Туре	of Property:	•							1			
	Single Family Resid	dence 3 Vacation/S	Short-Term Ren	tal	5 Lanc		7	Self-Rental				
2	Multi-Family Resid	lence 4 Commerci	al		6 Roya	alties	8	Other (desc	ribe)			
								Propert				
Incon	ne:					Α		B	1001		С	
3				3			23.		3,000.		•	
4		d		4		-						
Exper												
5				5								
6	Auto and travel (s	ee instructions)		6								
7	Cleaning and mai	intenance		7		1,3	25.					
8	Commissions .			8								
9	Insurance			9								
10		professional fees		10								
11	•	8		11		8	42.					
12		t paid to banks, etc. (see		12					305.			
13				13								
14	-			14			57.	,				
15				15		1,1	26.	4	2,082.			
16 17				16		1,9	02					
18		ense or depletion		18		3,5			3,135.			
19		-		19								
20	`	Add lines 5 through 19		20		9,7	21.	I	5,522.			
21	Subtract line 20 fr	rom line 3 (rents) and/or see instructions to find o	4 (royalties). If						-			
	· · · ·		•	21		-9,1	98.		2,478.			
22		real estate loss after lime instructions) .		22	(9,19	98.)	()	()	
23a		nts reported on line 3 for					23a		3,523.		,	
b	Total of all amour	nts reported on line 4 for	all royalty prop	erties			23b					
С		nts reported on line 12 fo					23c		305.			
d		nts reported on line 18 fo					23d		5,723.			
е		nts reported on line 20 fc					23e	15	5,243.			
24		sitive amounts shown on			-		• •				2,478.	
25	•	ty losses from line 21 and								(9,198.)	
26		estate and royalty inco II, and IV, and line 40 or										

26

2,478.

-6,720.

	1562		Depreciati	on and A	mortizat	ion	(OMB No. 1545-0172
Form 4562 Depreciation and Amortization (Including Information on Listed Property)					20 7 3			
Department of the Treasury Attach to your tax return.					• ·			
Intern	Internal Revenue Service Go to www.irs.gov/Form4562 for instructions and the latest information.					Sequence No. 179		
	me(s) shown on return Business or activity to which this form relates						ifying number	
_	HEEL SAMANTH			E 395 ST		LN	324	1-49-9271
Pa			ertain Property Une ed property, compl			omplete Part I.		
1	Maximum amount	(see instruction	s)			· · · · · · · · ·	1	1,160,000.
2							2	
3								2,890,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0								
5	Dollar limitation for separately, see ins					er -0 If married filing	5	
6	· · · ·	Description of proper			ness use only)		5	
			-			.,		
7	Listed property. Er	nter the amount	from line 29		7]
8	Total elected cost	of section 179 p	property. Add amoun	ts in column (c), lines 6 an	d7	8	
9	Tentative deduction	on. Enter the sm	aller of line 5 or line	8			9	
10	-		-				10	
11					,	or line 5. See instructions	11	
12	•					ne <u>11</u>	12	
13			to 2024. Add lines 9			13		
			for listed property. I			naluda liatad proparty	<u> </u>	instructions)
-	-	-		-		nclude listed property	. <u>See</u>	
14						erty) placed in service	44	
15							14 15	
							16	
Par	t III MACRS De	epreciation (D	on't include listed	property Se	e instructio	<u>ns)</u>		
				Section A				
17	MACRS deduction	s for assets pla	ced in service in tax		na before 202	23	17	
						o one or more general		
	asset accounts, ch	neck here				🗌		
	Section	B-Assets Place	ced in Service Durin	g 2023 Tax Y	ear Using th	e General Depreciation	i Syst	em
(a)	Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Conventio	on (f) Method	(g) C	epreciation deduction
19a	3-year property							
k								
C	7-year property							
c	10-year property							
6	15-year property							
	f 20-year property							
	25-year property			25 yrs.		S/L	<u> </u>	
ł	Residential rental	01/23	89,949.	27.5 yrs.	MM	S/L		3,135.
	property			27.5 yrs.	MM	S/L	<u> </u>	
	i Nonresidential rea	ıl		39 yrs.	MM	S/L	<u> </u>	
	property				MM	S/L		
		-Assets Place	d in Service During	2023 Tax Ye	ar Using the	Alternative Depreciatio	on Sys	stem
	Class life			12,000			+	
	12-year 30-year			12 yrs. 30 yrs.	MM	5/L 5/L	+	
	40-year			40 yrs.	MM	S/L	-	
Part IV Summary (See instructions.)								
21 Listed property. Enter amount from line 28							21	
	22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter					<u> </u>		
	here and on the ap	opropriate lines	of your return. Partne	erships and S	corporations	-see instructions .	22	3,135.
23			ed in service during section 263A costs			23		

For Paperwork Reduction Act Notice, see separate instructions.