Prepared For AKSHAI K RUNCHAL and CHANCHAL RUNCHAL TAX YEAR 2013

J ARORA INC 17037 CHATSWORTH ST SUITE 202 GRANADA HILLS CA 91344

Telephone: 818-923-5038 Fax: 818-923-5053 jsarora.ea@gmail.com narora65@hotmail.com

J ARORA INC 17037 CHATSWORTH ST SUITE 202 GRANADA HILLS CA 91344 818-923-5038

August 26, 2015

AKSHAI K RUNCHAL & CHANCHAL RUNCHAL 1931 STRADELLA RD LOS ANGELES, CA 90077-2320

Dear AKSHAI & CHANCHAL.

Enclosed are your 2013 Federal and state income tax returns.

Your Federal income tax balance due is \$12,977.00.

Your Federal tax return has been filed electronically. To pay your balance due, please make your check or money order payable to UNITED STATES TREASURY and write your Social Security Number, daytime phone number, and "2013 Form 1040" on the check. Mail the enclosed Form 1040-V and your payment on or before 4/15/2014 to the Internal Revenue Service at the address on Form 1040-V. Do not staple or otherwise attach your payment to Form 1040-V.

Please retain the enclosed copy of the return for your records.

Your 2013 CA state tax return is enclosed. There is a state tax balance due of \$1,892.00. Your CA state return was filed electronically. Please keep the enclosed copy for your records. Please make your payment by 04/15/2014, following the instructions on the payment voucher.

If you have any questions, please call us. We appreciate the opportunity to serve you.

Sincerely,

JAGJIT SINGH ARORA

Privacy Policy Statement of J ARORA INC as required by the Gramm-Leach-Bliley Act Public Law 106-102 Effective November 12, 1999

J ARORA INC collects nonpublic personal information about you, and your family, if applicable, in order to properly prepare and complete your requested tax returns, from the following sources:

Information received from you on applications, tax preparation worksheets and other documents, such as interview information forms and client organizers whether submitted by you or completed on your behalf, used in the preparation of your tax return and other tax related forms.

Information about your history with us and/or other tax preparation firms offering similar services.

Information we receive from a consumer-reporting agency in accordance with tax related products requested by you.

J ARORA INC will not disclose any of your nonpublic personal information to anyone, except as permitted by law or authorized by you.

If you decide to close your account(s) or become an inactive customer, J ARORA INC will adhere to the privacy policies and practices as noted above.

J ARORA INC restricts access to your public and nonpublic personal information, including your account information, to those employees and partnered companies who need to know that information to provide products and/or services requested by you.

J ARORA INC maintains physical, electronic, and procedural safeguards that comply with the federal standards to guard your nonpublic personal information.

We know that you have confidence in our ability to perform the services requested by you. Equally important to us is your confidence in knowing that all your personal information is safe.

Please contact us at 818-923-5038 if you have any questions or concerns regarding our policy.

J ARORA INC 17037 CHATSWORTH ST SUITE 202 GRANADA HILLS CA 91344 818-923-5038

AKSHAI K RUNCHAL & CHANCHAL RUNCHAL 1931 STRADELLA RD LOS ANGELES, CA 90077-2320

Dear AKSHAI K RUNCHAL & CHANCHAL RUNCHAL:

Thank you for selecting J ARORA INC to assist you with your tax affairs. This letter confirms the terms of our engagement with you and the nature and extent of services we will provide.

Preparation: We will prepare your individual/business/entity tax returns you request using information you provide to us. We may ask for clarification of some items, but we will not audit or otherwise verify the data you submit. We presume that the information you provide will complete with regards to declaration of income from all sources and all applicable tax deductions without omitting any information. We will render bookeeping assistance as we find necessary for the preparation of the income tax return at an additional charge when necessary to properly prepare the return. Our work does not include any procedure designed to discover defalcation or irregularities, such as fraud and embezzlement, should any exist. You are responsible for the returns, so you should review them carefully before you sign them.

Fee and Payment: Our fee for this work will be based on the complexity of your return(s) as computed by our tax prepartion software. All fee due must be paid in full at the completion of the work and interim billing may be submitted as work progresses.

Audits: Your returns may be selected for audit by a taxing authority. Any proposed adjustments are subject to appeal. In the event of a tax examination, we can arrange to be available to represent you. Such representation will be a separate engagement for which an engagement letter will be provided to you. Fees and expenses for defending the returns will be invoiced in accordance with terms we agree on for that engagement.

Document Retention: We will retain copies of records you supplied to us along with our work papers for your engagement for a period of seven years. After seven years, our work papers and engagement files will be destroyed. All of your original records will be returned to you at the end of this engagement. You should keep the original records in secure storage, they may be necessary to prove accuracy and completeness of the returns to a taxing authority.

Privacy Notice: As your Tax Preparer, we are committed to the safekeeping of your confidential information and we maintain physical and electronic safeguards to protect your information. We are required to keep all information about our engagement confidential. We will not disclose any information about you unless we have your approval as required by law, even if you are no longer a client. If you need to request that we fax or mail a copy of your tax return(s) or any other data about you to another party (i.e. mortgage lender), we will require your permission in writing or via email.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, please sign in the space indicated.

Sincerely,	
J. Arora, EA	
(Both husband and wife must significant Accepted By:	gn for preparation of joint returns)
(T)	<u>date</u> :
(S)	date:

J ARORA INC 17037 CHATSWORTH ST SUITE 202 GRANADA HILLS, CA 91344 818-923-5038

AKSHAI K & CHANCHAL RUNCHAL

1931 STRADELLA RD LOS ANGELES CA 90077-2320 INVOICE DATE: 08/26/2015 SS NUMBER: 553-39-5912 TELEPHONE: 310-471-5013 INVOICE NO.:

2013 INVOICE

Description 1 FORM 1040 1 FORM 1040V, PAYMENT VOUCHER FOR BALANCE DUE RETURNS 1 SCHEDULE A, ITEMIZED DEDUCTIONS 1 SCHEDULE B, INTEREST AND DIVIDEND INCOME SCHEDULE D, CAPITAL GAINS AND LOSSES SCHEDULE E, SUPPLEMENTAL INCOME AND LOSS FORM 2210, UNDERPAYMENT OF ESTIMATED TAX FORM 4562, DEPRECIATION AND AMORTIZATION FORM 8824, LIKE-KIND EXCHANGES 1 14 SCHEDULE E, OTHER EXPENSES WORKSHEET 10 DEPRECIATION WORKSHEETS K-1 WORKSHEET SCHEDULE A ITEMIZED DEDUCTION DETAIL SHEET 1 SOCIAL SECURITY, RAILROAD TIER 1 RETIREMENT WORKSHEET 1 ELECTRONIC FILING FEE 1 CA STATE RESIDENT RETURN

Remarks:		
	Total Charges	790.00
	Discount	75.00
	Sales Tax	
	Payments	
	Amount Due	715.00

PRINTED 08/26/2	015			Taxpayer	Spouse	
INTINIED 00/20/2	2010		SSN	553-39-591	2 573-41-520	0 (
AKSHAI K	RUNCHAL			10/16/1943		
CHANCHAL			 Death			
			Day Phone	310-471-50	13	
1931 STRADELLA			Evening			
LOS ANGELES CA	90077-2320		Cell or Fax			
			PIN	95912	15200	
Email	NICTNEED		7.1	NT		
· · · · <u>-</u>	ENGINEER	NC TOTNIII	Spouse Occupation Al	NALYST		
Filing Status <u>I</u>	MARRIED FILI	NG JOINI				
						
		-				
						
Preparer ID: 5556335	50346	Preparation Fee:	715.00	Date:		
	, , , , , , , , , , , , , , , , , , , 		7 2 3 3 3 3			
Preparer: JAGJIT SI	INGH ARORA			Time in	return 2344 min.	
		Recap of 2013 Inco	omo Tay Poturn			
		Necap of 2013 filed				
Earned Income	101 000		Federal Ta	ax	12 , 925.	
Federal AGI	131,968.		Withholdi	ng	10 077 \	
Taxable Income			Refund/(D	ue)	25.0 %	
EIC			Tax Brack	et	<u> </u>	
State	CA					
Tax						
Withholding						
Refund/Due	(1,892.)					
State	<u> </u>					
Tax						
Withholding						
Refund/Due						
Bank Product Info	rmation		Check I	Direct Deposit	Debit Card	
Qualifying refund						
_ , ,		<u> </u>				

Federal disbursement.....

Check one

Department of the Treasury - Internal Revenue Service U.S. Individual Income Tax Return OMB No. 1545-0074 IRS Use Only-Do not write or staple in this space For the year Jan. 1-Dec. 31, 2013, or other tax year beginning 2013, ending See separate instructions. Your first name and initial Last name Your social security number AKSHAI K RUNCHAL 553-39-5912 If a joint return, spouse's first name and initial Last name Spouse's social security number 573-41-5200 CHANCHAL RUNCHAL Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Make sure the SSN(s) above and on line 6c are correct 1931 STRADELLA RD City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). **Presidential Election Campaign** Check here if you, or your spouse if filing LOS ANGELES CA 90077-2320 jointly, want \$3 to go to this fund. Checking a box below will not change your tax Foreign country name Foreign province/county Foreign postal code You Spouse 1 Single Head of household (with qualifying person). (See instructions.) Filing Status 2 X Married filing jointly (even if only one had income) If the qualifying person is a child but not your dependent, enter 3 Married filing separately. Enter spouse's SSN above this child's name here.▶ Check only one box and full name here. > Qualifying widow(er) with dependent child **Exemptions** 6a Yourself. If someone can claim you as a dependent, do not check box 6a Boxes checked on 6a and 6b b **Spouse** (4) Vif child under under age 17 qualifying for child ax credit (see instr. No. of children С Dependents: (2) Dependent's (3) Dependent's (1) First name Last name social security number relationship to you 0 If more than lived with you did not live with you due to divorce or separation (see instructions) four dependents, see 0 instructions Dependents on 6c not entered above 0 and check here > Add numbers Total number of exemptions claimed on lines above Income 7 Wages, salaries, tips, etc. Attach Form(s) W-2 Taxable interest. Attach Schedule B if required 8a 1,011 Tax-exempt interest. Do not include on line 8a 8h 240 Attach Forms(s) Ordinary dividends. Attach Schedule B if required 9a W-2 here. Also Qualified dividends b 9b attach Forms 10 10 Taxable refunds, credits, or offsets of state and local income taxes W-2G and 11 Alimony received 11 1099-R if tax was withheld. 12 Business income or (loss). Attach Schedule C or C-EZ 12 (2,005.13 Capital gain or (loss). Attach Schedule D if required. If not required, check here 13 If you did not Other gains or (losses). Attach Form 4797 14 14 get a W-2, 15b 15a IRA distributions see instructions Pensions and annuities 16a **b** Taxable amount 16b 16a 110,038. Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17 17 18 Farm income or (loss). Attach Schedule F 18 19 19 Unemployment compensation 22,684. 26,687. 20a Social security benefits 20a 20b **b** Taxable amount 21 Other income. List type and amount 21 131,968 Combine the amounts in the far right col for lines 7 through 21. This is your total income 22 22 23 Educator expenses **Adjusted** 24 Certain business expenses of reservists, performing artists, **Gross** and fee-basis gov. officials. Attach Form 2106 or 2106-EZ 24 Income 25 Health savings account deduction. Attach Form 8889 25 26 Moving expenses. Attach Form 3903 26 27 Deductible part of self-employment tax. Attach Schedule SE 27 28 Self-employed SEP, SIMPLE, and qualified plans 28 Self-employed health insurance deduction 29 29 30 Penalty on early withdrawal of savings 30 31a Alimony paid b Recipient's SSN▶ 31a 32 IRA deduction 32

33

34

35

Domestic production activities deduction. Attach Form 8903

Subtract line 36 from line 22. This is your adjusted gross income

Student loan interest deduction

Add lines 23 through 35

Tuition and fees. Attach Form 8917

36

37

33

34

35

36

Form 1040 (2013	3)	А	NOMAL N & CHA	NCHAL	RUNCHAL		333	-33	-J91.			Page ∠
Tax and	3	38	Amount <u>fr</u> om line 37 (adjus	sted gross	income)	<u>.</u> .			38		131,96	68.
Credits	3	39a	Check X You were b	orn before	e Jan. 2, 1949,	Blind.	Total boxes					
			f: Spouse wa	as born be	fore Jan. 2, 1949,	Blind.	checked ▶ 39a	1				
Standard		b	f your spouse itemizes on a se	eparate retu	rn or you were a dual-st	atus alien, ch	eck here ► 39b					
Deduction for-	4	10	Itemized deductions (fro	m Schedu	le A) or your standa i	d deductio	n(see left margir	າ)	40		39,79	95.
People who	4		Subtract line 40 from line 3						41		92,17	73.
check any box on line		12	Exemptions. If line 38 is \$150	,000 or less,	multiply \$3,900 by the numl	per on line 6d. (Otherwise, see instructi	ions	42		7,80	00.
39a or 39b or	4		Taxable income. Subtract						43		84,37	
who can be claimed as a			Tax (see instructions). Check		_		<u> </u>		44		12,92	
dependent,			Alternative minimum tax	•					45			
see instructions.				-					46		12,92	25.
All others:			Foreign tax credit. Attach f			. 47		,	10			
Single or			Credit for child and dependent			48			_			
Married filing separately,			Education credits from For	•		. 49			_			
\$6,100						· 						
Married filing jointly or			Retirement savings contrib									
Qualifying			Child tax credit. Attach So		•							
widow(er), \$12,200			Residential energy credits	1 1		53						
Head of			Other credits from Form: a									
household, \$8,950			Add lines 47 through 53.		•				54		10 00	2 5
			Subtract line 54 from line			46, enter -0-	•		55		12,92	25.
Other			Self-employment tax. Atta						56			
Taxes			Unreported social security				b 8919		57			
			Additional tax on IRAs, oth			tc. Attach F	orm 5329 if requ	ired	58			
	5		Household employment ta						59a			
			First-time homebuyer cred						59b			
			Taxes from: a Form 8959			ons; enter cod	le(s)		60		1000	<u> </u>
			Add lines 55 through 60.					<u>l</u>	▶ 61		12,92	<u> 25.</u>
Payments			Federal income tax withhe									
If you have a	6		2013 estimated tax payments		applied from 2012 retur							
qualifying child, attach	_ 6	64a	Earned income credit (El	C)		. 64a						
Schedule EIC.			Nontaxable combat pay election									
	- 6		Additional child tax credit.			. 65						
	e	66	American opportunity cred	it from Fo	rm 8863, line 8	. 66						
	ε	67	Reserved			. 67						
	ε	86	Amount paid with request	for extens	ion to file	. 68						
	6	69	Excess social security and	tier 1 RR	TA tax withheld .	. 69						
	7		Credit for federal tax o <u>n f</u> u			. 70						
	7	71	Credits from Form: a 24	139 b s	Re- erved c 8885 d	71						
	7	72	Add lines 62, 63, 64a, and	65 throug	ıh 71. These are you	total payn	nents	1	▶ 72			
Refund	7	73	If line 72 is more than line	61, subtra	ct line 61 from line 7	This is th	ne amount you o v	erpai	d 73			
	7		Amount <u>of line 73 you war</u>	t refunde	d to you. If Form 88	88 <u>is a</u> ttach	ed, check here▶		74a			
Direct deposit?	•		Routing number		▶ c Ty	pe: Che	cking Savi	ngs				
See instructions	•	d	Account number			╛						
	7	75	Amount of line 73 you want ap	plied to yo	ur 2014 estimated tax	▶ 75						
Amount	7	76	Amount you owe. Subtra	ct line 72 fro	om line 61. For details or	n how to pay,		•	▶ 76		12,97	77.
You Owe	7	77	Estimated tax penalty (see	instructio	ns)	77		52.				
Third Party	Do yo	u wa	nt to allow another person	to discus		IRS (see ins	structions)?		s. Com			No
Designee	name	ee's •	JAGJIT S ARORA		Phone no.	818-92	3-5038		Personal id number (F		503	46
Sign	Under p belief, ti	penalti hey ar	es of perjury, I declare that I have e e true, correct, and complete. Dec	xamined this aration of pre	return and accompanying separer (other than taxpayer)	chedules and s is based on all	tatements, and to the binformation of which p	pest of mages	y knowledo	je and owledge.		
Here	Your s			·	Date	Your occup					hone number	
Joint return?	\					ENGINEE	R		310	<u> - 47</u>	1-5013	
See instructions Keep a copy for	Spous	e's si	gnature. If a joint return, both	must sign.	Date	Spouse's o	ccupation				ent you an Identit	ty
your records.										tection F er it here		
						ANALYST				e inst.)		
	Print/Type p	prepa	rer's name	Preparer	's signature		Date	С	heck		PTIN	
	JAGJIT	: SI	INGH ARORA					se	elf-employ	ed]	P0018690	0 (
Preparer	Firm's nam	e l	J ARORA INC					Firm'	s EIN 🕨	32-	0225393	
Use Only	Firm's addr	ess l	>17037 CHATSWOR	TH ST	SUITE 202			Phon	e no.	· <u> </u>		
			CDANADA HTTTC (77 012	11_5000			010	0 - 0 2 3 -	_ 5 \ \ \ \	0	

Name: AKSHAI K & CHANCHAL RUNCHAL		SSN:	553-39-5912
Interest. List all interest on Schedule B, regardless of the amount.			
Unemployment and/or state tax refund. Fill out 1099G worksheet			
Chempio y monte di dia control di di control di di control di cont			
Additional Earned Income	Taxpayer	Spouse	Total
Sahalarahin incomo na W2			
Scholarship income - no W2			
Household employee income - no W2			
Social Security/Railroad Tier 1 Benefits	Taxpayer	Spouse	Total
Social Security received this year	26,687.		
Railroad tier 1 received this year	20,007		
Total	26,687.		26,687.
-	20,007.		20,007.
Medicare to Schedule A			
Federal tax withheld			
Married Filing Separately			
If the filing status is married filing separately and the taxpayer and spouse lived toget	her at any		
time during the year, up to 85% of social security and railroad benefits received are to	axable. See Main		
Information Sheet, filing status 3			
All others			
Modified adjusted gross income for this computation consists of AGI (without social s	ecurity or railroad ben	efits) + Form 8815	
line 14, + Form 8839, line 30 + Form 2555 (EZ) exclusions + student loan interest ad			
+ tax-exempt interest: and excluded income from American	·		
Puerto Rico: + 50% of the benefits received: 13, 3			122,628.
+ 50% of the perients received.	<u> </u>		122,020.
If the modified AGI is less than \$25,001 (\$32,001 married filing jointly), none of the S	ocial Security and RR	Benefits are taxable.	
If the modified AGI is between \$25,000 and \$34,000 (\$32,000 and \$44,000 married fi	iling joIntly), 50% of th	e benefits	
received is taxable.			
If the modified AGI is greater than \$34,000 (\$44,000 married filing jointly):			
85% of the social security and railroad benefits received is taxable	A	22,684.	
Modified AGI		·	
\$34,000 (\$44,000)			
	5,834.		
707020: X0070- 00	7001.		
Minimum FOO/ of the hour fits manifest of a fit of the			
Minimum 50% of the benefits received or \$4,500 (\$6,000 married filing	000		
jointly)	5,000.	E0 004	
Add	B	72,834.	
Taxable social security and railroad retirement tier 1. Minimum of A or B			22 , 684.
Lump Sum Payment of Social Security and Railroad Tier 1 Benefits			
una numa a numa a numa numa numa numa n	T		
<u>_</u>	Taxpayer	Spouse	Total
Gross amount received attributable to 2013			
Using the above modified AGI, this is the taxable amount of the 2013 benefit			
Amounts taxable from previous years			
Tayahla hanafite using the lump sum election method			

Form 1040-V 2013

What Is Form 1040-V

It is a statement you send with your check or money order for any balance due on the "Amount you owe" line of your 2013 Form 1040, Form 1040A, or Form 1040EZ.



You can also pay your taxes online or by phone either by a direct transfer from your bank account or by credit or debit card. Paying online or by phone is convenient and secure and helps make sure we get your payments on time. For

more information, go to www.irs.gov/e-pay.

How To Fill In Form 1040-V

Line 1. Enter your social security number (SSN). If you are filing a joint return, enter the SSN shown first on your

Line 2. If you are filing a joint return, enter the SSN shown second on your return.

Line 3. Enter the amount you are paying by check or money order.

Line 4. Enter your name(s) and address exactly as shown on your return. Please print clearly.

How To Prepare Your Payment

- Make your check or money order payable to "United States Treasury." Do not send cash.
- Make sure your name and address appear on your check or money order.
- Enter your daytime phone number and your SSN on your check or money order. If you are filing a joint return, enter the SSN shown first on your return. Also enter "2013 Form 1040," "2013 Form 1040A," or "2013 Form 1040EZ," whichever is appropriate.
- To help us process your payment, enter the amount on the right side of your check like this: \$ XXX.XX. Do not use dashes or lines (for example, do not enter "\$ XXX-" or "\$ XXX xx/100").

How To Send In Your 2013 Tax Return, Payment, and Form 1040-V

- Detach Form 1040-V along the dotted line.
- Do not staple or otherwise attach your payment or Form 1040-V to your return or to each other. Instead, just put them loose in the envelope.
- Mail your 2013 tax return, payment, and Form 1040-V to the address shown on page 2 that applies to you.

Form **1040-V** (2013) ВСА

Detach Here and Mail With Your Payment and Return

Department of the Treasury Internal Revenue Service

2013

- Use this voucher when making a payment with Form 1040
- Do not staple this voucher or your payment to Form 1040
- Make your check or money order payable to the "United States Treasury"
- Write your Social Security Number (SSN) on your check or money order

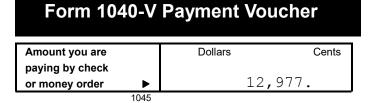
553-39-5912

573-41-5200

AKSHAI K & CHANCHAL RUNCHAL 1931 STRADELLA RD LOS ANGELES CA 90077-2320

PO BOX 7704

SAN FRANCISCO CA 94120-7704



SCHEDULE A (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Itemized Deductions

▶ Information about Schedule A and its separate instructions is at www.irs.gov/form1040.
 ▶ Attach to Form 1040.

OMB No. 1545-0074 **2013**Attachment

Sequence No. 07

Name(s) shown on Form 1040 Your social security number 553-39-5912 AKSHAI K & CHANCHAL RUNCHAL Medical Caution. Do not include expenses reimbursed or paid by others and Medical and dental expenses (see instructions) 1 **Dental** 2 Enter amount from Form 1040, line 38 **Expenses** Multiply line 2 by 10% (.10). But if either you or your spouse was born before Jan. 2, 1949, multiply line 2 by 7.5% (.075) instead 3 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-4 **Taxes You** State and local (check only one box): **Paid** Income taxes, or 5 1,811. **b** X General sales taxes 17,783. 6 Real estate taxes (see instructions) 6 7 7 Personal property taxes Other taxes. List type and amount > 8 9 19,594. 19,601. Interest 10 10 Home mortgage interest and points reported to you on Form 1098 11 Home mortgage interest not reported to you on Form 1098. If You Paid paid to the person from whom you bought the home, see inst. and show that person's name, identifying no., and address 11 Note. Your mortgage 12 Points not reported to you on Form 1098. See instructions for interest 12 special rules deduction may be limited (see 13 Mortgage insurance premiums (see instructions) 13 instructions). 14 Investment interest. Attach Form 4952 if required. (See instructions.) 14 15 19,601. Add lines 10 through 14 15 Gifts to Gifts by cash or check. If you made any gift of \$250 or more, 16 600. Charity 16 17 Other than by cash or check. If any gift of \$250 or more, see If you made a instructions. You must attach Form 8283 if over \$500 17 gift and got a benefit for it. 18 18 Carryover from prior year see instructions. 600. 19 Add lines 16 through 18 19 Casualty and 20 Theft Losses 20 Casualty or theft loss(es). Attach Form 4684. (See instructions.) Job Expenses 21 Unreimbursed employee expenses - job travel, union dues, and Certain job education, etc. Attach Form 2106 or 2106-EZ if required. Miscellaneous 21 (See instructions.) ▶ **Deductions** 22 22 Tax preparation fees 23 Other expenses - investment, safe deposit box, etc. List type and amount > CHARLWS SCHWAB-INVESTMENT EXP 22. 23 24 22. Add lines 21 through 23 24 25 Enter amount from Form 1040, line 38 2,639. 26 26 Multiply line 25 by 2% (.02) 27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-27 Other 28 Other - from list in the inst. List type and amount Miscellaneous **Deductions** 28 Total Is Form 1040, line 38, over \$150,000? Itemized X No. Your deduction is not limited. Add the amounts in the far right column **Deductions** for lines 4 through 28. Also, enter this amount on Form 1040, line 40. 29 39,795. Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter. If you elect to itemize deductions even though they are less than your standard deduction, check here

SCHEDULE D (Form 1040)

Capital Gains and Losses

▶ Attach to Form 1040 or Form 1040NR.

Short-Term Capital Gains and Losses - Assets Held One Year or Less

► Information about Schedule D and its separate instructions is at www.irs.gov/scheduled.

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074 **2013**Attachment

Attachment Sequence No. 12

Name(s) shown on return

Part I

Department of the Treasury Internal Revenue Service (99)

AKSHAI K & CHANCHAL RUNCHAL

Your social security number 553 - 39 - 5912

ente	Instructions for how to figure the amounts to er on the lines below. If form may be easier to complete if you round	(d) Proceeds (sales price)	(e) Cost	(g) Adjustments to gain or loss fro		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with
	ents to whole dollars.	(sales price)	(or other basis)	Form(s) 8949, Par line 2, column (g		column (g)
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					
	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				П	
4	Short-term gain from Form 6252 and short-term	- ' '		and 8824	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amo	ount, ii any, irom iine	•		6	()
7	Net short-term capital gain or (loss). Combir term capital gains or losses, go to Part II below.	•	` , ·		7	,
Pa	art II Long-Term Capital Gains and Lo	sses - Assets He	eld More Than One	e Year		
See	instructions for how to figure the amounts to			(g)		(h) Gain or (loss)
ente This	er on the lines below. If form may be easier to complete if you round ents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	Adjustments to gain or loss from Form(s) 8949, Par line 2, column (g	t II,	Subtract column (e) from column (d) and combine the result with column (g)
This off of	er on the lines below. If form may be easier to complete if you round	Proceeds	Cost	to gain or loss from Form(s) 8949, Par	t II,	from column (d) and combine the result with
This off o	er on the lines below. If form may be easier to complete if you round tents to whole dollars. 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	Proceeds	Cost	to gain or loss from Form(s) 8949, Par	t II,	from column (d) and combine the result with
8b	form may be easier to complete if you round ents to whole dollars. 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. Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked	Proceeds	Cost	to gain or loss from Form(s) 8949, Par	t II,	from column (d) and combine the result with
enter This off control 8a 8b 9 10	form may be easier to complete if you round ents to whole dollars. 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. Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box E checked	Proceeds (sales price)	Cost (or other basis)	to gain or loss fro Form(s) 8949, Par line 2, column (g	t II,	from column (d) and combine the result with
enter This off control 8a 8b 9 10	form may be easier to complete if you round tents to whole dollars. 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. Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Gain from Form 4797, Part I; long-term gain fro	Proceeds (sales price)	Cost (or other basis)	to gain or loss from Form(s) 8949, Par line 2, column (g	t II,	from column (d) and combine the result with
enter This off control 8a 8b 9 10	form may be easier to complete if you round tents to whole dollars. 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. Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Gain from Form 4797, Part I; long-term gain fro	m Forms 2439 and	Cost (or other basis) 6252; and long-term	to gain or loss from (s) 8949, Par line 2, column (g	t II,	from column (d) and combine the result with
8b 9 10 11 12 13	form may be easier to complete if you round ents to whole dollars. 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. Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Gain from Form 4797, Part I; long-term gain fro from Forms 4684, 6781, and 8824 Net long-term gain or (loss) from partnerships, 30 capital gain distributions. See the instructions	m Forms 2439 and	Cost (or other basis) 6252; and long-term	to gain or loss from (s) 8949, Par line 2, column (g	11	from column (d) and combine the result with
8b 9 10 11	form may be easier to complete if you round tents to whole dollars. 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. Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Gain from Form 4797, Part I; long-term gain fro from Forms 4684, 6781, and 8824 Net long-term gain or (loss) from partnerships, so Capital gain distributions. See the instructions Long-term capital loss carryover. Enter the amount of the property of the same worksheet in the instructions	m Forms 2439 and	Cost (or other basis) 6252; and long-term	gain or (loss) Gain or (loss) Gain or (loss) Gain or (loss) Gain or (loss)	11 12	from column (d) and combine the result with

Page 2

Part III	Summary
	•

16	Combine lines 7 and 15 and enter the result	16	(2,005.)
	 If line 16 is a gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. 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	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions	18	
19	Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions	19	
20	Are lines 18 and 19 both zero or blank? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). Do not complete lines 21 and 22 below.		
	No. Complete the Schedule D Tax Worksheet in the instructions. Do not complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:		
	 The loss on line 16 or (\$3,000), or if married filing separately, (\$1,500) 	21	(2,005.)
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?		
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42).		
	No. Complete the rest of Form 1040 or Form 1040NR.		

Schedule D (Form 1040) 2013

Na	me: AKSHAI K & CHANCHAL RUNCHAL		SSN: 55	3-39-5912
1	Taxable income from Form 1040, line 43, Form 1040NR, line 41, Form 1040A, line 27, or from	the Foreign Earned	t	
	Income Tax Worksheet			84 , 373.
2	Qualified dividends from Form 1040, line 9b, Form 1040A, line 9b,	•	•	
	or Form 1040NR, line 10b			
3	Line 4g of Form 4952			
4	Line 4e of Form 4952			
5	Subtract line 4 from line 3			
-	Subtract line 5 from line 2. If -0- or less, enter -0-	240.		
6		240.		
7	Smaller of line 15 or line 16 of Schedule D			
8	Smaller of line 3 or line 4			
9	Subtract line 8 from line 7. If -0- or less, enter -0-		0.40	
10	Add lines 6 and 9		240.	
11	Add lines 18 and 19 of Schedule D			
12	Smaller of line 9 or line 11			
13	Subtract line 12 from line 10. If -0- or less, -0-			240.
14	Subtract line 13 from line 1. If -0- or less, -0-			84,133.
15	Smaller of line 1 or \$72,500 if married filing jointly or qualifying widow(er);			
	\$36,250, if single or married filing separately; \$48,600 if head of household			
16	Smaller of line 1 or line 15		2,500.	
17	Smaller of line 14 or line16	7	2,500.	
18	Subtract line 10 from line 1. If -0- or less, -0	4,133.		
19	Larger of line 17 or line 18	8	4,133.	
20	Subtract line 17 from line 16. This line is taxed at 0%			
	If lines 1 and 16 are the same, skip lines 21 through 41 and			•
	Otherwise, go to line 21.			
21	Smaller of line 1 or line 13	240.		
22	Amount from line 20			
23	Subtract line 22 from line 21	240.		
24	\$400,000 if single; \$225,000 if married filing separately; \$450,000 if married			
		0,000.		
25		4,373.		
26		4,133.		
27	Subtract line 26 from line 25			
28	Smaller of line 23 or line 27		240.	,
29	Multiply line 28 by 15%			36.
30	Add lines 22 and 28	0.40		
	If lines 1 and 30 are the same, skip lines 31 through 41 and			
	Otherwise, go to line 31.	go to mic 42.		
31	Subtract line 30 from line 21			
32	Multiply line 31 by 20%			
	If Schedule D, line 19, is zero, skip lines 33 through 38 and	I go to line 39.		
	Otherwise, go to line 33.	_		
33	Smaller of line 9 above or Schedule D, line 19			
34	Add lines 10 and 19			
35	Amount from line 1			
36	Subtract line 35 from line 34. If -0- or less, -0-			
37	Subtract line 36 from line 33. If -0- or less, -0-			
38	Multiply line 37 by 25%			
	If Schedule D, line 18, is zero, skip lines 39 through 41 and		<u> </u>	
	Otherwise, go to line 39.	- 		
39	Add lines 19, 20, 28, 31 and 37			
40	Subtract line 39 from line 1			
41	Multiply line 40 by 28%	<u> </u>		
42	Tax on line 19 amount			12,889.
43	Add lines 29, 32, 38, 41, and 42			12,925.
44	Tax on line 1 amount			12,951.
45	Tax on all taxable income. Smaller of lines 43 or 44	<u></u>	<u> </u>	12,925.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

► Attach to Form 1040, 1040NR, or Form 1041.

► Attach to Form 1040, 1040NR, or Form 1041.

► Information about Schedule E and its separate instructions is at www.irs.gov/form1040.

OMB No. 1545-0074 **2013**

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

AKSHAI K & CHANCHAL RUNCHAL

Your social security no. 553-39-5912

P	art I Income or Loss From Rental Re	al Esta	ate and Royaltie	S No	te. If you are in the l	ousiness of	renting	personal	property,
	use Schedule C or C-EZ (see instructions)					oss from Fo	rm 4835	on page	2, line 40
	Did you make any payments in 2013 that would red		u to file Form(s) 1099)? (see	instructions)			Yes X	No
В	If "Yes," did you or will you file all required Forms 1							Yes	No
_1	1 1 3 7 7 37								
				23					
			90066	-				ı	
11	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Fair Rental	Persona		Q	JV
	(from list below) above, report the in personal use days				Days	Day	/S		
	only if you meet th			Α	365				
	a qualified joint ve			В	365				_
	<u> </u>			С					
- :	of Property:				7 0 1 5				
1	Single Family Residence 3 Vacation/Short	- Ierm I			7 Self-Rent				
2	Multi-Family Residence 4 Commercial		6 Royal	ities	8 Other (de	scribe)			
nco			65,950.		31,800			С	
<u>3</u> 4	Rents received		63,930.		31,000	•			_
	Royalties received	4							_
-xpe 5	A 1 (* *	5							
6	Advertising Auto and travel (see instructions)								
7	Cleaning and maintenance		1,200.		1,200			120	
8	Commissions		1,200.		1,200	•		120	•
9	Insurance		717.		772			95	-
10	Legal and other professional fees		7 ± 7 •		112	•			-
11	Management fees								
12	Mortgage interest paid to banks, etc.(see instructions		3,829.		28,209	_			
13	Other interest	13	0,023.		20,200				
14	Repairs	14	5,460.		3,100	3.100			
15	Supplies	15	3,2000						
16	Taxes	16	5,132.		5,902				
17	Utilities							320	.
18	Depreciation expense or depletion		6,898.		11,479		4	,022	
19	Other (list) ▶	19	·		·				
20	Total expenses. Add lines 5 through 19	20	23,236.		50,662		4	,557	
21	Subtract line 20 from line 3 (rents) and/or 4								
	(royalties). If result is a (loss), see instructions	3							
	to find out if you must file Form 6198	21	42,714.		(18,862	.)	(3	,418	.)
22	Deductible rental real estate loss after								
	limitation, if any, on Form 8582 (see instructions)	22	()	(18,862		3	, 418	•)
23a	Total of all amounts reported on line 3 for all r	ental p	roperties	238	520,117				
	Total of all amounts reported on line 4 for all r		•	231					
С	Total of all amounts reported on line 12 for all			230					
d	Total of all amounts reported on line 18 for all			230					
	Total of all amounts reported on line 20 for all			236	492,294			0.00	
24	Income. Add positive amounts shown on line		•			. 24		,292	
25	Losses. Add royalty losses from line 21 and renta						59	, 330	•)
26	Total rental real estate and royalty income	•	•			ere.			
	If Parts II, III, IV, and line 40 on page 2 do not apply	-					~ ~	0.66	
	or Form 1040NR, line 18. Otherwise, include this a	mount ii	n the total on line 41	on pag	e 2	. 26	28	,962	.

Your social security no. 553-39-5912

AN	SHAL K & CHANCHAL	L RUNCHAL						55.	3-J	9-5	\mathcal{I}	_
Caı	ution. The IRS compares amo	ounts reported on ye	our tax returr	with amounts	shown	on S	chedule(s) K-	·1.				
	art II Income or Loss F								at-ris	k activ	ity f	or
	which any amount is no										,	
27	Are you reporting any loss no	t allowed in a prior ye	ar due to the a	at-risk or basis li	mitations	, a pri	or year unallov	ved				
	loss from a passive activity (if If you answered "Yes," see in:	that loss was not rep	orted on Form	i 8582), or unrei	mbursed	partn	ership expense	es?	П	Yes		No
	il you alisweled Tes, see ili	Structions before com	pleting this se	(b)Enter Pfor	(c)Che	ck if	(d) Empl	over		(e)Ch		
28	(a) Na	ame		partnership; S	` forei	gn	identifica	ation		àmo	unt is	s not
а Ь л				for S corp.	partner	ship	numb		E O		at ris	<u>k</u>
AΜ				P			26-04					
ВМ	D LIVE OAK PROPER	RTIES LLC		P			26-04	291.	53			
C D												
ם												
	Passive Income and	d Loss		No	onpassi	ve In	come and Lo	oss				
	(f) Passive loss allowed	(g) Passive income	(h) Non	passive loss	(i)	Sect	ion 179 expense		(j) N	onpassi	ve in	come
	(attach Form 8582 if required)	from Schedule K-1	from S	Schedule K-1	ded	uction	from Form 456	2	fro	m Sch	edul	e K-1
4		40,538.										
В		40,538.										
C		10,000.										
D												
	Tatala	81,076.										
	Totals	01,070.										
	oTotals									0.1	0	7.0
	Add columns (g) and (j) of line							30		81	<i>,</i> 0	76.
31	Add columns (f), (h), and (i) of	f line 29b						31	()
32	Total partnership and S corp	poration income o	r (loss). Cor	mbine lines 30	and 31	. Ente	er the result					
	here and include in the total o	n line 41 below						32		81	, 0	76 .
Ρ	art III Income or Loss F	rom Estates and	l Trusts									
22		(-) h	1						(b)	Emplo	yer	
33		(a) N	lame					ide	entific	ation r	iuml	per
4												
А В												
	Passive I	ncome and Loss	 }		ı	Nonp	assive Inco	ome a	and	Loss		
	(c) Passive deduction or loss allo	owed (d)Passive incor	ne			n or loss			r incor		om
	(attach Form 8582 if required		m Schedule K		` '		ule K-1	(-)		edule		
Δ												
R												
3/10	Totals											
	Totals	0.4						0.5				
	Add columns (d) and (f) of line							35				
	Add columns (c) and (e) of line							36	()
	Total estate and trust incom		ne lines 35 a	ınd 36. Enter t	he resul	t here	e and					
	include in the total on line 41 l							37				
Р	art IV Income or Loss F	rom Real Estate						Resid	ual	Holde	er	
38	(a) Name	(b) Employer	(C) Excess	inclusion from Iules Q, line 2c	(d)		le income ss) from		(e) Ir	come fi	om	
J	(a) Name	identification no.		instructions)	Sch		Q , line 1b	S	chedu	les Q,	ine 3	b
39	Combine columns (d) and (e)	only. Enter the resu	ult here and i	nclude in the t	otal on l	ine 4	1 below	39	_		-	
	art V Summary	-										
	Net farm rental income or (los	s) from Form 4835	. Also, comp	lete line 42 he	low			40				
	Total income or (loss). Com	,										
	Form 1040, line 17, or Form 1			o. Lintoi tiito le	out HOI	o and	■	41		110	_	38
				ooo formin =				71		<u> </u>	, 0	
+2	Reconciliation of farming ar and fishing income reported on Fo	orm 4835 line 7: Sch	. ⊏nter your gr edule K-1 (For	m uss rarming								
	1065), box 14, code B; Schedule	K-1 (Form 1120S), bo	x 17, code U;	and								
	Schedule K-1 (Form 1041), box 1				2							
	Reconciliation for real estate professional (see instructions), en											
	anywhere on Form 1040 or Form											
	in which you materially participate				3	2	8-962					

2013 K-1 DETAIL REPORT

	PTP	Carryover	Sch E 4797					
	Passive	Carryover	Sch E 4797					
	Ра	Car	Sch E					
	al	over	4797	 				
	Rental	Carry	179 Sch E 4797					
		Sect.	179	 - - -				
	Sect.	1231	Gain	 				
Long	Term	Capital	Gains	 				
Short	Term Term	Capital	Gains	 				
		Sch. B	Interest Gains Gains	1 1 1 1 1 1				
	Allowed	3ain/	Loss		40538	40538		81076
		Carry	Forward]					
	Current Loss	Gain/	P/S Loss	 	40538	40538	 - - -	81076
	O		P/S		PRO P	PRO P		
			\mathtt{Entity}		MD LIVE OAK PRO	MD LIVE OAK PRO		

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

▶ Attach to Form 1040, 1040NR, or Form 1041. ▶ Information about Schedule E and its separate instructions is at www.irs.gov/form1040.

OMB No. 1545-0074

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

AKSHAI K & CHANCHAL RUNCHAL

Your social security no. 553-39-5912

G	Part I Income or Loss From Rental Real	Esta	ate and Royaltie	S No	ote. If you are in the b		f renting		
	use Schedule C or C-EZ (see instructions).	lf you	are an individual, rep	oort far	m rental income or lo	ss from F	orm 4835	on page	2, line 40
Α	Did you make any payments in 2013 that would requ	ire yo	u to file Form(s) 1099	9? (see	instructions)			Yes	No
В	If "Yes," did you or will you file all required Forms 109							Yes	No
_1	- 1 1 3 (; 3;								
_	3 2408 OCEAN PARK SANTA MON								
	14133 CALVERT STREET VAN			. –	1				
1	b Type of Property 2 For each rental real				Fair Rental	Person	al Use	6	IJV
	(from list below) above, report the nu				Days	Da	ys	<u> </u>	
	only if you meet the			Α	182				
_	a qualified joint vent			В	365				
	2 a quaimed joint vent			С	275				
- :	of Property:		5		7 0 1 5				
1	Single Family Residence 3 Vacation/Short-	Ierm I			7 Self-Rent				
2	Multi-Family Residence 4 Commercial		6 Roya	ilties	8 Other (de	scribe)			
Inco		3	17,700.		136,115		110	c ,673	
<u>3</u> 4	Rents received	4	17,700.		130,113	•	113	, 073	•
	Royalties received	4							
5	Advertising	5			1 292				
6	Auto and travel (see instructions)	6			1,292	•			_
7	Cleaning and maintenance	7			001	•			
8	Commissions	8							
9	Insurance	9	670.		5,229	_	4	,770	_
10	Legal and other professional fees	10	0,0.		5,698			, , , ,	•
11	Management fees	11			5,000		5	.890	_
12	Mortgage interest paid to banks, etc.(see instructions)	12			46,515		45	,890 ,524	.
13	Other interest	13			10,010	-		,	
14	Repairs	14	16,100.		15,453		13	, 578	. —
15	Supplies	15	,		1,402			<u>, </u>	
16	Taxes	16	1,912.		9,285		22	,568	
17	Utilities	17	698.		15,619		11	,750	
18	Depreciation expense or depletion	18	1,700.				19	,320	
19	Other (list) ▶SEE STMT	19			6,126				
20	Total expenses. Add lines 5 through 19	20	21,080.		112,503		123	,400	
21	Subtract line 20 from line 3 (rents) and/or 4								
	(royalties). If result is a (loss), see instructions								
	to find out if you must file Form 6198	21	(3,380.)	23,612	•	(3	,727	.)
22	Deductible rental real estate loss after								
	limitation, if any, on Form 8582 (see instructions)	22	(3,380.		()	(3	, 727	•)
23a	Total of all amounts reported on line 3 for all re-		•		a				
b	Total of all amounts reported on line 4 for all roy		•						
С	Total of all amounts reported on line 12 for all p	-							
d	Total of all amounts reported on line 18 for all p	-							
е	Total of all amounts reported on line 20 for all p	-		. 23	e				
24	Income. Add positive amounts shown on line 2		•			. 24			
25	Losses. Add royalty losses from line 21 and rental						()
26	Total rental real estate and royalty income o	-	-			ere.			
	If Parts II, III, IV, and line 40 on page 2 do not apply to	-							
	or Form 1040NR, line 18. Otherwise, include this am	iount II	n the total on line 41	on pag	je ∠	. 26			

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

► Attach to Form 1040, 1040NR, or Form 1041.

OMB No. 1545-0074

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service (99)

▶ Information about Schedule E and its separate instructions is at www.irs.gov/form1040.

	e(s) shown on return							Your social		
	SHAI K & CHANCH							553-3		
P	art I Income or Loss I			_		-				
		-EZ (see instructions). I					oss from			
	Did you make any payments ir			u to file Form(s) 1099	? (see	instructions)		□ '	Yes	No
В	If "Yes," did you or will you file								Yes	No
1a	,									
A										
B		TREET PANOR	AMA	CITY CA 91	L402	!-				
C										
1k	Type of Property	2 For each rental real				Fair Rental	Perso	onal Use	_	λλ
	(from list below)	above, report the nu				Days		Days		(O V
A		personal use days. (only if you meet the			Α	80				
B		a qualified joint vent			В	365				
С					С					
	of Property:									
1	Single Family Residence	3 Vacation/Short-7	Term F	Rental 5 Land		7 Self-Ren				
2	Multi-Family Residence	4 Commercial		6 Royalt	ies	8 Other (de	escribe)			
ncor	ne:	Properties		Α		В	•		С	
			3	15,717.		133,162	•			
	Royalties received		4							
-	nses:		_							
			5			0.00				
	Auto and travel (see instruc	•	6			292				
	Cleaning and maintenance		7			6,344	•			
			8	4 0 6 0		2 004				
	Insurance		9	4,962.	-	3,884	•			
	Legal and other profession		10	4,599.		10.000				
			11	00 571		10,000				
	Mortgage interest paid to bank	•	12	20,571.		34,018	•			
			13	0 075		F (()				
	•		14	2,975.		5,669	•	+		
	_ ` '		15 16	7 606		10 101				
				7,626.		18,121 8,521				
			17	4,927.	-	21,519		+		
	Depreciation expense or de Other (list) ▶SEE STMT		18	4,321.	+	2,828		+		_
	Total expenses. Add lines 5		19 20	45,660.		111,196		-		-
	Subtract line 20 from line 3		20	40,000.		111,100	•			
	(royalties). If result is a (los									
	to find out if you must file F	•	21	(29,943.)		21,966				
	Deductible rental real estat			(23/313.)		21/300	•	+		
	limitation, if any, on Form 8		22	(29,943.	١	()	(
	Total of all amounts reporte				23a		,			
	Total of all amounts reporte		-	•	23b					
	Total of all amounts reporte			•	23c					
	Total of all amounts reporte				23d					
	Total of all amounts reporte	-	-		23e					
	Income. Add positive amou						. 24			
	Losses. Add royalty losses fr			•		er total losses here				
	Total rental real estate an									-1
	If Parts II III IV and line 40 or		-							

or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 .

4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Attachment Sequence No

179

Business or activity to which this form relates Identifying number Name(s) shown on return AKSHAI K & CHANCHAL RUNCHAL 553-39-5912 RENTAL REALESTATE **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) 500,000. 2 2,000,000. 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 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 (a) Description of property (b) Cost (business use only) (c) Elected cost 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction. Enter the smaller of line 5 or line 8. 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 do not enter more than line 11..... 13 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 **\>** 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 16 **16** Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) 22,399. 17 MACRS deductions for assets placed in service in tax years beginning before 2013 17 18 If you are electing to group any assets placed in service during the tax year Section B-Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depr. (d) Recovery (g) Depreciation (a) Classification of property year placed in (f) Method (business/investment use period Convention deduction service only - see instructions) 19 a 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. h Residential rental MM S/L 27.5 yrs. 27.5 yrs. MM S/L property MM S/L i Nonresidential real 39 yrs. MM property Section C-Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs. S/L S/L c 40-year 40 yrs. MM Summary (See instructions.) 21 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 22,399. For assets shown above and placed in service during the current year, enter

the portion of the basis attributable to section 263A costs

23

Form **4562**

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

2013

Attachment Sequence No.

179

Business or activity to which this form relates Identifying number Name(s) shown on return AKSHAI K & CHANCHAL RUNCHAL SCH E 2ND SCHEDULE 553-39-5912 **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) 500,000. 2 2,000,000. 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 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 (a) Description of property **(b)** Cost (business use only) (c) Elected cost 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 **9** Tentative deduction. Enter the **smaller** of line 5 or line 8. 9 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 do not enter more than line 11..... 13 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 **** Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 16 **16** Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2013 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 2013 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depr. (d) Recovery (g) Depreciation (a) Classification of property year placed in (f) Method (business/investment use period Convention deduction service only - see instructions) 19 a 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. 09/2013 160,214. 1,700. h Residential rental 27.5 yrs. MM S/L 04/2013 750,000. 19,320. MM S/L property 27.5 yrs. MM S/L i Nonresidential real 39 yrs. ММ property Section C-Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life **b** 12-year 12 yrs. S/L S/L c 40-year 40 yrs. MM Part IV Summary (See instructions.) 21 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 21,020. For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Form **4562**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Business or activity to which this form relates

2013

Attachment Sequence No.

179

AKSHAI K & CHANCHAL RUNCHAL 14523 TUPPER STREET 553-39-5912 **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) 500,000. 2 2,000,000. 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 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 (a) Description of property (b) Cost (business use only) (c) Elected cost 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 **9** Tentative deduction. Enter the **smaller** of line 5 or line 8. 9 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 do not enter more than line 11..... 13 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 **** Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 16 **16** Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) 21,519. 17 MACRS deductions for assets placed in service in tax years beginning before 2013 17 18 If you are electing to group any assets placed in service during the tax year Section B-Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depr. (d) Recovery (g) Depreciation (a) Classification of property year placed in (f) Method (business/investment use period Convention deduction service only - see instructions) 3-year property 19 a **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. 10/2013 650,000. 4,927. h Residential rental MM S/L 27.5 yrs. MM property 27.5 yrs. S/L MM S/L i Nonresidential real 39 yrs. ММ property Section C-Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life **b** 12-year 12 yrs. S/L S/L c 40-year 40 yrs. MM Part IV Summary (See instructions.) 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 26,446. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Page: 1 553-39-5912 2013 ASSET DETAIL REPORT

Date Bus. 179+ Rec. Prior Current Next Prior Current Gain/ Sales Date Description Acqd Cost Use Spec. Basis Method Per. Cv Depr. Depr. Year AMT AMT Price Price Sold Form: 14523 TUPPER STREET Rental Property: (A) 2 8932/8938 COLUMBUS Depreciation Class: Real property residential rental In Service Year: 2013 8932/8938 CO 10/13 1620000 100 650000 MACRS 27.5 MM 4927 23634 4927 Rental Property: (B) 2 14523 TUPPER STREET Depreciation Class: Real property residential rental In Service Year: 2012 14523 TUPPER 03/12 1020413 100 591840 MACRS 27.5 MM 17039 21519 17039 21519 _____ _____ _____ ____ Form Totals: 2640413 1241840 17039 26446 45153 17039 26446 Form: RENTAL REALESTATE Rental Property: (A) 1 3106 INGLEWOOD BLVD Depreciation Class: Real property residential rental In Service Year: 1992 3106 INGLEWO 10/92 260000 100 169000 SL 27.5 MM 122655 6145 4225 6147 120733 In Service Year: 2011 3106 INGLEWO 02/11 20710 100 20710 SL 27.5 MM 1412 753 753 1412 753 Rental Property: (B) 1 4416 KATHERINE AVE

315700 MACRS 27.5 MM 45439 11479 11479 45439 11479

4416 KATHERI 01/09 315700 100
Rental Property: (C) 1 3817 MINERVA

Depreciation Class: Real property residential rental

Depreciation Class: Real property residential rental

In Service Year: 1980

In Service Year: 2009

Page: 2 553-39-5912 2013 ASSET DETAIL REPORT

Description	Date Acqd	Cost		179+ Spec.	Basis	Method	Rec. Per.		_	Current Depr.	Next Year	Prior AMT	Current AMT	Gain/ Price	Sales Price	Date Sold
3817 MINERVA	09/80	147560	100		104766	MACRS	27.5	MM								
In Service	Year:	2004														
3817 MINERVA	03/04	55000	100		55000	SL	27.5	MM	15000	2000	2000	15000	2000			
In Service	e Year:	2007														
3817 MINERVA	07/07	55604	100		55604	SL	27.5	MM	11037	2022	2022	11037	2022			
Form Totals:		854574			720780				195543	22399	22401	193621	20479			
Form: SCH E 2 Rental Prope Depreciation In Service	erty: (on Clas e Year:	A) 1 12 s: Real 2013	prop	erty re	esidenti			MA		1700	5005		1700			
12029 CLOVER						SL	27.5	MM		1700	5825		1700			
Rental Prope	_					_	_									
Depreciation			prop	erty re	sidenti	al renta	11									
	. 37	2012														
In Service																
In Service			100		750000	MACRS	27.5	MM		19320	27270		19320			

Form **8824**

Like-Kind Exchanges (and section 1043 conflict-of-interest sales)

► Attach to your tax return.

Department of the Treasury Internal Revenue Service

► Information about Form 8824 and its separate instructions is at www.irs.gov/form8824.

OMB No. 1545-1190 **2013**

Attachment Sequence No.

nce No. 109

Identifying number Name(s) shown on tax return AKSHAI K & CHANCHAL RUNCHAL 553-39-5912 Part I Information on the Like-Kind Exchange Note: If the property described on line 1 or line 2 is real or personal property located outside the United States, indicate the country. Description of like-kind property given up: 3817 MINERVA AVE, LOS ANGELES, CA 90066 2 Description of like-kind property received: 14133 CALVERT STREET, VAN NUYS, CA 91411 08/07/1980 3 Date like-kind property given up was originally acquired (month, day, year) 03/01/2013 4 Date you actually transferred your property to other party (month, day, year) 5 Date like-kind property you received was identified by written notice to another party (month, day, year). 03/25/2013 5 See instructions for 45-day written identification requirement 6 Date you actually received the like-kind property from other party (month, day, year). See instructions 04/11/2013 7 Was the exchange of the property given up or received made with a related party, either directly or indirectly (such as through Related Party Exchange Information 8 Name of related party Relationship to you Related party's identifying number Address (no., street, and apt., room, or suite no., city or town, state, and ZIP code) 9 During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did the related party sell or dispose of any part of the like-kind property received from you (or an intermediary) in the exchange or transfer property into the exchange, directly or indirectly (such as through an intermediary), that became your replacement property? 10 During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did you sell or dispose of any part of the like-kind property you received?..... If both lines 9 and 10 are "No" and this is the year of the exchange, go to Part III. If both lines 9 and 10 are "No" and this is not the year of the exchange, stop here. If either line 9 or line 10 is "Yes," complete Part III and report on this year's tax return the deferred gain or (loss) from line 24 unless one of the exceptions on line 11 applies. 11 If one of the exceptions below applies to the disposition, check the applicable box: The disposition was after the death of either of the related parties. The disposition was an involuntary conversion, and the threat of conversion occurred after the exchange. You can establish to the satisfaction of the IRS that neither the exchange nor the disposition had tax avoidance as one of its principal

purposes. If this box is checked, attach an explanation (see instructions).

Name(s) shown on tax return. Do not enter name and social security number if shown on page 1.

Your social security number 553-39-5912

	SHAI K & CHANCHAL RUNCHAL	553-39	-5912
Pai	t III Realized Gain or (Loss), Recognized Gain, and Basis of Like-Kind Property	Received	
	Caution: If you transferred and received (a) more than one group of like-kind properties or (b) cash or other	(not like-kind)	property,
	see Reporting of multi-asset exchanges in the instructions.		
	Note: Complete lines 12 through 14 only if you gave up property that was not like-kind. Otherwise, go to line	e 15.	
12	Fair market value (FMV) of other property given up		
13	Adjusted basis of other property given up		
14	Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain or		
	(loss) in the same manner as if the exchange had been a sale	14	
	Caution: If the property given up was used previously or partly as a home, see Property used as home		
	in the instructions.		
15	Cash received, FMV of other property received, plus net liabilities assumed by other party, reduced (but		
	not below zero) by any exchange expenses you incurred (see instructions)	15	
16	FMV of like-kind property you received		1,850,000.
	Add lines 15 and 16		1,850,000.
			1,000,000.
18	Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange	40	1 557 270
	expenses not used on line 15 (see instructions)		1,557,270.
19			292,730.
20	Enter the smaller of line 15 or line 19, but not less than zero		
21	Ordinary income under recapture rules. Enter here and on Form 4797, line 16 (see instructions)	21	
22	Subtract line 21 from line 20. If zero or less, enter -0 If more than zero, enter here and on Schedule D or		
	Form 4797, unless the installment method applies (see instructions)	22	
23	Recognized gain. Add lines 21 and 22	23	
24	Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions	24	292 , 730.
25	Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23	25	1,557,270.
Pai	t IV Deferral of Gain From Section 1043 Conflict-of-Interest Sales		
27	copy of your certificate. Keep the certificate with your records.)	>	
28	Description of replacement property ▶		
29	Date divested property was sold (month, day, year)	29	
30	Sales price of divested property (see instructions)		
31	Basis of divested property		
32	Realized gain. Subtract line 31 from line 30	32	
33	of sale		
34	Subtract line 33 from line 30. If zero or less, enter -0-	34	
35 36	Ordinary income under recapture rules. Enter here and on Form 4797, line 10 (see instructions)	05	
	Subtract line 35 from line 34. If zero or less, enter -0 If more than zero, enter here and on	35	
	Subtract line 35 from line 34. If zero or less, enter -0 If more than zero, enter here and on Schedule D or Form 4797 (see instructions)		
37		36	

Department of the Treasury

Internal Revenue Service

IRS e-file Signature Authorization

▶ Do not send to the IRS. This is not a tax return.

► Keep this form for your records.

▶ Information about Form 8879 and its instructions is at www.irs.gov/form8879.

OMB No. 1545-0074

2013

Number (SID 9626072015119D002248		
Taxpayer's name AKSHAI K RUNCHAL	Social security	
Spouse's name		al security number
CHANCHAL RUNCHAL	573-41-	
Part I Tax Return Information-Tax Year Ending December 31, 2013 (Wh	nole Dollars Onl <u>y</u>)	
1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, I	,	1 131,968.
2 Total tax (Form 1040, line 61; Form 1040A, line 35; Form 1040EZ, line 10)		2 12,925.
3 Federal income tax withheld (Form 1040, line 62; Form 1040A, line 36; Form 1040		3
4 Refund (Form 1040, line 74a; Form 1040A, line 43a; Form 1040EZ, line 11a; Form 1040-SS	· · · · · · · · · · · · · · · · · · ·	10.077
5 Amount you owe (Form 1040, line 76; Form 1040A, line 45; Form 1040EZ, line 12		5 12,977.
Part II Taxpayer Declaration and Signature Authorization (Be sure you	•	
Under penalties of perjury, I declare that I have examined a copy of my electronic individual incom		
statements for the tax year ending December 31, 2013, and to the best of my knowledge and belie		
clare that the amounts in Part I above are the amounts from my electronic income tax return. I con transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from t	•	· ·
son for rejection of the transmission, (b) the reason for any delay in processing the return or refund		
authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds		
nstitution account indicated in the tax preparation software for payment of my federal taxes owed	•	, ·
ax, and the financial institution to debit the entry to this account. This authorization is to remain in	full force and effect u	ntil I notify the U.S.
Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must cont	-	_
1-888-353-4537. Payment cancellation requests must be received no later than 2 business days p		-
authorize the financial institutions involved in the processing of the electronic payment of taxes to answer inquiries and resolve issues related to the payment. I further acknowledge that the persona		
signature for my electronic income tax return and, if applicable my Electronic Funds Withdrawal Co		or (1 114) below is my
Taxpayer's PIN: check one box only		
I authorize J ARORA INC to enter o	r generate my PIN	95912
ERO firm name		Enter five numbers, but
as my signature on my tax year 2013 electronically filed income tax return.		do not enter all zeros
I will enter my PIN as my signature on my tax year 2013 electronically filed income tax return.	Check this box only	if you are
entering your own PIN and your return is filed using the Practitioner PIN method. The ERO method		
Your signature ▶ Date	• ► <u>04/26/20</u>)15
Snouge's BINL shock one have only		
Spouse's PIN: check one box only		1 5 0 0 0
-	r generate my PIN	15200
ERO firm name		Enter five numbers, but
as my signature on my tax year 2013 electronically filed income tax return.	Observato de la compansión	do not enter all zeros
I will enter my PIN as my signature on my tax year 2013 electronically filed income tax return.	-	-
entering your own PIN and your return is filed using the Practitioner PIN method. The ERO m Spouse's signature ▶ Date	ost complete Part III • ► 04/26/20	
Date	04/20/20	713
Dunatitionar DIN Mathed Deturns Only our	tious balaur	
Practitioner PIN Method Returns Only-cor	itinue below	
Part III Certification and Authentication-Practitioner PIN Method Only		
	0.60.60	A F F O O A C
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		750346
		nter all zeros
certify that the above numeric entry is my PIN, which is my signature for the tax year 2013 electrons that the development of the tax year 2013 electrons that the development of the tax years are sufficiently as the tax years are sufficiently a	•	
for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the		e Practitioner PIN method
and Publication 1345 , Handbook for Authorized IRS e-file Providers of Individual Income Tax Re		115
•	04/26/20)15

FORM

C 1 Side

c 1

APE ATTACH FED RETURN 553-39-5912 573-41-5200 RUNC AKSHAI K RUNCHAL Α CHANCHAL RUNCHAL R RP 1931 STRADELLA RD LOS ANGELES CA 90077-2320 10-16-1943 07-16-1951 APE FS ()SCHG1 5870A ()5805 5805F DESIGNEE TPIDP 00186900 FN CCF 3805P NQDC () Ω Ω 3805Z 3549A IRC197 IRC1341 Ω Ω

	1 Single	4 Head of household (with qualifying person). See instructions.
Filing Status	2 X Married/RDP filing jointly. See instuctions	5 Qualifying widow(er) with dependent child. Enter year spouse/RDP died
正货	3 Married/RDP filing separately. Enter spous	e's/RDP's SSN or ITIN above and full name here
	If your Calfornia filing status is different from yo	our federal filing status, check the box here ■
	6 If someone can claim you (or your spouse/RDF	P) as a dependent, check the box here, See inst

Your name: AKSHAI K & CHANCHAL Your SSN or ITIN: 553-39-5912 For line 7, line 8, line 9, and line 10: Multiply the amount you enter in the box by the pre-printed dollar amount for that line. Whole dollars only 7 Personal: If you checked box 1, 3, or 4 above, enter 1 in the box. If you checked box 2 or 5, enter 2, in the box. If you checked the box on line 6, see instructions X \$106= 8 Blind: If you (or your spouse/RDP) are visually impaired, enter 1; if both are visually impaired, enter 2 X \$106= **9 Senior:** If you (or your spouse/RDP) are 65 or older, enter 1; 106 Exemptions 10 Dependents: Do not include yourself or your spouse/RDP. First name Last name Dependent's relationship to you \odot (Total dependent exemptions X \$326= (\$ 318 00 **12** State wages from your Form(s) W-2, box 16 **12** 131,968 23,823 14 California adjustments - subtractions. Enter the amount from Schedule CA (540), line 37, column B • 14 Taxable Income 108,145 108,145 17 California adjusted gross income. Combine line 15 and line 16 • 17 Your California itemized deductions from Schedule CA (540), line 44: OR 18 Enter the larger of: Your California standard deduction shown below for your filing status: • Married/RDP filing jointly, Head of household, or Qualifying widow(er) \$7,812 If the box on line 6 is checked, STOP. See instructions 37,984 19 Subtract line 18 from line 17. This is your taxable income. If less than zero, enter -0-70,161 31 Tax. Check the box if from: Tax Table Tax Rate Schedule 2,206 FTB 3800 FTB 3803 32 Exemption credits. Enter the amount from line 11. If your federal AGI is more than \$172,615, 318 Ιaχ 33 Subtract line 32 from line 31. If less than zero, enter -0-1,888 Schedule G-1 ● | FTB 5870A **34** Tax. See instr. Check the box if from: 35 Add line 33 and line 34 1,888.

Your	nam	ne: AKSHAI K & CHANCHAL RUNCHA Your SSN	or ITIN: 5	553-39-	5912			
		Nonrefundable Child and Dependent Care Expenses Credit. See in	_			.● 40	.0	C
	41	New jobs credit, amount generated. See instructions.		● 41				
	42	New jobs credit, amount claimed. See instructions.				• 42	.0	С
lits	43	Enter credit name	code ●		and amount	. • 43	.0	С
Special Credits	44	Enter credit name	code ●		and amount	.● 44	.0	С
Speci	45	To claim more than two credits, see instructions. Attach Schedule F	P (540) .			• 45	.0	С
	46	Nonrefundable renter's credit. See instructions				• 46	.0	С
	47	Add line 40 and line 42 through line 46. These are your total credits	s			• 47	.0	С
	48	Subtract line 47 from line 35. If less than zero, enter -0				• 48	1,888.0	С
	61	Alternative minimum tax. Attach Schedule P (540)				• 61	0	С
Other Taxes	62	Mental Health Services Tax. See instructions.				● 62	0	С
Other	63	Other taxes and credit recapture. See instructions				• 63	0	C
	64	Add line 48, line 61, line 62, and line 63. This is your total tax				● 64	1,888	С
	71	California income tax withheld. See instructions.				• 71	0	С
ts	72	2013 CA estimated tax and other payments. See instructions				• 72	0	C
Payments	73	Real estate and other withholding. See instructions.				• 73	0	C
ď	74	Excess SDI (or VPDI) withheld. See instructions.				• 74	0	С
	75	Add line 71, line 72, line 73, and line 74. These are your total payr	ments. See	e instructions		⊚ 75	0	С
<u>/</u> X	91	Overpaid tax. If line 75 is more than line 64, subtract line 64 from li	ne 75			⑤ 91	0	C
Overpaid Tax/ Tax Due	92	Amount of line 91 you want applied to 2014 estimated tax				• 92	0	C
Over Ta	93	Overpaid tax available this year. Subtract line 92 from line 91				• 93	0	C
	94	Tax due. If line 75 is less than line 64, subtract line 75 from line 64				a 94	1,888 0	<u>-</u>

098 3103136 Form 540 C1 2013 **Side 3**

Your name:	AKSHAI	K	&	CHANCHAL	Your SSN or ITIN:	553-39-5912

95 Use Tax. This is not a total line. See instructions.

	<u>c</u>	<u>Code</u>	Amount
	California Seniors Special Fund. See instructions.	400	.00
	Alzheimer's Disease/Related Disorders Fund●	401	.00
	California Fund for Senior Citizens	402	.00
	Rare and Endangered Species Preservation Program	403	.00
	State Children's Trust Fund for the Prevention of Child Abuse	404	.00
	California Breast Cancer Research Fund	405	.00
	California Firefighters' Memorial Fund	406	.00
	Emergency Food for Families Fund	407	.00
Su	California Peace Officer Memorial Foundation Fund	408	.00
Contributions	California Sea Otter Fund	410	.00
Contr	Municipal Shelter Spay-Neuter Fund	412	.00
	California Cancer Research Fund	413	.00
	Child Victims of Human Trafficking Fund	419	.00
	California YMCA Youth and Government Fund	420	.00
	California Youth Leadership Fund	421	.00
	School Supplies for Homeless Children Fund	422	.00
	State Parks Protection Fund/Parks Pass Purchase	423	.00
	Protect our Coast and Oceans Fund	424	.00
	Keep Arts in Schools Fund	425	.00
	American Red Cross, California Chapters Fund	426	.00
110	Add code 400 through code 426. These are your total contribution	110	.00

Your	name:	AKSHAI K & CHANCHAL Your SSN or ITIN: 553-39-5912	
Amount You Owe	111	AMOUNT YOU OWE. Add line 94, line 95, and line 110. See instructions. Do not send cash. Mail to: FRANCHISE TAX BOARD PO BOX 942867 SACRAMENTO CA 94267-0009. Pay online - Go to ftb.ca.gov for more information.	1,888 00
Interest and Penalties	112 113	Interest, late return penalties, and late payment penalties	4.00
	114	Total amount due. See instructions. Enclose, but do not staple, any payment	1,892.00
	115	REFUND OR NO AMOUNT DUE. Subtract line 95 and line 110 from line 93. See instructions. Mail to: FRANCHISE TAX BOARD PO BOX 942840 SACRAMENTO CA 94240-0009. • 115 the information to authorize direct deposit of your refund into one or two accounts Do not attach a voided of the content of the information of the content	. 00
Refund and Direct Deposit	Have	e you verified the routing and account numbers? Use whole dollars only. The following amount of my refund (line 115) is authorized for direct deposit into the account shown below: Type	ліеск от а церозії зіір. Зее ітізі.
Dire	• Rou	ting number Checking Account number • 116 Direct	deposit amount
Refund		Savings maining amount of my refund (line 115) is authorized for direct deposit into the account shown below: Type Checking Account number Savings	deposit amount
		See the instructions to find out if you should attach a copy of your complete federal tax return.	
know	ledge a	ies of perjury, I declare that I have examined this tax return, including accompanying schedules and statements, and to the b nd belief, it is true, correct, and complete.	
	signature	Date Spouse's/RDP's signature (if a joint tax return,	both must sign)
	gn ere	Your email address (optional). Enter only one email address. Paid preparer's signature (declaration of preparer is based on all information of which preparer has any knowledge)	Daytime phone number (optional) 310-471-5013
It is u to for spou	ınlawful	Firm's name (or yours, if self-employed	PTIN P00186900
	tax retuinstruct	Im? Firm's address	• FEIN 32-0225393
		Do you want to allow another person to discuss this tax return with us? See instructions	● X Yes No Telephone Number
		JAGJIT ARORA	818-923-5038

098 3105136 Form 540 C1 2013 **Side 5**

TAXABLE YEAR 2013	alifornia e-file Signature Authorization for Individual	FORM 8879
	9626072015119D002249	
Your name AKSHAI K R	UNCHAL	Your SSN or ITIN 553-39-5912
Spouse's/RDP's name		Spouse's/RDP's SSN or ITIN 573-41-5200
	Information (whole dollars only)	373 41 3200
	Gross Income (Form 540, line 17; Form 540 2EZ, line 16; Long Form 540NR, line 32;	
•	NR, line 32)	1 108.145.
	Form 540, line 111; Form 540 2EZ, line 27; Long Form 540NR, line 121; or Short Form 540NR, lin	
	unt Due (Form 540, line 115; Form 540 2EZ, line 28; Long Form 540NR, line 125;	,
or Short Form 540	NR, line 125)	3
Part II Taxpayer D	eclaration and Signature Authorization (Be sure you obtain and keep a copy of your return.)	
number or individual ta sponding lines of my et tax payments as show clare that direct depos irrevocable appointme Transmitter, or Interme refund is delayed, I a or the date when the tax liability, I remain lia Funds Withdrawal Cor	lectronic Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name ix identification number) and the amounts shown in Part I above agree with the information and amblectronic income tax return. If applicable, I authorize an electronic funds withdrawal of the amount of nonmy return and on form FTB 8455, California e-file Payment Record for Individuals, or a compact refund amount on line 3 agrees with the direct deposit authorization stated on my return. If I have not of the other spouse/RDP as an agent to authorize an electronic funds withdrawal or direct depositiate Service Provider to transmit my complete return to the Franchise Tax Board (FTB). If the programming the FTB to disclose to my ERO, Intermediate Service Provider, and/or Transmitter trefund was sent. If I am filing a balance due return, I understand that if the FTB does not receive ble for the tax liability and all applicable interest and penalties. I acknowledge that I have read and isent included on the copy of my electronic income tax return. I have selected a personal identificationic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.	counts shown on the corre- on line 2 and/or the estimated arable form. If applicable, I de- efiled a joint return, this is an it. I authorize my ERO, cessing of my return or he reason(s) for the delay full and timely payment of my d consent to the Electronic
Taxpayer's PIN: chec		
X I authorize J A	RORA INC to enter r	my PIN <u>95912</u>
	ERO firm name	Do not enter all zeros
I will enter my PIN	n my 2013 e-filed California individual income tax return. as my signature on my 2013 e-filed California individual income tax return. Check this box only if y filed using the Practitioner PIN method. The ERO must complete Part III below.	ou are entering your own PIN
Your signature	Date ▶ <u>0</u>	4/26/2015
Spouse's/RDP's PIN:	check one box only	
X I authorize J A	RORA INC. to enter n	my PIN 15200
	ERO firm name n my 2013 e-filed California individual income tax return.	Do not enter all zeros
	as my signature on my 2013 e-filed California individual income tax return. Check this box only if y filed using the Practitioner PIN method. The ERO must complete Part III below.	ou are entering your own PIN
Spouse's/RDP's signa	ure ▶ Date ▶ 0	4/26/2015
	Practitioner PIN Method Returns Only - continue below	
Part III Certification	n and Authentication - Practitioner PIN Method Only	
ERO's EFIN/PIN. Ente	r your six-digit EFIN followed by your five-digit self-selected PIN. 96260750346	
	Do not enter all zeros numeric entry is my PIN, which is my signature for the 2013 California individual income tax return am submitting this return in accordance with the requirements of the Practitioner PIN method and I ed e-file Providers.	for the taxpayer(s) indicated
ERO's signature▶	Date ▶ 0	4/26/2015
<u> </u>		

Voucher at bottom of page.

DO NOT MAIL A PAPER COPY OF YOUR TAX RETURN WITH THE PAYMENT VOUCHER.

If amount of payment is zero, do not mail this voucher.

WHERE TO FILE: Using black or blue ink, make v

Using black or blue ink, make your check or money order payable to the "Franchise Tax Board." Write the taxpayer's social security number (SSN) or individual taxpayer identification number (ITIN) and "2013 FTB 3582" on the check or money order. Detach the voucher below. Enclose, but **do not** staple, payment with the voucher and mail to:

FRANCHISE TAX BOARD PO BOX 942867 SACRAMENTO CA 94267-0008

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

WHEN TO FILE: Calendar Year - File and pay by April 15, 2014.*

When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

ONLINE SERVICES: Use Web Pay and enjoy the ease of our free online payment service.

Go to ftb.ca.gov for more information.

Do not mail this voucher if you use Web Pay.

__ _ DETACH HERE __ _ _ IF NO PAYMENT IS DUE, DO NOT MAIL THIS VOUCHER _ _ _ DETACH HERE

CAUTION: You may be required to pay electronically. See instructions.

TAXABLE YEAR Payment Voucher for 2013 Individual e-filed Returns

CALIFORNIA FORM

3582 (e-file)

553-39-5912 RUNC 573-41-5200 13

AKSHAI K RUNCHAL CHANCHAL RUNCHAL

1931 STRADELLA RD

LOS ANGELES CA 90077-2320

Amount of payment 1892.

TAXABLE YEAR

SCHEDULE

2013 California Adjustments - Residents

CA (540)

lm	portant: Attach this schedule behind Form 540, Side 5 as a supporting Californ	nia	schedule.				
Na	me(s) as shown on return						or ITIN
I	AKSHAI K & CHANCHAL RUNCHAL					55	3-39-5912
Pa	rt I Income Adjustment Schedule	Δ	Federal Amounts (taxable amounts from	R	Subtractions See instructions		Additions
Sec	ction A - Income		your federal tax return)	- ;	See instructions	· `	See instructions
7	Wages, salaries, tips, etc. See instructions before making an rocking in column B or C 7	•		•		0	
8	Taxable interest (b) 8 (a)	\odot	1,011.	•		•	
9	Ordinary dividends. See instructions.(b) 240 9 (a)	\odot	240.	•		•	
10	Taxable refunds, credits, offsets of state and local income taxes 10	_		•			
11	Alimony received	_				0	
12	Business income or (loss)	_		•		0)
	Capital gain or (loss). See instructions	_	(2,005.)	•		0	
	Other gains or (losses) 14		(= / 0 0 0 1 /	<u> </u>		•	
	IRA distributions. See instructions. (a)15(b)			<u> </u>		•	
	Pensions and annuities. See instructions. (a) 16(b)			<u> </u>		•	
	Rental real estate, royalties, partnerships, S corporations, trusts, etc 17	_	110,038.	(a)	1,139		
	Farm income or (loss)	_	110,000.	0	1,100	. (
		_		O		9	
	Unemployment compensation 19		22,684.	O	22,684.		
	Social security benefits (a) 26,687						
21	Other income.			a (a	
	a California lottery winnings e NOL from FTB 3805D, 3805Z,			b 🤇	<u> </u>	b	_
	,	()		C _			•
	c Federal NOL (Form 1040, line 21) f Other (describe):			d (d	
	d NOL carryover from FTB 3805V			e <u>(</u>		е	
				f (f	<u> </u>
22	Total. Combine line 7 through line 21 in column A. Add line 7 through		L				
	line 21f in column B and column C. Go to Section B	•	L	f (€	23,823.		
Sec	line 21f in column B and column C. Go to Section B		L	•			
Sec	line 21f in column B and column C. Go to Section B		L				
Sec 23	line 21f in column B and column C. Go to Section B	•	L	•			
Sec 23 24	line 21f in column B and column C. Go to Section B	••	L	•••			
Sec 23 24	line 21f in column B and column C. Go to Section B	••	L	<!--</td--><td></td><td>. •</td><td></td>		. •	
Sec 23 24 25	line 21f in column B and column C. Go to Section B		L	•••		. •	
Sec 23 24 25	line 21f in column B and column C. Go to Section B		L	•••		. •	
23 24 25 26 27	line 21f in column B and column C. Go to Section B		L	•••		. •	
Sec 23 24 25 26 27 28	line 21f in column B and column C. Go to Section B		L	•••		. •	
Sec 23 24 25 26 27 28 29	line 21f in column B and column C. Go to Section B		L	•••		. •	
Sec 23 24 25 26 27 28 29 30	line 21f in column B and column C. Go to Section B		L	•••		. •	
Sec 23 24 25 26 27 28 29 30	line 21f in column B and column C. Go to Section B		L	•••		. •	
25 26 27 28 29 30 31a	Line 21f in column B and column C. Go to Section B 22 Cetion B - Adjustments to Income 23 Educator expenses 23 Certain business expenses of reservists, performing artists, and fee-basis government officials 24 Health savings account deduction 25 Moving expenses 26 Deductible part of self-employment tax 27 Self-employed SEP, SIMPLE, and qualified plans 28 Self-employed health insurance deduction 29 Penalty on early withdrawal of savings 30 Alimony (b) Recipient's: SSN ●		L	•••			
23 24 25 26 27 28 29 30 31a	line 21f in column B and column C. Go to Section B. 22 23 Certain B - Adjustments to Income Educator expenses . 23 Certain business expenses of reservists, performing artists, and fee-basis government officials . 24 Health savings account deduction . 25 Moving expenses . 26 Deductible part of self-employment tax . 27 Self-employed SEP, SIMPLE, and qualified plans . 28 Self-employed health insurance deduction . 29 Penalty on early withdrawal of savings . 30 Alimony (b) Recipient's: SSN Last name		L	•••			
23 24 25 26 27 28 29 30 31a 32 33	Line 21f in column B and column C. Go to Section B 22 Etion B - Adjustments to Income Educator expenses 23 Certain business expenses of reservists, performing artists, and fee-basis government officials 24 Health savings account deduction 25 Moving expenses 26 Deductible part of self-employment tax 27 Self-employed SEP, SIMPLE, and qualified plans 28 Self-employed health insurance deduction 29 Penalty on early withdrawal of savings 30 Alimony (b) Recipient's: SSN		L	••••••••••••••••••••••••••••••••••••••••••••••••••••••••			
25 26 27 28 29 30 31a 32 33 34	Line 21f in column B and column C. Go to Section B 22 Etion B - Adjustments to Income Educator expenses 23 Certain business expenses of reservists, performing artists, and fee-basis government officials 24 Health savings account deduction 25 Moving expenses 26 Deductible part of self-employment tax 27 Self-employed SEP, SIMPLE, and qualified plans 28 Self-employed health insurance deduction 29 Penalty on early withdrawal of savings 30 Alimony (b) Recipient's: SSN		L	<!--</td--><td></td><td></td><td></td>			
25 26 27 28 29 30 31a 32 33 34	Line 21f in column B and column C. Go to Section B 22 Etion B - Adjustments to Income Educator expenses 23 Certain business expenses of reservists, performing artists, and fee-basis government officials 24 Health savings account deduction 25 Moving expenses 26 Deductible part of self-employment tax 27 Self-employed SEP, SIMPLE, and qualified plans 28 Self-employed health insurance deduction 29 Penalty on early withdrawal of savings 30 Alimony (b) Recipient's: SSN		L	••••••••••••••••••••••••••••••••••••••••••••••••••••••••			
23 24 25 26 27 28 29 30 31a 32 33 34 35	Line 21f in column B and column C. Go to Section B 22 Etion B - Adjustments to Income Educator expenses 23 Certain business expenses of reservists, performing artists, and fee-basis government officials 24 Health savings account deduction 25 Moving expenses 26 Deductible part of self-employment tax 27 Self-employed SEP, SIMPLE, and qualified plans 28 Self-employed health insurance deduction 29 Penalty on early withdrawal of savings 30 Alimony (b) Recipient's: SSN		L	<!--</td--><td></td><td></td><td></td>			
23 24 25 26 27 28 29 30 31a 32 33 34 35	Line 21f in column B and column C. Go to Section B 22 Etion B - Adjustments to Income Educator expenses 23 Certain business expenses of reservists, performing artists, and fee-basis government officials 24 Health savings account deduction 25 Moving expenses 26 Deductible part of self-employment tax 27 Self-employed SEP, SIMPLE, and qualified plans 28 Self-employed health insurance deduction 29 Penalty on early withdrawal of savings 30 Alimony (b) Recipient's: SSN		L	<!--</td--><td></td><td></td><td></td>			
23 24 25 26 27 28 29 30 31a 32 33 34 35	Line 21f in column B and column C. Go to Section B 22 Etion B - Adjustments to Income Educator expenses 23 Certain business expenses of reservists, performing artists, and fee-basis government officials 24 Health savings account deduction 25 Moving expenses 26 Deductible part of self-employment tax 27 Self-employed SEP, SIMPLE, and qualified plans 28 Self-employed health insurance deduction 29 Penalty on early withdrawal of savings 30 Alimony (b) Recipient's: SSN		L	<!--</td--><td></td><td></td><td></td>			
25 26 27 28 29 30 31a 32 33 34 35	Line 21f in column B and column C. Go to Section B 22 Etion B - Adjustments to Income Educator expenses 23 Certain business expenses of reservists, performing artists, and fee-basis government officials 24 Health savings account deduction 25 Moving expenses 26 Deductible part of self-employment tax 27 Self-employed SEP, SIMPLE, and qualified plans 28 Self-employed health insurance deduction 29 Penalty on early withdrawal of savings 30 Alimony (b) Recipient's: SSN		L	<!--</td--><td></td><td></td><td></td>			

Part II Adjustments to Federal Itemized Deductions	553	3-39-5912
38 Federal itemized deductions. Enter the amount from federal Schedule A (Form 1040), lines 4, 9, 15, 19, 20, 27, and 28	◎ 38	39,795.
General Sales Tax), and line 8 (foreign income taxes only). See instructions		1,811.
40 Subtract line 39 from line 38	… ③ 40	37,984.
41 Other adjustments including California lottery losses. See instructions. Specify	• 41	
42 Combine line 40 and line 41	…	37,984.
43 Is your federal AGI (Form 540, line 13) more than the amount shown below for your filing status? Single or married/RDP filing separately. \$172,615 Head of household \$258,927 Married/RDP filing jointly or qualifying widow(er) \$345,235 No. Transfer the amount on line 42 to line 43.		
Yes. Complete the Itemized Deductions Worksheet in the instructions for Schedule CA (540), line 43	● 43	37,984.
44 Enter the larger of the amount on line 43 or your standard deduction listed below Single or married/RDP filing separately	_	
Transfer the amount on line 44 to Form 540, line 18	…⊚ 44	37,984.

CALIFORNIA AMOUNTS

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at www.irs.gov/form1040.

OMB No. 1545-0074 2013

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

AKSHAI K & CHANCHAL RUNCHAL

Your social security no. 553-39-5912

ŀ	Part I Income or Loss From Rental Real	Esta	ate and Royaltie	S No	te . If you are in the l	business of	f renting p	personal	property,
	use Schedule C or C-EZ (see instructions). It	_				oss from Fo	orm 4835	on page	2, line 40
Α	Did you make any payments in 2013 that would requi		u to file Form(s) 1099)? (see	instructions)			Yes	No
В	If "Yes," did you or will you file all required Forms 109							Yes	No
_1	a Physical address of each property (street, city, stat								
_	A 3106 INGLEWOOD BLVD LOS A								
	4416 KATHERINE AVE SHERMA			23					
	3817 MINERVA LOS ANGELES			1				1	
1	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Fair Rental Days	Person		Q	JV
	(from list below) above, report the nur personal use days. C	/S							
	enly if you most the			A	365 365			-	
	a qualified joint ventu			В	365			-	
				С					
-:	e of Property:	· r	Danital E Land		7 O-14 D4	1			
1	Single Family Residence 3 Vacation/Short-T	erm ı		ı.:	7 Self-Rent				
2	Multi-Family Residence 4 Commercial		6 Royal	ues	8 Other (de	scribe)		С	
3	Pente received	3	65 , 950.		31,800				
4	Rents received	4	00,000.		31,000	•			-
	enses:								+
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7							
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11							
12	Mortgage interest paid to banks, etc.(see instructions)	12							
13	Other interest	13							
14	Repairs	14							
15	Supplies	15							
16	Taxes	16							
17	Utilities	17							
18	Depreciation expense or depletion	18	6,898.		11,479		4	,022	
19	Other (list) ▶	19							
20	Total expenses. Add lines 5 through 19	20	23,236.		50,662	•	4	, 557	•
21	Subtract line 20 from line 3 (rents) and/or 4								
	(royalties). If result is a (loss), see instructions		40 814		(10 000				
	to find out if you must file Form 6198	21	42,714.		(18,862	.)	(4	, 557	.)
22	Deductible rental real estate loss after				10 000		. 4		
	limitation, if any, on Form 8582 (see instructions)	22	<u>(</u>)	(18,862	•)	. 4	, 557	•)
	Total of all amounts reported on line 3 for all ren		•	238					
	Total of all amounts reported on line 4 for all roy		•	231		_			
	·		230						
d	Total of all amounts reported on line 18 for all pure 20 for a	-		236					
е 24	Total of all amounts reported on line 20 for all policeme. Add positive amounts shown on line 2				<i>‡</i>	. 24	22	,292	
25	Losses. Add royalty losses from line 21 and rental re		,		ter total losses here			,469	
26	Total rental real estate and royalty income of							, 103	- /
	If Parts II, III, IV, and line 40 on page 2 do not apply to	-	•						
	or Form 1040NR, line 18. Otherwise, include this amo	-				. 26	27	,823	

Part IV	Income or Loss Fro	m Real Estate N	Mortgage Investment Co	onduits (REMICs) - F	Residual Holder		
38	(a) Name	(b) Employer identification no.	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b		
39 Comb	bine columns (d) and (e) on	39					

43 Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules . . .

CA K-1

Partner's and Shareholder's K-1 Worksheet

_	^	4	•
		7	~
_	u	•	•

Na	me c	of partner	ship or S corporation:					EIN: 26	-042915	3	*All at ris	k
			OAK PROPER		~		CAIE		0 1 2 3 2 0	<u> </u>		No \square
			deral Form 6198								.00	110
			oss due to at-risk limita								···· <u></u>	
110		es 1 and		e 2	Lin	ne 3		Line 10		Line 12		
		ico i una	- Liii	0.2				LIIIO 10		LIIIO 12		
Pu	blic	Traded F	Partnership (PTP)				-				_	
			is from a PTP									□
			ivity was sold this yea									
			rom last year from: S									
		•	d to next year to: S				Form 4	4797: <u></u>				
			y Information									
			ordinary income, is a p	passive activity t	o this part	ner or share	holder					□
			ncome from rental rea									
			an amount on line 10									
				, ,							sive activi	
Ch	eck i	if 100% o	of the interest of this a	ctivity was sold i	in this tax	vear				•		´ H
			r loss on sale	•		-				sive:		
			oss on sale							sive:		
			n or loss on sale							sive:		
		g		Active Rental					Passive			
Ca	rryov	/er		Form 4797					Form 4797			
	•	rward		Form 4797					Form 4797			
			I	<u> </u>		Fede	eral	Califo		Total amount		California
Р	S		Type			amo	unt	adjustr	ment	using CA law		Source
1	1	Ordinary	y business income or I	loss				•				
2	2		al real estate income		ľ	40,	538.			40,538		
3	3	Other ne	et rental income or los	ss								
4		Guarant	eed payments to parti	ners								
5	4	Interest	income									
6	5	Dividend	ds		[
7	6	Royaltie	s									
8	7	Net sho	rt term capital gain or	loss								
9	8	Net long	g term capital gain or l	oss								
10	9	Net Sec	tion 1231 gain or loss									
11a	10a	Other po	ortfolio income or loss									
12	11	Expense	e deduction for recove	ery property								
13a			ole contributions									
b			ent interest expense.									
d			ons - portfolio income									
е			eductions									
			ome housing credit .									
C			related to rental real e									
d			related to other rental									
f			redits									
<u>g</u>		•	s credit							Con Donnier		
			ation adjustment on p							See Passive		
b			d gain or loss							Activity Worksheet		
f	ч	Accelera	ated depreciation pre-	1301		ssive Activi				AAOI K211661		
}	Snl	it the Fed	deral amount from you	ır California K-1		SSIVE ACTIVI	LY VVOIRSI	Ordin	nary	Active		Passive
			e categories listed here					nonpa	,	rental		activities
}			ation adjustment post-					попра	00140	TOTILAI		GOUVIUGO
		•	d gain or loss									
		•	ated depreciation, pre-									
	•		ar AMT unallowed los				1					
		•	rrvforward to 2013									

CA K-1

Partner's and Shareholder's K-1 Worksheet

_	^	4	•
		7	~
_	u	•	•

Na	me c	of partner	ship or S corporation:					EIN: 26	-042915	3	*All at ris	k
			OAK PROPER		~		CAIE		0 1 2 3 2 0	<u> </u>		No \square
			deral Form 6198								.00	110
			oss due to at-risk limita								···· <u></u>	
110		es 1 and		e 2	Lin	ne 3		Line 10		Line 12		
		ico i una	- Liii	0.2				LIIIO 10		LIIIO 12		
Pu	blic	Traded F	Partnership (PTP)				-				_	
			is from a PTP									□
			ivity was sold this yea									
			rom last year from: S									
		•	d to next year to: S				Form 4	4797: <u></u>				
			y Information									
			ordinary income, is a p	passive activity t	o this part	ner or share	holder					□
			ncome from rental rea									
			an amount on line 10									
				, ,							sive activi	
Ch	eck i	if 100% o	of the interest of this a	ctivity was sold i	in this tax	vear				•		´ H
			r loss on sale	•		-				sive:		
			oss on sale							sive:		
			n or loss on sale							sive:		
		g		Active Rental					Passive			
Ca	rryov	/er		Form 4797					Form 4797			
	•	rward		Form 4797					Form 4797			
			I	<u> </u>		Fede	eral	Califo		Total amount		California
Р	S		Type			amo	unt	adjustr	ment	using CA law		Source
1	1	Ordinary	y business income or I	loss				•				
2	2		al real estate income		ľ	40,	538.			40,538		
3	3	Other ne	et rental income or los	ss								
4		Guarant	eed payments to parti	ners								
5	4	Interest	income									
6	5	Dividend	ds		[
7	6	Royaltie	s									
8	7	Net sho	rt term capital gain or	loss								
9	8	Net long	g term capital gain or l	oss								
10	9	Net Sec	tion 1231 gain or loss									
11a	10a	Other po	ortfolio income or loss									
12	11	Expense	e deduction for recove	ery property								
13a			ole contributions									
b			ent interest expense.									
d			ons - portfolio income									
е			eductions									
			ome housing credit .									
C			related to rental real e									
d			related to other rental									
f			redits									
<u>g</u>		•	s credit							Con Donnier		
			ation adjustment on p							See Passive		
b			d gain or loss							Activity Worksheet		
f	ч	Accelera	ated depreciation pre-	1301		ssive Activi				AAOI K211661		
}	Snl	it the Fed	deral amount from you	ır California K-1		SSIVE ACTIVI	LY VVOIRSI	Ordin	nary	Active		Passive
			e categories listed here					nonpa	,	rental		activities
}			ation adjustment post-					попра	00140	TOTILAI		GOUVIUGO
		•	d gain or loss									
		•	ated depreciation, pre-									
	•		ar AMT unallowed los				1					
		•	rrvforward to 2013									

CALIFORNIA AMOUNTS

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

▶ Attach to Form 1040, 1040NR, or Form 1041. ▶ Information about Schedule E and its separate instructions is at www.irs.gov/form1040.

OMB No. 1545-0074

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return AKSHAI K & CHANCHAL RUNCHAL

Your social security no. 553-39-5912

		41	Franc Dandal Daal	F-4.	te and Davidia						
F	ar		From Rental Real C-EZ (see instructions). I		_		-				
_	Di	d you make any payments i		_				055 IIOIII F	01111 4635	Yes	No
		'Yes," did you or will you file	·	-	a to life Form(s) 1098	9: (566	instructions)		H	Yes	I No
1					code)					100	110
_	1a Physical address of each property (street, city, state, Zip code) A 12029 CLOVER AVE LOS ANGELES CA 90066										
	B 2408 OCEAN PARK SANTA MONICA CA 90405										
	C 14133 CALVERT STREET VAN NUYS CA 91411-										
1	1b Type of Property 2 For each rental real estate property listed Fair Rental Persona										2.11/
	(from list below) above, report the number of fair rental and Days Days										JN
-	1	1	personal use days. (Α	182				
	3	2	only if you meet the a qualified joint vent			В	365				
(2	a qualifica joint vent	uic. O	ce manuchona.	С	275				
Гуре		Property:									
1		ngle Family Residence	3 Vacation/Short-1	erm l			7 Self-Ren				
2	M	ulti-Family Residence	4 Commercial		6 Roya	Ities	8 Other (de	escribe)			
nco	_	L.	Properties:		A		B		110	C	
3		ents received		3	17,700.		136,115	•	119	, 673	3.
4		oyalties received		4							
Expe				5							
5 6		uto and travel (see instru		6							
7		eaning and maintenance	,	7							
8		ommissions		8							
9		surance		9							
10		egal and other profession		10							
11		-		11							
12		ortgage interest paid to ban		12							
13		ther interest		13							
14				14							
15				15							
16	Ta	ixes		16							
17	U	ilities		17							
18	D	epreciation expense or d	lepletion	18	1,700.				19	,320).
19		ther (list) ▶		19			6 , 126				
20		tal expenses. Add lines	•	20	21,080.		112,503		123	,400).
21		ubtract line 20 from line 3	• •								
	•	oyalties). If result is a (los	•		(2, 200	,	00 610			705	, ,
		find out if you must file		21	(3,380.)	23,612	•	(3	, 727	′•)
22		eductible rental real esta			2 200				, 🤈	705	,
.		nitation, if any, on Form		22	(3,380.)	(3	,727	•)
		tal of all amounts report			•	238					
		tal of all amounts report	-		•			-			
_	c Total of all amounts reported on line 12 for all properties										
	d Total of all amounts reported on line 18 for all properties										
24	e Total of all amounts reported on line 20 for all properties										
25		osses. Add royalty losses t			•		ter total losses here	-	(
26		otal rental real estate a							`		
		Parts II, III, IV, and line 40 c		-	-						
		Form 1040NR, line 18, Oth		-				. 26			

CALIFORNIA AMOUNTS

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

► Attach to Form 1040, 1040NR, or Form 1041.

▶ Information about Schedule E and its separate instructions is at www.irs.gov/form1040.

OMB No. 1545-0074 **2013**

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

AKSHAI K & CHANCHAL RUNCHAL

Your social security no. 553-39-5912

Pa		From Rental Real		_		-					
		C-EZ (see instructions). I	_				oss from F	orm 4835		age	
	oid you make any payments			u to file Form(s) 1099?	(see	instructions)			Yes	\blacksquare	No
	"Yes," did you or will you fil			1 - \					Yes	Ш	No
<u>1a</u>	Physical address of each				1 2 /	1 2					
_ <u>A</u>	8932/8938 COL										
B	14523 TUPPER	STREET PANOR	AMA.	CITY CA 91	402	<u> </u>					
C	T (D)	0 5 1 11 1				E.1. B (.)			I		
1b	Type of Property	2 For each rental real above, report the nu				Fair Rental		nal Use QJV			JV
	(from list below)	personal use days. (the O IV hav	_	Days 8.0	Da	ıys		_	
_ <u>A</u>	2	only if you meet the		omente to file on	A	365				-	_
<u>B</u>	۷	a qualified joint vent	ure. S	ee instructions.	B C	303				+	_
	of Duomonton				C					L	
	of Property:	2 \/===ti==/Ch==t 7	Faa. 1	Dantal E land		7 Calf Dans	1				
	Single Family Residence		ierm i			7 Self-Rent					
	Multi-Family Residence	4 Commercial		6 Royalti	es	8 Other (de	scribe)		С		
ncom 3 F		Properties	3	15,717.	1	133,162				—	
			4	10,717.		133,102	•				_
Exper	Royalties received		4								_
-			5								
	Auto and travel (see instri		6								-
	Cleaning and maintenance	•	7								-
	Commissions		8								-
	nsurance		9								-
	egal and other professio		10								_
			11								_
	Nortgage interest paid to bar		12								-
			13								-
			14								
	·		15								
			16								-
			17								
	Depreciation expense or		18	4,927.		21,519					_
	Other (list) ▶		19	, , , , , , , , , , , , , , , , , , , ,		2,828					
	otal expenses. Add lines	5 through 19	20	45,660.		111,196					
	Subtract line 20 from line	_		,		•					
	royalties). If result is a (lo										
,	o find out if you must file	,	21	(29,943.)		21,966					
	Deductible rental real esta										
li	mitation, if any, on Form	8582 (see instructions)	22	(29,943.)		()	()
23a ⊺	otal of all amounts repor	ted on line 3 for all rei	ntal p	roperties	238	3					
	otal of all amounts repor		-	•	23k						
сΤ	otal of all amounts repor	ted on line 12 for all p	roper	ties	230						
dΠ	otal of all amounts repor	ted on line 18 for all p	roper	ties	230	t					
e 7	otal of all amounts repor	ted on line 20 for all p	roper	ties	236	9					
24 I	Income. Add positive amounts shown on line 21. Do not include any losses										
25 L	.osses. Add royalty losses	from line 21 and rental i	real es	state losses from line 2	2. En	iter total losses here	25	()
26 1	otal rental real estate a	and royalty income o	r (los	ss).Combine lines 24 a	and 2	5. Enter the result he	ere.				
l1	Parts II, III, IV, and line 40	on page 2 do not apply t	o you	, also enter this amour	nt on I	Form 1040, line 17,					
О	r Form 1040NR, line 18. Ot	herwise, include this am	ount ir	n the total on line 41 or	n pag	e 2	. 26				

CALIFORNIA FORM

TAXABLE YEAR

2013 Passive Activity Loss Limitations

3801

Attach	to Form 540, Long Form 540NR, Form 541, or Form 100S (S Corporatio	ns).				
` '	as shown on return		SSN, ITIN, FEIN, or C		•	n no.
	SHAI K & CHANCHAL RUNCHAL		553-39-5	91.	2	
Part I	•	ـ م ده	fore completion Doubl D		4	California amazunta
Donte	See the instructions for Worksheet 1 and Worksheet 3 for federal Form 89 al Real Estate Activities with Active Participation	582 DE	etore completing Part I. B	e su	re to I	use California amounts.
Kenta	ii Real Estate Activities with Active Participation					
1a /	Activities with net income from Worksheet 1, column (a)	1a	88,292	00		
1b ,	Activities with net loss from Worksheet 1, column (b)	1b	60,469	00		
1c	Prior year unallowed losses from Worksheet 1, column (c)	1c		00		
1d (Combine line 1a, line 1b, and line 1c				1d	27,82300
All O	her Passive Activities			•		
2a /	Activities with net income from Worksheet 2, column (a)	2a	81 , 076	00		
2b /	Activities with net loss from Worksheet 2, column (b)	2b		00		
2c	Prior year unallowed losses from Worksheet 2, column (c)	2c		00		
	Combine line 2a, line 2b, and line 2c				2d	81,07600
	Combine line 1d and line 2d. If the result is net income or zero, see the instru				•	100 0000
	ine 1d are losses, go to line 4. Otherwise, enter -0- on line 9 and go to line 10				3	108,89900
Part I	·					
	Enter all numbers in Part II as positive amounts. See instructions.					
4	Enter the smaller of losses from line 1d or line 3				4	00
5 6	Enter \$150,000. If married/RDP filing a separate return, see instructions Enter federal modified adjusted gross income, but not less than	5		00		
;	Zero. See instructions. If line 6 is equal to or more than line 5, skip line 7 and line 8, enter -0- on line 9, and then go to line 10. Otherwise, go to line 7	6		00		
7	Subtract line 6 from line 5	7		00		
8	Multiply line 7 by 50% (.50). Do not enter more than \$25,000				8	00
9	Enter the smaller of line 4 or line 8			•	9	00
Part I	II Total Losses Allowed					
10	Add the income, if any, from line 1a and line 2a and enter the total				10	169,36800
	Total losses allowed from all passive activities for 2013. Add line See the instructions on Page 2 to find out how to report the losses or			[11	60,46900
		,				

Underpayment of Estimated Tax by Individuals and Fiduciaries

CALIFORNIA FORM

5805

Attach this form to the back of your Form 540, Long Form 540NR, or Form 541. Also, check the box for underpayment of estimated tax located on Form 540, line 113; Long Form 540NR, line 123; or Form 541, line 42, whichever applies.

ээмэн эн тэн энэ нэ тэн энэ нэ тэн энэ нэ тэн эн э	
Name(s) as shown on return	SSN, ITIN, or FEIN
AKSHAI K & CHANCHAL RUNCHAL	553-39-5912
	•

IMPORTANT: In most cases, the Franchise Tax Board (FTB) can figure the penalty for you and you do not have to complete this form. See General Information B.

If you meet any of the following conditions, you do not owe a penalty for underpayment of estimated tax. Do not complete or file this form if:

- The amount of your tax liability (not including tax on lump-sum distributions) less credits (including the withholding credit) but not including estimated tax payments for either 2012 or 2013 was less than \$500 (or less than \$250 if married/RDP filing a separate return).
- Your 2012 return was for a full 12 months (or would have been if you were required to file) and you did not have any tax liability on that
- The amount of your withholding plus your estimated tax payments, if paid in the required installments, is at least 90% of the tax shown on your 2013 return or 100% of the tax shown on your 2012 return (110% if California adjusted gross income (AGI) was more than \$150,000 or \$75,000 if married/RDP filing a separate return) and you are not using the annualized income installment method. Taxpayers with California AGI equal to or greater than \$1,000,000 (or \$500,000 if married/RDP filing a separate return), must use the tax shown on their 2013 tax return if they do not meet one of the two conditions above.

Pa	art Questions. All filers must complete this part. Estates and Trusts, see General Information E.		
1	Are you requesting a waiver of the penalty? If "Yes," provide an explanation below and be sure to check the box on Form 540 Long Form 540NR, line 123; or Form 541, line 42. If you need additional space, attach a statement. See General Information C		X No
2	Did you use the annualized income installment method? If "Yes," see instructions for Part III and be sure to check the box on		
	Form 540, line 113; Long Form 540NR, line 123; or Form 541, line 42	2 Yes	X No
3	Was your California withholding not withheld in equal installments and are you able to show the actual amounts withheld per		
	period and the actual dates withheld?	3 ⊚	
	If "Yes," enter the actual uneven amounts withheld on the spaces provided below. The total of the four amounts must equal	al the total withh	nolding
	reported on Form 540, line 71 and line 73; Form 540NR, line 81 and line 83, or Form 541, line 29 and line 31.		
	4/15/13 ③ \$; 6/15/13 ④ \$; 9/15/13 ④ \$; 1/15/14 ④ \$ [
4	For estates and trusts: Was the date of death less than two years from the end of the taxable year? See General Information E	4 Yes	No

_	_	_	_	_	_	_		
_		$^{\circ}$	\sim	α	-5	$^{\circ}$	7	
٠)	٠)	``	_ >	9	- ')	9	- 1	/

Pai	rt II Required Annual Payment. All filers must complete this part.	
1	Current year tax. Enter your 2013 tax after credits. See instructions	1 1,888.00
2	Multiply line 1 by 90% (.90)	
3	Withholding taxes. Do not include any estimated tax payments on this line. See instructions	3 . 00
4	Subtract line 3 from line 1. If less than \$500 (or less than \$250 if married/RDP filing a separate return), stop here. You do not owe the penalty. Do not file form FTB 5805	1,888.00
	Enter the tax shown on your 2012 tax return. See instructions. (110% (1.10) of that amount if the adjusted gross income shown on that return is more than \$150,000, or if married/RDP filing a separate return for 2013, more than \$75,000).	e 5 340.00
6	Required annual payment. Enter the smaller of line 2 or line 5. (If your California AGI is equal to or greater than \$1,000,000/\$500,000 for married/RDP filing a separate return, use line 2)	6 340.00
	ort Method ution: See the instructions to find out if you can use the short method. If you answered ``Yes" to Question 2 in Part I, skill If you answered ``No" to Question 2 in Part I and you cannot use the short method, go to Worksheet II in the instru	p this part and go to Part III. uctions.
7	Enter the amount, if any, from Part II, line 3 above	
8	Enter the total amount, if any, of estimated tax payments you made	
9	Add line 7 and line 8	9 . 00
10	Total underpayment for the year. Subtract line 9 from line 6. If zero or less, stop here. You do not owe the penalty. Do not file form FTB 5805	. 00
11	Multiply line 10 by .02121370	. 00
12	 If the amount on line 10 was paid on or after 4/15/14, enter -0 If the amount on line 10 was paid before 4/15/14, enter the result of the following computation: 	
	Amount on Number of days paid line 10 X before 4/15/14 X .00008	. 00
13	PENALTY. Subtract line 12 from line 11. Enter the result here and on Form 540, line 113; Long Form 540NR, line 123; or Form 541, line 42. Also, check the box for ``FTB 5805." ▶	13 4.00

Name: AKSHAI K & CHANCHAL RUNCHAL

SSN: 553-39-5912

Figure Your Underpayment	(a)	(b)	(c)	(d)
Payment due dates	04/15/2013	06/15/2013	(c) 09/15/2013	01/15/2014
1 Required installments	102.	95.	03/13/2013	143.
2 Estimated tax paid and tax withheld				
3 Amount, if any, from line 9 of the previous column				
4 Add line 2 and line 3				
5 Add amounts on line 7 and line 8 of the previous column		102.	197.	197.
6 Subtract line 5 from line 4. If zero or less, enter zero				
7 If the amount on line 6 is zero, subtract line 4 from line 5.				
Otherwise, enter zero		102.	197.	
8 Underpayment	102.	95.	-	143.
9 Overpayment				

Rates are: 04/15/2013 to 06/30/2013 - 4%, 07/01/13 to 12/31/13 - 3%, 01/01/2014 to 04/15/2014 - 4%

Figure the Penalty

Figure the Penalty				1_	1_	_	
			Balance due	-	Days	-	
	Date of	Amount of	after	at	at	at	
	payment	payment	payment	4%	3%	4%	Penalty
First quarter							
Required payment			102.				
1st quarter payments			102.				
2nd quarter payments			102.				
3rd quarter payments			102.				
4th quarter payments			102.				
Paid with return	04/15/2014	102.		76	105		2.
Total penalty due for first quarter							2.
Second quarter							
Required payment			95.				
1st quarter payments			95.				
2nd quarter payments	06/15/2013		95.				
3rd quarter payments	09/15/2013		95.				
4th quarter payments	01/15/2014		95.				
Paid with return	04/15/2014	95.		15	105		1.
Total penalty due for second quarter							1.
Third quarter					•		
Required payment							
1st quarter payments	0.4/1 = /0.010						
2nd quarter payments	06/15/2013						
3rd quarter payments	00/15/0010						
4th quarter payments	04 /4 5 /0 04 4						
Paid with return	0.4./4.5./0.04.4						
Total penalty due for third quarter							
Fourth quarter							
Required payment			143.				
1st quarter payments			143.	1			
2nd quarter payments			143.	1			
3rd quarter payments			143.				
4th quarter payments			143.				
Paid with return	0 4 /4 5 / 0 0 4 4	143.			90		1.
Total penalty due for fourth quarter			I				
Penalty							4.
· · · · · · · · · · · · · · · · · · ·							1 •

S 1040 Oth	Schedule E - Li ner Rental and Roya	Properties	20
Other Expenses Type	A	В	С
SOC FEE		510.	
S LIC		171.	
MPUTER		575.	
C FEE		800.	
NK FEE		360.	
STAGE		60.	
FICE		2 650	
LICE		3,650.	
		6,126.	
	i		

	Schedule E - Line 19 Other Rental and Royalty Expenses Properties		
Other Expenses Type	A	В	С
ASH DUMPSTER		541.	<u> </u>
NK CHARGES		192.	
JSING PERMIT		610.	
ALS 50%		766.	
STAGE		65.	
SC MEDICAL		138.	
FICE		32.	
IPPING		39.	
PPLIES		445.	
		2,828.	
		2,020.	
	•	I	