

Form <b>1065</b> Department of the Treasury Internal Revenue Service	<b>U.S. Return of Partnership Income</b> For calendar year 2022, or tax year beginning _____, ending _____ Go to <b>www.irs.gov/Form1065</b> for instructions and the latest information.		OMB No. 1545-0123 <div style="font-size: 24pt; font-weight: bold;">2022</div>
<b>A</b> Principal business activity  <b>REAL ESTATE MANAGEMENT</b> <b>B</b> Principal product or service  <b>REAL ESTATE MANAGEMENT</b> <b>C</b> Business code number  <b>531310</b>	<b>Type or Print</b>	Name of partnership <b>LARVY LLC</b> Number, street, and room or suite no. If a P.O. box, see instructions. <b>24 IROQUOIS TRL</b> City or town, state or province, country, and ZIP or foreign postal code <b>Somerville, NJ 08876</b>	<b>D</b> Employer identification number <b>85-2879898</b> <b>E</b> Date business started <b>09/04/2020</b> <b>F</b> Total assets (see instructions) \$
<b>G</b> Check applicable boxes: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input type="checkbox"/> Address change (5) <input type="checkbox"/> Amended return <b>H</b> Check accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify): _____ <b>I</b> Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year: <b>2</b> <b>J</b> Check if Schedules C and M-3 are attached. <input type="checkbox"/> <b>K</b> Check if partnership: (1) <input type="checkbox"/> Aggregated activities for section 465 at-risk purposes (2) <input type="checkbox"/> Grouped activities for section 469 passive activity purposes <b>Caution:</b> Include <b>only</b> trade or business income and expenses on lines 1a through 22 below. See instructions for more information.			
<b>Income</b>	<b>1a</b> Gross receipts or sales <b>1b</b> Returns and allowances <b>1c</b> Balance. Subtract line 1b from line 1a <b>2</b> Cost of goods sold (attach Form 1125-A) <b>3</b> Gross profit. Subtract line 2 from line 1c <b>4</b> Ordinary income (loss) from other partnerships, estates, and trusts (attach statement) <b>5</b> Net farm profit (loss) (attach Schedule F (Form 1040)) <b>6</b> Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797) <b>7</b> Other income (loss) (attach statement) <b>8 Total income (loss).</b> Combine lines 3 through 7		<b>0.</b>
<b>Deductions</b> <small>(see instructions for limitations)</small>	<b>9</b> Salaries and wages (other than to partners) (less employment credits) <b>10</b> Guaranteed payments to partners <b>11</b> Repairs and maintenance <b>12</b> Bad debts <b>13</b> Rent <b>14</b> Taxes and licenses <b>15</b> Interest (see instructions) <b>16a</b> Depreciation (if required, attach Form 4562) <b>16b</b> Less depreciation reported on Form 1125-A and elsewhere on return. <b>17</b> Depletion ( <b>Do not deduct oil and gas depletion.</b> ) <b>18</b> Retirement plans, etc. <b>19</b> Employee benefit programs <b>20</b> Other deductions (attach statement) <b>21 Total deductions.</b> Add the amounts shown in the far right column for lines 9 through 20		<b>6,398.</b> <b>6,398.</b>
<b>22 Ordinary business income (loss).</b> Subtract line 21 from line 8.		<b>-6,398.</b>	
<b>Tax and Payment</b>	<b>23</b> Interest due under the look-back method—completed long-term contracts (attach Form 8697) <b>24</b> Interest due under the look-back method—income forecast method (attach Form 8866) <b>25</b> BBA AAR imputed underpayment (see instructions) <b>26</b> Other taxes (see instructions) <b>27 Total balance due.</b> Add lines 23 through 26. <b>28</b> Payment (see instructions) <b>29 Amount owed.</b> If line 28 is smaller than line 27, enter amount owed <b>30 Overpayment.</b> If line 28 is larger than line 27, enter overpayment		<b>29</b> <b>30</b>
<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.  <div style="display: flex; justify-content: space-between;"> <div>           Signature of partner or limited liability company member  <b>GANGAMANI N VANGA</b> </div> <div>           Date  <b>03/09/2023</b> </div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">         May the IRS discuss this return with the preparer shown below?          See inst. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No       </div>		
<b>Paid Preparer Use Only</b>	<div style="display: flex; justify-content: space-between;"> <div>           Print/Type preparer's name  <b>GANGAMANI N VANGA</b>            Firm's name  <b>FRIENDLY TAX SRV</b>            Firm's address  <b>40 REINHART WAY</b>  <b>BRIDGEWATER, NJ 08807</b> </div> <div>           Preparer's signature  <b>GANGAMANI N VANGA</b>            Firm's EIN  <b>46-1759656</b>            Phone no.  <b>(908) 450-9923</b> </div> <div>           Date  <b>03/09/2023</b>            Check <input type="checkbox"/> if self-employed            PTIN  <b>P01041333</b> </div> </div>		

**Schedule B Other Information**

<b>1</b> What type of entity is filing this return? Check the applicable box:				<b>Yes</b>	<b>No</b>
<b>a</b> <input checked="" type="checkbox"/> Domestic general partnership	<b>b</b> <input type="checkbox"/> Domestic limited partnership				
<b>c</b> <input type="checkbox"/> Domestic limited liability company	<b>d</b> <input type="checkbox"/> Domestic limited liability partnership				
<b>e</b> <input type="checkbox"/> Foreign partnership	<b>f</b> <input type="checkbox"/> Other:				
<b>2</b> At the end of the tax year:					
<b>a</b> Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership . . . . .					<b>X</b>
<b>b</b> Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership . . . . .				<b>X</b>	
<b>3</b> At the end of the tax year, did the partnership:					
<b>a</b> Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below . . . . .					<b>X</b>
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock		
<b>b</b> Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below . . . . .					<b>X</b>
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital	
<b>4</b> Does the partnership satisfy <b>all four</b> of the following conditions?				<b>Yes</b>	<b>No</b>
<b>a</b> The partnership's total receipts for the tax year were less than \$250,000.					
<b>b</b> The partnership's total assets at the end of the tax year were less than \$1 million.					
<b>c</b> Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.					
<b>d</b> The partnership is not filing and is not required to file Schedule M-3. . . . . If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.				<b>X</b>	
<b>5</b> Is this partnership a publicly traded partnership, as defined in section 469(k)(2)? . . . . .					<b>X</b>
<b>6</b> During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? . . . . .					<b>X</b>
<b>7</b> Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction? . . . . .					<b>X</b>
<b>8</b> At any time during calendar year 2022, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country . . . . .					<b>X</b>
<b>9</b> At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions . . . . .					<b>X</b>
<b>10a</b> Is the partnership making, or had it previously made (and not revoked), a section 754 election? . . . . . See instructions for details regarding a section 754 election.					<b>X</b>
<b>b</b> Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions . . . . .					<b>X</b>
<b>c</b> Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions . . . . .					<b>X</b>

**Schedule B Other Information** (continued)

	Yes	No
<b>11</b> Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
<b>12</b> At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		<b>X</b>
<b>13</b> If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions		
<b>14</b> Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership		<b>X</b>
<b>15</b> Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return		
<b>16a</b> Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions		<b>X</b>
<b>b</b> If "Yes," did you or will you file required Form(s) 1099?		
<b>17</b> Enter the number of Forms 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations, attached to this return		
<b>18</b> Enter the number of partners that are foreign governments under section 892		
<b>19</b> During the partnership's tax year, did the partnership make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		<b>X</b>
<b>20</b> Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938		<b>X</b>
<b>21</b> Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		<b>X</b>
<b>22</b> During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions If "Yes," enter the total amount of the disallowed deductions \$		<b>X</b>
<b>23</b> Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions	<b>X</b>	
<b>24</b> Does the partnership satisfy one or more of the following? See instructions <b>a</b> The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense. <b>b</b> The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$27 million and the partnership has business interest expense. <b>c</b> The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		<b>X</b>
<b>25</b> Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 15 \$		<b>X</b>
<b>26</b> Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership Complete Schedule K-3 (Form 1065), Part XIII, for each foreign partner subject to section 864(c)(8) on a transfer or distribution.		
<b>27</b> At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		<b>X</b>
<b>28</b> Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions. Percentage: By vote: <b>0.000</b> By value: <b>0.000</b>		<b>X</b>
<b>29</b> Reserved for future use		
<b>30</b> Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions. If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3 If "No," complete Designation of Partnership Representative below.		<b>X</b>

**Designation of Partnership Representative** (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR	<b>DHIRENDRA S KASHIWALE</b>	
U.S. address of PR	<b>24 IROGUOIS TRL</b> <b>SOMERVILLE, NJ 08876</b>	U.S. phone number of PR <b>(908) 456-4792</b>
If the PR is an entity, name of the designated individual for the PR		
U.S. address of designated individual		U.S. phone number of designated individual

**Schedule K Partners' Distributive Share Items**

		Total amount
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22) . . . . .	1 -6,398.
	2 Net rental real estate income (loss) (attach Form 8825) . . . . .	2
	3a Other gross rental income (loss) . . . . . 3a	
	b Expenses from other rental activities (attach statement) . . . . . 3b	
	c Other net rental income (loss). Subtract line 3b from line 3a . . . . . 3c	
	4 Guaranteed payments: a Services 4a b Capital 4b	
	c Total. Add lines 4a and 4b . . . . . 4c	
	5 Interest income . . . . . 5	
	6 Dividends and dividend equivalents: a Ordinary dividends . . . . . 6a	
	b Qualified dividends 6b c Dividend equivalents 6c	
	7 Royalties . . . . . 7	
8 Net short-term capital gain (loss) (attach Schedule D (Form 1065)) . . . . . 8		
9a Net long-term capital gain (loss) (attach Schedule D (Form 1065)) . . . . . 9a		
b Collectibles (28%) gain (loss) . . . . . 9b		
c Unrecaptured section 1250 gain (attach statement) . . . . . 9c		
10 Net section 1231 gain (loss) (attach Form 4797) . . . . . 10		
11 Other income (loss) (see instructions) Type: . . . . . 11		
Deductions	12 Section 179 deduction (attach Form 4562) . . . . . 12	
	13a Contributions . . . . . 13a	
	b Investment interest expense . . . . . 13b	
	c Section 59(e)(2) expenditures: (1) Type: (2) Amount: 13c(2)	
d Other deductions (see instructions) Type: . . . . . 13d		
Self-Employment	14a Net earnings (loss) from self-employment . . . . . 14a -6,398.	
	b Gross farming or fishing income . . . . . 14b	
	c Gross nonfarm income . . . . . 14c	
Credits	15a Low-income housing credit (section 42(j)(5)) . . . . . 15a	
	b Low-income housing credit (other) . . . . . 15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) . . . . . 15c	
	d Other rental real estate credits (see instructions) Type: . . . . . 15d	
	e Other rental credits (see instructions) Type: . . . . . 15e	
	f Other credits (see instructions) Type: . . . . . 15f	
International	16 Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items-International, and check this box to indicate that you are reporting items of international tax relevance. <input type="checkbox"/>	
Alternative Minimum Tax (AMT) Items	17a Post-1986 depreciation adjustment . . . . . 17a	
	b Adjusted gain or loss . . . . . 17b	
	c Depletion (other than oil and gas) . . . . . 17c	
	d Oil, gas, and geothermal properties — gross income . . . . . 17d	
	e Oil, gas, and geothermal properties — deductions . . . . . 17e	
	f Other AMT items (attach statement) . . . . . 17f	
Other Information	18a Tax-exempt interest income . . . . . 18a	
	b Other tax-exempt income . . . . . 18b	
	c Nondeductible expenses . . . . . 18c	
	19a Distributions of cash and marketable securities . . . . . 19a	
	b Distributions of other property . . . . . 19b	
	20a Investment income . . . . . 20a	
	b Investment expenses . . . . . 20b	
	c Other items and amounts (attach statement) . . . . .	
21 Total foreign taxes paid or accrued . . . . . 21		

**Analysis of Net Income (Loss) per Return**

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 21					1	<b>-6,398.</b>
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other
a General partners		<b>-6,398.</b>				
b Limited partners						

**Schedule L Balance Sheets per Books**

	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash				
2a Trade notes and accounts receivable				
b Less allowance for bad debts				
3 Inventories				
4 U.S. Government obligations				
5 Tax-exempt securities				
6 Other current assets (attach statement)				
7a Loans to partners (or persons related to partners)				
b Mortgage and real estate loans				
8 Other investments (attach statement)				
9a Buildings and other depreciable assets				
b Less accumulated depreciation				
10a Depletable assets				
b Less accumulated depletion				
11 Land (net of any amortization)				
12a Intangible assets (amortizable only)				
b Less accumulated amortization				
13 Other assets (attach statement)				
14 Total assets				
<b>Liabilities and Capital</b>				
15 Accounts payable				
16 Mortgages, notes, bonds payable in less than 1 year				
17 Other current liabilities (attach statement)				
18 All nonrecourse loans				
19a Loans from partners (or persons related to partners)				
b Mortgages, notes, bonds payable in 1 year or more				
20 Other liabilities (attach statement)				
21 Partners' capital accounts				
22 Total liabilities and capital				

**Schedule M-1 Reconciliation of Income (Loss) per Books With Analysis of Net Income (Loss) per Return****Note:** The partnership may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books		6 Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a Tax-exempt interest \$	
3 Guaranteed payments (other than health insurance)		7 Deductions included on Schedule K, lines 1 through 13d, and 21, not charged against book income this year (itemize):	
4 Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 21 (itemize):		a Depreciation \$	
a Depreciation \$		8 Add lines 6 and 7	
b Travel and entertainment \$		9 Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	
5 Add lines 1 through 4			

**Schedule M-2 Analysis of Partners' Capital Accounts**

1 Balance at beginning of year		6 Distributions: a Cash	
2 Capital contributed: a Cash		b Property	
b Property		7 Other decreases (itemize):	
3 Net income (loss) (see instructions)		8 Add lines 6 and 7	
4 Other increases (itemize):		9 Balance at end of year. Subtract line 8 from line 5	
5 Add lines 1 through 4			

**SCHEDULE B-1  
(Form 1065)**(Rev. August 2019)  
Department of the Treasury  
Internal Revenue Service**Information on Partners Owning 50% or  
More of the Partnership**

Attach to Form 1065.

Go to [www.irs.gov/Form1065](http://www.irs.gov/Form1065) for the latest information.

OMB No. 1545-0123

Name of partnership

**LARVY LLC**

Employer identification number (EIN)

**85-2879898****Part I** **Entities Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2a (Question 3a for 2009 through 2017))

Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, tax-exempt organization, or any foreign government that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital

**Part II** **Individuals or Estates Owning 50% or More of the Partnership** (Form 1065, Schedule B, Question 2b (Question 3b for 2009 through 2017))

Complete columns (i) through (iv) below for any individual or estate that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital
<b>DHIRENDRA S. KASHIWALE</b>	<b>225-87-1371</b>	<b>United States</b>	<b>50.00</b>
<b>VIJAY LAXMI SINGH</b>	<b>579-37-4923</b>	<b>United States</b>	<b>50.00</b>

For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

Schedule B-1 (Form 1065) (Rev. 8-2019)

UYA

Schedule K-1  
(Form 1065)Department of the Treasury  
Internal Revenue Service

2022

For calendar year 2022, or tax year

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

beginning \_\_\_\_\_ ending \_\_\_\_\_  
**Partner's Share of Income, Deductions, Credits, etc.**  
See separate instructions.**Part I Information About the Partnership**

**A** Partnership's employer identification number  
**85-2879898**

**B** Partnership's name, address, city, state, and ZIP code  
**LARVY LLC**  
**24 IROQUOIS TRL**  
**Somerville, NJ 08876**

**C** IRS center where partnership filed return: **KANSAS CITY, MO 64999**

**D** ☐ Check if this is a publicly traded partnership (PTP)

**Part II Information About the Partner**

**E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)  
**225-87-1371**

**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.  
**DHIRENDRA S. KASHIWALE**  
**24 IROQUOIS TRL**  
**BRANCHBURG, NJ 08876**

**G** ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member

**H1** ☒ Domestic partner ☐ Foreign partner

**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:  
TIN \_\_\_\_\_ Name \_\_\_\_\_

**I1** What type of entity is this partner? **INDIVIDUAL**

**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐

**J** Partner's share of profit, loss, and capital (see instructions):

	Beginning		Ending	
Profit	50.0000	%	50.0000	%
Loss	50.0000	%	50.0000	%
Capital	50.0000	%	50.0000	%

Check if decrease is due to sale or exchange of partnership interest ☐

**K** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse . . . . .	\$	\$
Qualified nonrecourse financing . . . . .	\$	\$
Recourse . . . . .	\$	\$

Check this box if item K includes liability amounts from lower-tier partnerships ☐

**L Partner's Capital Account Analysis**

Beginning capital account . . . . . \$

Capital contributed during the year . . . . . \$

Current year net income (loss) . . . . . \$

Other increase (decrease) (attach explanation) . . . . . \$

Withdrawals and distributions . . . . . \$ ( )

Ending capital account . . . . . \$

**M** Did the partner contribute property with a built-in gain (loss)?  
☐ Yes ☒ No If "Yes," attach statement. See instructions.

**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning . . . . . \$

Ending . . . . . \$

**Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items**

<b>1</b>	Ordinary business income (loss)	<b>14</b>	Self-employment earnings (loss)
<b>*</b>	<b>-3,199.</b>	<b>A</b>	<b>-3,199.</b>
<b>2</b>	Net rental real estate income (loss)		
<b>3</b>	Other net rental income (loss)	<b>15</b>	Credits
<b>4a</b>	Guaranteed payments for services		
<b>4b</b>	Guaranteed payments for capital	<b>16</b>	Schedule K-3 is attached if checked <input type="checkbox"/>
<b>4c</b>	Total guaranteed payments	<b>17</b>	Alternative minimum tax (AMT) items
<b>5</b>	Interest income		
<b>6a</b>	Ordinary dividends		
<b>6b</b>	Qualified dividends	<b>18</b>	Tax-exempt income and nondeductible expenses
<b>6c</b>	Dividend equivalents		
<b>7</b>	Royalties		
<b>8</b>	Net short-term capital gain (loss)	<b>19</b>	Distributions
<b>9a</b>	Net long-term capital gain (loss)		
<b>9b</b>	Collectibles (28%) gain (loss)	<b>20</b>	Other information
<b>9c</b>	Unrecaptured section 1250 gain	<b>Z*</b>	<b>STMT</b>
<b>10</b>	Net section 1231 gain (loss)		
<b>11</b>	Other income (loss)		
<b>12</b>	Section 179 deduction	<b>21</b>	Foreign taxes paid or accrued
<b>13</b>	Other deductions		
<b>22</b>	<input type="checkbox"/> More than one activity for at-risk purposes*		
<b>23</b>	<input type="checkbox"/> More than one activity for passive activity purposes*		

\*See attached statement for additional information.

For IRS Use Only

## Statement A - QBI Pass-through Entity Reporting

Partnership's name: <b>LARVY LLC</b>		Partnership's EIN: <b>85-2879898</b>
Partner's name: <b>DHIRENDRA S. KASHIWALE</b>	Partner's identifying number: <b>225-87-1371</b>	
		<b>Trade or Business</b>
		EIN: <b>85-2879898</b>
		<input type="checkbox"/> PTP
		<input type="checkbox"/> Aggregated
		<input type="checkbox"/> SSTB
Partner's share of:		
QBI or qualified PTP items subject to partner-specific determinations:		
	Ordinary business income (loss) . . . . .	<b>-3,199.</b>
	Rental income (loss) . . . . .	
	Royalty income (loss) . . . . .	
	Section 1231 gain (loss) . . . . .	
	Other income (loss) . . . . .	
	Section 179 deduction . . . . .	
	Other deductions . . . . .	
W-2 wages . . . . .		
UBIA of qualified property . . . . .		
Section 199A dividends . . . . .		

## Statement C - QBI Pass-through Entity Reporting - Patrons of Specified Agricultural and Horticultural Cooperatives

Partnership's name:		Partnership's EIN:
Partner's name:	Partner's identifying number:	
		<b>Cooperative</b>
		EIN:
		<input type="checkbox"/> PTP
		<input type="checkbox"/> Aggregated
		<input type="checkbox"/> SSTB
Partner's share of:		
QBI items allocable to qualified payments subject to partner-specific determinations:		
	Ordinary business income (loss) . . . . .	
	Rental income (loss) . . . . .	
	Royalty income (loss) . . . . .	
	Section 1231 gain (loss) . . . . .	
	Other income (loss) . . . . .	
	Section 179 deduction . . . . .	
	Other deductions . . . . .	
W-2 wages allocable to qualified payments . . . . .		
Section 199A(g) deduction . . . . .		



## **Schedule K-1 - Supplemental Information**

Supporting Statement for Schedule K-1

**Partnership:** LARVY LLC

**EIN:** 85-2879898

**Partner:** DHIRENDRA S. KASHIWALE **ID Number:** 225-87-1371

<b><u>Description</u></b>	<b><u>Amount</u></b>
Nonpassive ordinary income included in line 1	\$-3,199.

Schedule K-1  
(Form 1065)Department of the Treasury  
Internal Revenue Service

2022

For calendar year 2022, or tax year

☐ Final K-1☐ Amended K-1

OMB No. 1545-0123

beginning \_\_\_\_\_ ending \_\_\_\_\_  
**Partner's Share of Income, Deductions, Credits, etc.**  
See separate instructions.**Part I Information About the Partnership**

**A** Partnership's employer identification number  
**85-2879898**

**B** Partnership's name, address, city, state, and ZIP code  
**LARVY LLC**  
**24 IROQUOIS TRL**  
**Somerville, NJ 08876**

**C** IRS center where partnership filed return: **KANSAS CITY, MO 64999**

**D** ☐ Check if this is a publicly traded partnership (PTP)

**Part II Information About the Partner**

**E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)  
**579-37-4923**

**F** Name, address, city, state, and ZIP code for partner entered in E. See instructions.  
**VIJAY LAXMI SINGH**  
**24 IROQUOIS TRL**  
**BRANCHBURG, NJ 08876**

**G** ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member

**H1** ☒ Domestic partner ☐ Foreign partner

**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:  
TIN \_\_\_\_\_ Name \_\_\_\_\_

**I1** What type of entity is this partner? **INDIVIDUAL**

**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐

**J** Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	50.0000 %	50.0000 %
Loss	50.0000 %	50.0000 %
Capital	50.0000 %	50.0000 %

Check if decrease is due to sale or exchange of partnership interest ☐

**K** Partner's share of liabilities: **Beginning** **Ending**

Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$	\$

Check this box if item K includes liability amounts from lower-tier partnerships ☐

**L** **Partner's Capital Account Analysis**

Beginning capital account	\$
Capital contributed during the year	\$
Current year net income (loss)	\$
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$ ( )
Ending capital account	\$

**M** Did the partner contribute property with a built-in gain (loss)?  
☐ Yes ☒ No If "Yes," attach statement. See instructions.

**N** **Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$
Ending	\$

**Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items**

<b>1</b> *	Ordinary business income (loss)	<b>14</b>	Self-employment earnings (loss)
	<b>- 3,199.</b>	<b>A</b>	<b>- 3,199.</b>
<b>2</b>	Net rental real estate income (loss)		
<b>3</b>	Other net rental income (loss)	<b>15</b>	Credits
<b>4a</b>	Guaranteed payments for services		
<b>4b</b>	Guaranteed payments for capital	<b>16</b>	Schedule K-3 is attached if checked <input type="checkbox"/>
<b>4c</b>	Total guaranteed payments	<b>17</b>	Alternative minimum tax (AMT) items
<b>5</b>	Interest income		
<b>6a</b>	Ordinary dividends		
<b>6b</b>	Qualified dividends	<b>18</b>	Tax-exempt income and nondeductible expenses
<b>6c</b>	Dividend equivalents		
<b>7</b>	Royalties		
<b>8</b>	Net short-term capital gain (loss)	<b>19</b>	Distributions
<b>9a</b>	Net long-term capital gain (loss)		
<b>9b</b>	Collectibles (28%) gain (loss)	<b>20</b>	Other information
<b>9c</b>	Unrecaptured section 1250 gain	<b>Z *</b>	<b>STMT</b>
<b>10</b>	Net section 1231 gain (loss)		
<b>11</b>	Other income (loss)		
<b>12</b>	Section 179 deduction	<b>21</b>	Foreign taxes paid or accrued
<b>13</b>	Other deductions		
<b>22</b>	<input type="checkbox"/> More than one activity for at-risk purposes*		
<b>23</b>	<input type="checkbox"/> More than one activity for passive activity purposes*		

\*See attached statement for additional information.

For IRS Use Only

## Statement A - QBI Pass-through Entity Reporting

Partnership's name: <b>LARVY LLC</b>		Partnership's EIN: <b>85-2879898</b>
Partner's name: <b>VIJAY LAXMI SINGH</b>	Partner's identifying number: <b>579-37-4923</b>	
Partner's share of:		<b>Trade or Business</b>
		EIN: <b>85-2879898</b>
		<input type="checkbox"/> PTP
		<input type="checkbox"/> Aggregated
<input type="checkbox"/> SSTB		
<b>QBI or qualified PTP items subject to partner-specific determinations:</b>		
	Ordinary business income (loss) . . . . .	<b>-3,199.</b>
	Rental income (loss) . . . . .	
	Royalty income (loss) . . . . .	
	Section 1231 gain (loss) . . . . .	
	Other income (loss) . . . . .	
	Section 179 deduction . . . . .	
	Other deductions . . . . .	
W-2 wages . . . . .		
UBIA of qualified property . . . . .		
Section 199A dividends . . . . .		

## Statement C - QBI Pass-through Entity Reporting - Patrons of Specified Agricultural and Horticultural Cooperatives

Partnership's name:		Partnership's EIN:
Partner's name:	Partner's identifying number:	
Partner's share of:		<b>Cooperative</b>
		EIN:
		<input type="checkbox"/> PTP
		<input type="checkbox"/> Aggregated
<input type="checkbox"/> SSTB		
<b>QBI items allocable to qualified payments subject to partner-specific determinations:</b>		
	Ordinary business income (loss) . . . . .	
	Rental income (loss) . . . . .	
	Royalty income (loss) . . . . .	
	Section 1231 gain (loss) . . . . .	
	Other income (loss) . . . . .	
	Section 179 deduction . . . . .	
	Other deductions . . . . .	
W-2 wages allocable to qualified payments . . . . .		
Section 199A(g) deduction . . . . .		

## **Schedule K-1 - Supplemental Information**

Supporting Statement for Schedule K-1

**Partnership:** LARVY LLC

**EIN:** 85-2879898

**Partner:** VIJAY LAXMI SINGH **ID Number:** 579-37-4923

<b><u>Description</u></b>	<b><u>Amount</u></b>
Nonpassive ordinary income included in line 1	\$-3,199.

Depreciation and Amortization  
(Including Information on Listed Property)

Attach to your tax return.

Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

2022

Attachment  
Sequence No. 179

Name(s) shown on return

LARVY LLC

Business or activity to which this form relates

REAL ESTATE MANAGEMENT

Identifying number

85-2879898

**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0.
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	0.
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29.	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7.	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8.	9	
10	Carryover of disallowed deduction from line 13 of your 2021 Form 4562.	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11.	12	
13	Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12.	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Don't include listed property. See instructions.)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2022	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here.		

**Section B—Assets Placed in Service During 2022 Tax Year Using the General Depreciation System**

(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) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

**Section C—Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 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 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	0.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**Part V Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

**24a** Do you have evidence to support the business/investment use claimed? ☒ **Yes** ☐ **No** **24b** If "Yes," is the evidence written? ☒ **Yes** ☐ **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
<b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions . . . . .							<b>25</b>	
<b>26</b> Property used more than 50% in a qualified business use:								
car	01/01/22	100.0%			5	200 DHY		
		%						
		%						
<b>27</b> Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 . . . . .							<b>28</b>	
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1 . . . . .								<b>29</b>

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
<b>30</b> Total business/investment miles driven during the year ( <b>don't</b> include commuting miles) . . . . .	car 1500					
<b>31</b> Total commuting miles driven during the year . . . . .						
<b>32</b> Total other personal (noncommuting) miles driven . . . . .						
<b>33</b> Total miles driven during the year. Add lines 30 through 32 . . . . .	1500					
<b>34</b> Was the vehicle available for personal use during off-duty hours? . . . . .	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
	X					
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person? . . . . .	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
	X					
<b>36</b> Is another vehicle available for personal use? . . . . .	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
	X					

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **aren't** more than 5% owners or related persons. See instructions.

	Yes	No
<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? . . . . .		
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . . .		
<b>39</b> Do you treat all use of vehicles by employees as personal use? . . . . .		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? . . . . .		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? See instructions . . . . .		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
<b>42</b> Amortization of costs that begins during your 2022 tax year (see instructions):					
<b>43</b> Amortization of costs that began before your 2022 tax year . . . . .				<b>43</b>	
<b>44</b> <b>Total.</b> Add amounts in column (f). See the instructions for where to report . . . . .				<b>44</b>	

## 2022 Other Deductions - Supporting Details for Form 1065, Line 20

Name(s) shown on return

LARVY LLC

Employer identifying number

85-2879898

1.	Supplies	1	223.
2.	Telephone	2	1,446.
3.	Deductible non-entertainment meals expense subject to limits	3	442.
4.	Travel and non-entertainment meals expense not subject to limits	4	3,679.
5.	Vehicle expense	5	608.
6.		6	
7.		7	
8.		8	
9.		9	
10.		10	
11.		11	
12.		12	
13.		13	
14.		14	
15.		15	
16.		16	
17.		17	
18.		18	
19.		19	
20.		20	
21.		21	
22.		22	
23.		23	
24.		24	
25.		25	
26.		26	
27.		27	
28.		28	
29.		29	
30.		30	
31.		31	
32.		32	
33.		33	
34.		34	
35.		35	
36.		36	
37.		37	
38.		38	
39.		39	
40.		40	
41.		41	
42.		42	
43.		43	
44.		44	
45.		45	
46.		46	
47.		47	
48.		48	
49.		49	
50.		50	
51.		51	
52.		52	
53.		53	
Total Other Deductions			6,398.

## Statement A - QBI Pass-through Entity Reporting

Partnership's name: <b>LARVY LLC</b>		Partnership's EIN: <b>85-2879898</b>
Partner's name:	Partner's identifying number:	
Partner's share of:		<b>Trade or Business</b>
		EIN: <b>85-2879898</b>
		<input type="checkbox"/> PTP
		<input type="checkbox"/> Aggregated
<input type="checkbox"/> SSTB		
<b>QBI or qualified PTP items subject to partner-specific determinations:</b>		
	Ordinary business income (loss) . . . . .	<b>-6,398.</b>
	Rental income (loss) . . . . .	
	Royalty income (loss) . . . . .	
	Section 1231 gain (loss) . . . . .	
	Other income (loss) . . . . .	
	Section 179 deduction . . . . .	
	Other deductions . . . . .	
W-2 wages . . . . .		
UBIA of qualified property . . . . .		
Section 199A dividends . . . . .		

## Statement C - QBI Pass-through Entity Reporting - Patrons of Specified Agricultural and Horticultural Cooperatives

Partnership's name:		Partnership's EIN:
Partner's name:	Partner's identifying number:	
Partner's share of:		<b>Cooperative</b>
		EIN:
		<input type="checkbox"/> PTP
		<input type="checkbox"/> Aggregated
<input type="checkbox"/> SSTB		
<b>QBI items allocable to qualified payments subject to partner-specific determinations:</b>		
	Ordinary business income (loss) . . . . .	
	Rental income (loss) . . . . .	
	Royalty income (loss) . . . . .	
	Section 1231 gain (loss) . . . . .	
	Other income (loss) . . . . .	
	Section 179 deduction . . . . .	
	Other deductions . . . . .	
W-2 wages allocable to qualified payments . . . . .		
Section 199A(g) deduction . . . . .		



Details for Other Deductions Worksheet

LARVY LLC

85-2879898

Date	Description	Amount
	software purchase	223.00
Total		223.00

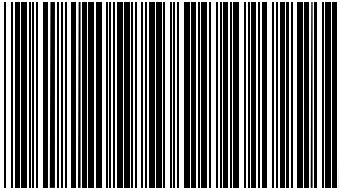
Details for Other Deductions Worksheet

LARVY LLC

85-2879898

Date	Description	Amount
	air travel	1,341.00
	car gas	345.00
	car registration	72.00
	train ticket	105.00
	parking	16.00
	car repair	1,800.00
Total		3,679.00

NJ-1065  
2022  
Page 1



043MP01220

STATE OF NEW JERSEY INCOME TAX - PARTNERSHIP RETURN

For Privacy Act Notification, See Instructions  
For Calendar Year 2022, or Tax Year  
Beginning \_\_\_\_\_ and Ending \_\_\_\_\_

LARVY LLC

24 IROQUOIS TRL

SOMERVILLE NJ 08876

852879898 REAL ESTATE MANAGEMENT 09042020

1064 12 P01041333 461759656

2 # of Resident Partners  
0 # of Nonresident Partners with Physical Nexus to NJ  
0 # of Nonresident Partners without Physical Nexus to NJ

Do Not File  
Client Copy



Under the penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than general partner) is based on all information of which preparer has any knowledge.

> \_\_\_\_\_  
Signature of General Partner or Limited Liability Company Member

> \_\_\_\_\_  
Date

Paid Preparer's Signature

Date

Check if Self-Employed

Firm's Name (or yours if self-employed)

Preparer's SS # or PTIN

FRIENDLY TAX SRV

P01041333

Preparer's Address

Preparer's Federal EIN #

40 REINHART WAY BRIDGEWATER, NJ 08807

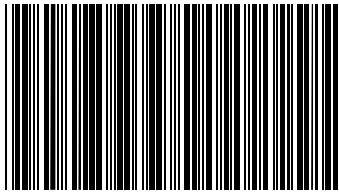
461759656

Pay the amount on Line 6 of the Filing Fee Worksheet in full. Write your Federal EIN and the tax year on the check or money order and make payable to: STATE OF NEW JERSEY - PART

DO NOT staple or otherwise attach your payment to return NJ-1065.

Mail your completed Form NJ-1065 to: NJ Division of Taxation - Revenue Processing Center, PO Box 194, Trenton, NJ 08646-0194.

Mail your payment and completed NJ-1065-V payment voucher to: Filing Fee on Partnerships, PO Box 642, Trenton, NJ 08646-0642



043MP02220

NJ-1065 (2022)

PAGE 2

LARVY LLC

852879898

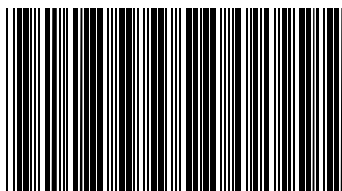
1064

Check applicable boxes

Initial Return	Investment Club
Final Return	Composite Return is filed for Nonresident Partner
Amended Return	Controlling Interest Transfer Tax
Application for Federal Extension is attached	Tiered Partnership
Substitute Method of Allocation Granted	X General Partnership
Complete Liquidation	Limited Partnership
Qualified Investment Partnership	Limited Liability Company
Listed on U.S. National Stock Exchange	Limited Liability Partnership
Hedge Fund	

### Partnership Income

	Column A Amount from All Sources	Column B Amount from NJ Sources
1. Ordinary Income (loss) from trade or business activities (See instructions)	1. -6398 .	
2. Net income (loss) from rental real estate activities	2. 0 .	
3. Net income (loss) from other rental activities	3. 0 .	
4. Guaranteed payments to partners	4. 0 .	
5. Interest income	5. 0 .	
6. Dividend income	6. 0 .	
7. Royalty income	7. 0 .	
8. Net gain (loss) from disposition of property	8. 0 .	
9. Net IRC section 1231 gain (loss)	9. 0 .	
10. Other income (loss)	10. 0 .	
11. Tax-exempt interest income	11. 0 .	
12. Subtotal (Add lines 1 through 11)	12. -6398 .	
13a. Taxes based on income	13a. 0 .	
13b. Other additions - specify: _____	13b. 0 .	
13c. Total additions (Add lines 13a and 13b)	13c. 0 .	
14. Subtotal (Add lines 12 and 13c)	14. -6398 .	
15a. Net income (loss) from rental real estate activities	15a. 0 .	
15b. Net gain (loss) from disposition of real property	15b. 0 .	
15c. Guaranteed payments to partners	15c. 0 .	
15d. Interest income from federal obligations	15d. 0 .	
15e. Interest income from NJ obligations	15e. 0 .	
15f. IRC Section 179 expense	15f. 0 .	
15g. Other Subtractions - specify: _____	15g. 0 .	
15h. Total Subtractions (Add lines 15a through 15g)	15h. 0 .	
16a. Subtotal (Subtract line 15h from line 14)	16a. -6398 .	
16b. NJ Allocation (Line 16a times business allocation % of 1000000 %)	16b. -6398 .	-6398 .
17. Net income (loss) from rental real estate activities (see instruction page 8)	17. 0 .	0 .
18. Net gain (loss) from disposition of real property	18. 0 .	0 .
19. Net partnership income (loss) (Total lines 16a, 17 and 18 of column A) (Total lines 16b, 17 and 18 of column B)	19. -6398 .	-6398 .
20. Income (loss) from tiered partnership	20. 0 .	0 .
21. Partnership income (loss) (total Lines 19 and 20)	21. -6398 .	-6398 .
22a. Guaranteed payments to partners	22a. 0 .	
22b. Guaranteed payments to partners - pension	22b. 0 .	
22c. Net guaranteed payment to partners (subtract Line 22b from Line 22a)	22c. 0 .	0 .
23. Net gain (loss) from disposition of assets as a result of complete liquidation	23. 0 .	0 .
24. Total Nonresident Non-corporate Partners Share of Tax (Line 2c, col. J of Dir.)	24. 0 .	0 .
25. Total Nonresident Corporate Partners Share of Tax (Line 2c, col. K of Directory)	25. 0 .	0 .



LARVY LLC

852879898

1064

043MP03220

**Partnership Filing Fee**

1a. Number of Resident Partners	2	X \$150.00 =	1a.	0 .
1b. Number of Nonresident Partners with Physical Nexus to New Jersey	0	X \$150.00 =	1b.	0 .
1c. Number of Nonresident Partners without Physical Nexus to New Jersey	0	X \$150.00 X 1000000 =	1c.	0 .
		Corporation Allocation Factor		
1d. Filing Fee (Add lines 1a - 1c, but do not enter more than \$250,000)			1d.	0 .
2. Installment Payment			2.	0 .
3. Less: Pass-Through Bus. Alt. Inc. Tax Credit			3.	0 .
4. Less: Installment Payment from 2021			4.	0 .
5. Less: PART-200-T Payment			5.	0 .
6. Balance Due			6.	0 .
7. Refund			7.	0 .

**Partners Directory** List all partners, including principal address. Add additional sheets as necessary. 1. Corporation Allocation Factor 1000000

Code	% owned by Partner	Final	SS Number or FEIN	Partner Name	
RIG	05000		225871371	KASHIWALE DHIRENDRA S	
		Partner Address		City	State
24	IROQUOIS TRL		BRANCHBURG		NJ
	Zip Code				
08876	C.	-3199	D.	-3199	E.

H.	I.	J.	K.	L.
----	----	----	----	----

Code	% owned by Partner	Final	SS Number or FEIN	Partner Name	
RIG	05000		579374923	SINGH VIJAY LAXMI	
		Partner Address		City	State
24	IROQUOIS TRL		BRANCHBURG		NJ
	Zip Code				
08876	C.	-3199	D.	-3199	E.

H.	I.	J.	K.	L.
----	----	----	----	----

Code	% owned by Partner	Final	SS Number or FEIN	Partner Name	
		Partner Address		City	State
	Zip Code				
	C.	D.	E.	F.	G.

H.	I.	J.	K.	L.
----	----	----	----	----

2a. Total This Page.	Col. J	Col. K	Col. L
2b. Total from Additional Pages Attached.	Col. J	Col. K	Col. L
2c. Total Tax (add Lines 2a and 2b).	Col. J	Col. K	Col. L

**Schedule NJK-1**  
(Form NJ-1065)

**State of New Jersey**  
**Partner's Share of Income**

**2022**

For Calendar Year 2022, or Fiscal Year Beginning \_\_\_\_\_, 2022 and ending \_\_\_\_\_, 20\_\_\_\_

<b>Part I General Information</b>				
Partner's SS # or Federal EIN 225-87-1371		Partnership's Federal EIN 85-2879898		
Partner's Name DHIRENDRA S. KASHIWALE		Partnership's Name LARVY LLC		
Street Address 24 IROQUOIS TRL		Partnership's Street Address 24 IROQUOIS TRL		
City BRANCHBURG	State NJ	ZIP Code 08876	City SOMERVILLE	State NJ
What type of entity is partner? (see instructions) <u>RIG</u> Code		Enter partner's percentage of:		
Date partner's interest in partnership began: <u>9</u> / <u>4</u> / <u>2020</u> Month Day Year		<div style="display: flex; justify-content: space-between;"> <span>(i) Before Decrease or Termination</span> <span>(ii) End of Year</span> </div>		
<input type="checkbox"/> Final NJK-1 <input type="checkbox"/> Hedge Fund <input type="checkbox"/> Amended NJK-1 <input type="checkbox"/> Member of Composite Return		<div style="display: flex; justify-content: space-between;"> <div>Profit Sharing <u>50.0000</u> %</div> <div><u>50.0000</u> %</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Loss Sharing <u>50.0000</u> %</div> <div><u>50.0000</u> %</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Capital Ownership <u>50.0000</u> %</div> <div><u>50.0000</u> %</div> </div>		
<input type="checkbox"/> If the partner is a disregarded entity, check the box and enter the partner's: <div style="display: flex; justify-content: space-between;"> <span>Federal EIN</span> <span>Name</span> </div>				
<b>Part II Income Information</b>				
Income Classifications	A. Total Distribution	NJ-1040 Filers Enter Amounts on Line Shown Below	B. New Jersey Source Amounts	NJ-1040NR Filers
1. Partnership Income (Loss)	-3,199.		-3,199.	
2. Net Guaranteed Payments	0.		0.	
3. Partner's 401(k) Contribution	0.		0.	
4. Distributive Share of Partnership Income (loss) (Line 1 plus line 2 minus line 3)	-3,199.	Line 21	-3,199.	Line 23
5. Pension	0.	Line 20a		
6. Net Gain (Loss) From Disposition of Assets as a Result of a Complete Liquidation	0.	Line 19	0.	Line 19
<b>Part III Partner's Information</b>				
1. Nonresident Partner's Share of NJ Tax . . . . .	1.		0.	Line 10b, Page 1, CBT-100 Line 8b, Page 1, CBT-100S Line 10, Page 1, CBT-100U Schedule T, NJ-CBT-1065 Line 52, NJ-1040NR Line 23, NJ-1080C Line 35a, NJ-1041
2. Partner's HEZ Deduction . . . . .	2.		0.	
3. Partner's Sheltered Workshop Tax Credit . . . . .	3.		0.	
4. Share of Pass-Through Business Alternative Income Tax . . . . .	4.		0.	
<b>Part IV Supplemental Information (Attach Schedule)</b>				

**Schedule NJK-1**  
(Form NJ-1065)

**State of New Jersey**  
**Partner's Share of Income**

**2022**

For Calendar Year 2022, or Fiscal Year Beginning \_\_\_\_\_, 2022 and ending \_\_\_\_\_, 20\_\_\_\_

<b>Part I General Information</b>																
Partner's SS # or Federal EIN 579-37-4923		Partnership's Federal EIN 85-2879898														
Partner's Name VIJAY LAXMI SINGH		Partnership's Name LARVY LLC														
Street Address 24 IROQUOIS TRL		Partnership's Street Address 24 IROQUOIS TRL														
City BRANCHBURG	State NJ	ZIP Code 08876	City SOMERVILLE	State NJ												
What type of entity is partner? (see instructions) <u>RIG</u> Code		Enter partner's percentage of:														
Date partner's interest in partnership began: <u>9</u> / <u>4</u> / <u>2020</u> Month Day Year		<table style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center;">(i) Before Decrease or Termination</th> <th style="width: 20%; text-align: center;">(ii) End of Year</th> </tr> <tr> <td>Profit Sharing</td> <td style="text-align: right;">50.0000 %</td> <td style="text-align: right;">50.0000 %</td> </tr> <tr> <td>Loss Sharing</td> <td style="text-align: right;">50.0000 %</td> <td style="text-align: right;">50.0000 %</td> </tr> <tr> <td>Capital Ownership</td> <td style="text-align: right;">50.0000 %</td> <td style="text-align: right;">50.0000 %</td> </tr> </table>				(i) Before Decrease or Termination	(ii) End of Year	Profit Sharing	50.0000 %	50.0000 %	Loss Sharing	50.0000 %	50.0000 %	Capital Ownership	50.0000 %	50.0000 %
	(i) Before Decrease or Termination	(ii) End of Year														
Profit Sharing	50.0000 %	50.0000 %														
Loss Sharing	50.0000 %	50.0000 %														
Capital Ownership	50.0000 %	50.0000 %														
<input type="checkbox"/> Final NJK-1 <input type="checkbox"/> Hedge Fund <input type="checkbox"/> Amended NJK-1 <input type="checkbox"/> Member of Composite Return		<input type="checkbox"/> If the partner is a disregarded entity, check the box and enter the partner's: <div style="display: flex; justify-content: space-between; width: 100%;"> <span>Federal EIN</span> <span>Name</span> </div>														
<b>Part II Income Information</b>																
Income Classifications	A. Total Distribution	NJ-1040 Filers Enter Amounts on Line Shown Below	B. New Jersey Source Amounts	NJ-1040NR Filers												
1. Partnership Income (Loss)	-3,199.		-3,199.													
2. Net Guaranteed Payments	0.		0.													
3. Partner's 401(k) Contribution	0.		0.													
4. Distributive Share of Partnership Income (loss) (Line 1 plus line 2 minus line 3)	-3,199.	Line 21	-3,199.	Line 23												
5. Pension	0.	Line 20a														
6. Net Gain (Loss) From Disposition of Assets as a Result of a Complete Liquidation	0.	Line 19	0.	Line 19												
<b>Part III Partner's Information</b>																
1. Nonresident Partner's Share of NJ Tax . . . . .	1.	0.	Line 10b, Page 1, CBT-100 Line 8b, Page 1, CBT-100S Line 10, Page 1, CBT-100U Schedule T, NJ-CBT-1065 Line 52, NJ-1040NR Line 23, NJ-1080C Line 35a, NJ-1041													
2. Partner's HEZ Deduction . . . . .	2.	0.														
3. Partner's Sheltered Workshop Tax Credit . . . . .	3.	0.														
4. Share of Pass-Through Business Alternative Income Tax . . . . .	4.	0.														
<b>Part IV Supplemental Information (Attach Schedule)</b>																

## 2022 Partner List for LARVY LLC

Partner Name and Address	Ending Capital Percentage	Ending Capital Amount
<a href="#"><u>DHIRENDRA S. KASHIWALE</u></a> <a href="#"><u>24 IROQUOIS TRL</u></a> <a href="#"><u>BRANCBURG, NJ 08876</u></a>	50.0000%	-3,199
<a href="#"><u>VIJAY LAXMI SINGH</u></a> <a href="#"><u>24 IROQUOIS TRL</u></a> <a href="#"><u>BRANCBURG, NJ 08876</u></a>	50.0000%	-3,199
<b>TOTALS</b>	100.0000 %	-6,398

# 2022 Partner Distributive Share Report for LARVY LLC

Partner Name	Ordinary Income (Loss)	Rental Real Estate Income (Loss)	Other Rental Income (Loss)	Royalty Income	Guaranteed Payments	Interest Income	Ordinary Dividend Income	Short-Term Capital Gains (Losses)	Long-Term Capital Gains (Losses)	Section 1231 Gain (Loss)	Other Income (Loss)	Section 179 Expense	Other Deductions
<a href="#">DHIRENDRA S. KASHIWALE</a>	-3,199	0	0	0	0	0	0	0	0	0	0	0	0
<a href="#">VIJAY LAXMI SINGH</a>	-3,199	0	0	0	0	0	0	0	0	0	0	0	0
<b>TOTALS</b>	-6,398	0	0	0	0	0	0	0	0	0	0	0	0



# **Federal Electronic Filing Instructions**

**Tax Year 2022**

**You are responsible for confirming the status of the electronically filed return.**

You can check the status of your client's returns by clicking the Refresh button in the Professional Reports.

You do not need to mail any paper signature forms to the IRS. The general partner of the partnership and preparer are required to sign Form 8879-PE and retain the completed form for three years from the return due date or IRS received date, whichever is later. Electronic storage is acceptable. The return has been successfully filed once an acceptance from the IRS is received.

## Prior Year Comparison

LARVY LLC	2021	2022	Difference
<b><u>Income</u></b>			
Gross receipts or sales	\$0	\$0	\$0
Less returns and allowances	\$0	\$0	\$0
Cost of goods sold	\$0	\$0	\$0
Gross profit	\$0	\$0	\$0
Ordinary inc (loss) from partnerships	\$0	\$0	\$0
Net farm income (loss)	\$0	\$0	\$0
Net gain (loss) from From 4797, part II	\$0	\$0	\$0
Other income (loss)	\$0	\$0	\$0
<b>Total income (loss)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b><u>Deductions</u></b>			
Salaries and wages	\$0	\$0	\$0
Guaranteed payments to partners	\$0	\$0	\$0
Repairs and maintenance	\$0	\$0	\$0
Bad debts	\$0	\$0	\$0
Rents	\$0	\$0	\$0
Taxes and licenses	\$0	\$0	\$0
Interest	\$0	\$0	\$0
Depreciation	\$0	\$0	\$0
Depletion	\$0	\$0	\$0
Retirement plans, etc.	\$0	\$0	\$0
Employee benefit programs	\$0	\$0	\$0
Other deductions	\$0	\$6,398	\$6,398
<b>Total deductions</b>	<b>\$0</b>	<b>\$6,398</b>	<b>\$6,398</b>
<b>Ordinary business income (loss)</b>	<b>\$0</b>	<b>\$-6,398</b>	<b>\$-6,398</b>

**Tax and Payment**

Interest due (look-back method, Form 8697)	\$0	\$0	\$0
Interest due (look-back method, Form 8866)	\$0	\$0	\$0
BBA AAR imputed underpayment	\$0	\$0	\$0
Other taxes	\$0	\$0	\$0
<b>Total balance due</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
Payment	\$0	\$0	\$0
<b>Amount owed</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Overpayment</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Schedule L Balances**

Beginning assets	\$0	\$0	\$0
Beginning liabilities and equity	\$0	\$0	\$0
Ending assets	\$0	\$0	\$0
Ending liabilities and equity	\$0	\$0	\$0

**Schedule K/K-1 Items**

Cash distributions	\$0	\$0	\$0
Property distributions	\$0	\$0	\$0
Partners' beginning capital accounts	\$0	\$0	\$0
Partners' ending capital accounts	\$0	\$-6,398	\$-6,398

# New Jersey Electronic Filing Instructions

These instructions are provided to help you understand and complete the final steps for electronic filing this New Jersey return. We HIGHLY recommend that you print these instructions for your reference.

**You are responsible for confirming the status of your client's electronically filed return.**

You can confirm the status of your client's return by going to:  
<https://www.taxact.com/ef/efile-center>. You will need to enter your EFIN and password. You can also check the status of your client's returns by clicking the Refresh button in the Professional Reports.