

17037 CHATSWORTH ST STE 202 Granada Hills, CA 91344 JARORAEA@GMAIL.COM Phone: (818)923-5038 | Fax: (818)923-5053

May 24, 2017

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

Subject: Preparation of Your 2016 Tax Returns

#### AKSHAI K & CHANCHAL RUNCHAL:

Thank you for choosing J ARORA INC to assist you with your 2016 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide.

We will prepare your 2016 federal and state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will, of course, inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Please call us if you have concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee will be based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. To the extent permitted by state law, an interest charge may be added to all accounts not paid within thirty (30) days.

We will return your original records to you at the end of this engagement. You should securely store these records, along with all supporting documents, canceled checks, etc., as these items may later be needed to prove accuracy and completeness of a return. We will retain copies of your records and our work papers for your engagement for seven years, after which these documents will be destroyed.

Our engagement to prepare your 2016 tax returns will conclude with the delivery of the completed returns to you (if paper-filing), or your signature and our subsequent submittal of your tax return (if e-filing). If you have not selected to e-file your returns with our office, you will be solely responsible to file the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, please sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.

We appreciate your confidence in us. Please call (818)923-5038 if you have questions.							
Sincerely,							
JAGJIT SINGH ARORA J ARORA INC							
(Both spouses must sign for preparation of joint returns.)							
Accepted By:							
Taxpayer							
S							
Spouse							
Date							

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#### AKSHAI K & CHANCHAL RUNCHAL:

Return Type	Refund/Balance Due	Transaction Method
Federal Income Tax	\$9,875 Refund	Receive a check
California Income Tax	\$21,327 Refund	Receive a check

The following return(s) will be e-filed and do not need to be mailed to the taxing authority:

Federal Income Tax California Income Tax

#### **Federal Income Tax**

Quarter	<b>Estimate Due</b>	<b>Due Date</b>	Transaction Method
1st	\$19,110	April 18, 2017	Mail a check
2nd	\$19,110	June 15, 2017	Mail a check
3rd	\$19,110	September 15, 2017	Mail a check
4th	\$19,110	January 16, 2018	Mail a check

Sincerely,

JAGJIT SINGH ARORA J ARORA INC

17037 CHATSWORTH ST STE 202 Granada Hills, CA 91344 JARORAEA@GMAIL.COM Phone: (818)923-5038 | Fax: (818)923-5053

May 24, 2017

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

Your privacy is important to us. Please read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- \* Interviews regarding your tax situation
- \* Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- \* Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, please contact us.

Sincerely,

JAGJIT SINGH ARORA J ARORA INC

17037 CHATSWORTH ST STE 202 Granada Hills, CA 91344 JARORAEA@GMAIL.COM Phone: (818)923-5038 | Fax: (818)923-5053

Statement of Account

Date	Invoice #
May 24, 2017	

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

Description	Fee	Payments	Balance
Tax Preparation	775.00		775.00
		<b>Total Due</b>	775.00

Send payments to: J ARORA INC

17037 CHATSWORTH ST STE 202

Granada Hills, CA 91344

Send questions to JARORAEA@GMAIL.COM or call (818)923-5038.

Thank you for your business!

<u> </u>	U.S.	Individual Incom	e Tax	Return	1 2016	ON	IB No. 1545-0	0074 IRS	Use Only	-Do not w	rite or staple ir	n this space.
		6, or other tax year beginning			, 2016, ending		, 20				te instructio	
Your first name and in	nitial		Last name						Your	social se	curity numbe	r
AKSHAI I	K		RUNC	CHAL						553-	39-591	12
If a joint return, spous	se's first nai	me and initial	Last name						Spot	ıse's soci	al security nu	ımber
_CHANCHA			RUNC	CHAL					,	573 <b>-</b>	41 <b>-</b> 520	00
Home address (numb	er and stre	et).						Apt. no.				N(s) above
_1931 ST										and c	n line 6c aı	re correct.
•		nd ZIP code. If you have a foreign add	lress, also c	omplete spac	es below (see instruct	tions).			- 1		tial Election C	
LOS ANGI				CA		<u>9007</u>	<u>7-232</u>				ou, or your spo to go to this fu	
Foreign country name	е			Foreign pr	ovince/state/county		Foreign	postal code		below wil	l not change y	
	_										You	Spouse
Filing 1	Single							ualifying pers				
Status 2	X Marrie	ed filing jointly (even if only on	e had inc	ome)		nild's name		,		,		
Check only one 3 L	_	filing separately. Enter spouse's SSN	above		, TT.							
box.		name here.						with depe	ndent c	hild		
<b>Exemptions</b>	6a	X Yourself. If someone c			•		рох ба			. }	Boxes c on 6a an	
-	b	X Spouse	<u></u>	· · · · ·		<del></del>			(4) Chk	if child un	No. of cl	
	С	Dependents:			(2) Dependent's social security numb		(3) Depen relationship		age 17	qualifying	<b>A</b>	with you
<u>(</u>	(1) First nar	me Last name							(see ir	tax credi		ot live with to divorce
If more than four										<del> </del>	or separ	
dependents, see										H	_ `	ents on 6c
instructions and check here										H		red above
check here	d	Total number of exemptions	claimed							<del></del> _	Add nun on lines	
		Wages, salaries, tips, etc. A							1	7	above	
Income	, 8a	Taxable interest. Attach S		` '	d					8a		674
	b	Tax-exempt interest. Do n		•		8b			1			071
Attach Form(s)	9a	Ordinary dividends. Attach								9a		59
W-2 here. Also attach Forms	b											
W-2G and	10	Taxable refunds, credits, or offsets of state and local income taxes								10		8,469
1099-R if tax	11	Alimony received								11		0,103
was withheld.	12	Business income or (loss).	Attach So	chedule C	or C-EZ					12		
	13	Capital gain or (loss). Attac				ed, chec	k here	<b>&gt;</b>		13		
If you did not get a W-2,	14	Other gains or (losses). At	ach Form	1 4797						14		
see instructions.	15a	IRA distributions	.   15a			<b>b</b> Tax	able amo	unt	[	15b		6,111
	16a	Pensions and annuities .	. 16a			<b>b</b> Tax	able amo	unt	[	16b		24,089
	17	Rental real estate, royalties	, partners	hips, S co	rporations, trusts	_ , etc. Att	ach Sched	dule E	[	17	2	62,232
	18	Farm income or (loss). Atta	ch Sched	dule F .						18		
	19	Unemployment compensat	on • •							19		
	20 a	Social security benefits .	- 20a		27,546	<b>b</b> Tax	able amo	unt • •	[	20b		23,414
	21	Other income								21		
	22	Combine the amounts in the fa					total incom	ie · · ·	. 🕨	22	32	25 <b>,</b> 048
Adjusted	23	= addate: expenses				23						
Gross	24	Certain business expenses of										
Income		fee-basis government officials.										
	25	Health savings account dec										
	26	Moving expenses. Attach F							-			
	27	Deductible part of self-empl	•			27			-			
	28	Self-employed SEP, SIMPL				-			-			
	29	Self-employed health insura										
	30 31a	Penalty on early withdrawal				30 31a			-			
	31a 32	Alimony paid <b>b</b> Recipient'				31a 32			-			
	33	Student loan interest deduc										
	33 34	Tuition and fees. Attach For				-						
	3 <del>4</del> 35	Domestic production activit										
	36	·			1 FORM 8903					36		
	36 37	Add lines 23 through 35 Subtract line 36 from line 2							-	37	ۍ <u>.</u>	25,048
	91											

Form 1040 (2016	) AKS	SHAI K & CHANCHAL RUNCHAL	553-	-39-5912 Page <b>2</b>
Tax and	38	Amount from line 37 (adjusted gross income)	38	325,048
Credits	39a	Check <b>f</b> X <b>You</b> were born before January 2, 1952, Blind. <b>\ Total boxes</b>		
Ordano		if: X Spouse was born before January 2, 1952, Blind. J checked ▶ 39a 2		
L	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here • • • • • 39b		
Standard Deduction	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	63,439
for -	41	Subtract line 40 from line 38	41	261,609
People who	42	<b>Exemptions.</b> If line 38 is \$155,650 or less, multiply \$4,050 by the number on line 6d. Otherwise, see instructions	42	7,128
check any box on line	43	<b>Taxable income.</b> Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- · · · ·	43	254,481
39a or 39b <b>or</b> who can be	44	Tax (see instructions). Check if any from: a Form(s) 8814 b Form 4972 c	44	59,381
claimed as a	45	Alternative minimum tax (see instructions). Attach Form 6251	45	7,222
dependent, see	46	Excess advance premium tax credit repayment. Attach Form 8962	46	.,
instructions.	47	Add lines 44, 45, and 46	47	66,603
All others:	48	Foreign tax credit. Attach Form 1116 if required 48	7,	00/003
Single or	49	Credit for child and dependent care expenses. Attach Form 2441 49	-	
Married filing separately,	50	· · · · · · · · · · · · · · · · · · ·	$\dashv$	
\$6,300			-	
Married filing jointly or	51	Retirement savings contributions credit. Attach Form 8880 · · · 51	-	
Qualifying	52	Child tax credit. Attach Schedule 8812, if required	-	
widow(er), \$12,600	53	Residential energy credit. Attach Form 5695 53	_	
Head of	54	Other credits from Form: a 3800 b 8801 c 54		
household,	55	Add lines 48 through 54. These are your <b>total credits</b>	55	
\$9,300	<sup>」</sup> 56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	66,603
	57	Self-employment tax. Attach Schedule SE	57	
Other	58	Unreported social security and Medicare tax from Form: <b>a</b> 4137 <b>b</b> 8919 · · · ·	58	
Taxes	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required ••••	59	
	60 a	Household employment taxes from Schedule H · · · · · · · · · · · · · · · · · ·	60a	
	b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	
	61	Health care: individual responsibility (see instructions) Full-year coverage	61	
	62	Taxes from: a Form 8959 b X Form 8960 c Instructions; enter code(s)	62	2,852
	63	Add lines 56 through 62. This is your <b>total tax</b>	63	69,455
Payments	64	Federal income tax withheld from Forms W-2 and 1099 64		·
	65	2016 estimated tax payments and amount applied from 2015 return · · · 65 31,820		
If you have a	 66а	Earned income credit (EIC) 66a		
qualifying child, attach	b	Nontaxable combat pay election · · ·   66b		
Schedule EIC.	67	Additional child tax credit. Attach Schedule 8812 67		
	68	American opportunity credit from Form 8863, line 8 68		
	69	Net premium tax credit. Attach Form 8962 69	-	
	70	Amount paid with request for extension to file		
	71	Excess social security and tier 1 RRTA tax withheld 71	-	
	72	Credit for federal tax on fuels. Attach Form 4136	-	
	73		-	
				00 000
Refund	74	Add lines 64, 65, 66a, and 67 through 73. These are your <b>total payments</b>	74	80,000
Keruna	75 70-	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you <b>overpaid</b>	75	10,545
Discot I "C	76a	Amount of line 75 you want <b>refunded to you.</b> If Form 8888 is attached, check here	76a	9,875
Direct deposit? See	<b>–</b> b	Routing number X X X X X X X X X X X C Type: Checking Savings		
instructions.	► d	Account number		
Amount	77	Amount of line 75 you want applied to your 2017 estimated tax · · · > 77	-	
Amount	78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	78	
You Owe	79	Estimated tax penalty (see instructions)	_	
Third Party	Do yo Design			plete below. X No
Designee	name	no. number (PIN)		Desired and
Sign		enalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, the By list all amount and sources of income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all information of which pr	-	
Here .		gnature Date Your occupation		Daytime phone number
Joint return? See	959			310-471-5013
instructions. Keep a copy for		e's signature. If a joint return, <b>both</b> must sign.  Date Spouse's occupation		Identity Protection PIN (see inst.)
your records.	152			
	Prepar	Check Check	i if	PTIN
Paid			mployed	P00186900
Preparer	Print/T	ype preparer's name JAGJIT SINGH ARORA		
Use Only	Firm's		EIN 🕨	32-0225393
200 <b>2y</b>	Firm's	address ► 17037 CHATSWORTH ST STE 202		
		Granada Hills, CA 91344 Phon	e no. 81	18-923-5038
EEA				Form <b>1040</b> (2016)

#### **SCHEDULE A** (Form 1040)

**Itemized Deductions** 

Information about Schedule A and its separate instructions is at www.irs.gov/schedulea.

OMB No. 1545-0074

Attachment Sequence No.

Department of the Treasury Internal Revenue Service (99) Attach to Form 1040. Name(s) shown on Form 1040 Your social security number 553-39-5912 CHANCHAL RUNCHAL AKSHAI K & Caution: Do not include expenses reimbursed or paid by others. Medical and dental expenses (see instructions) 1 Medical 2 Enter amount from Form 1040, line 38 and Dental Multiply line 2 by 10% (0.10). But if either you or your spouse was **Expenses** 3 born before January 2, 1952, multiply line 2 by 7.5% (0.075) instead Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-. . . . . . . . . . . . . . . 4 State and local (check only one box): Taxes You Paid Income taxes, or 28,829 **b** General sales taxes 6 Real estate taxes (see instructions) 6 17,882 7 Personal property taxes Other taxes. List type and amount 500 8 500 9 Add lines 5 through 8 9 47,211 Home mortgage interest and points reported to you on Form 1098 10 16,640 Interest Home mortgage interest not reported to you on Form 1098. If paid You Paid to the person from whom you bought the home, see instructions Note: and show that person's name, identifying no., and address Your mortgage interest deduction may be limited (see 11 instructions). 12 Points not reported to you on Form 1098. See instructions for 12 Mortgage insurance premiums (see instructions) 13 14 14 Investment interest. Attach Form 4952 if required. (See instructions.) 16,640 15 15 Gifts by cash or check. If you made any gift of \$250 or more, Gifts to see instructions . . . . . . . . . . . . . . . . . . . 16 Charity 17 Other than by cash or check. If any gift of \$250 or more, see If you made a gift and got a instructions. You must attach Form 8283 if over \$500 17 benefit for it. 18 18 see instructions. 19 19 Add lines 16 through 18 Casualty and Theft Losses Casualty or theft loss(es). Attach Form 4684. (See instructions.) 20 20 . . . . . . . . . . . . . . . Unreimbursed employee expenses - job travel, union dues, job Job Expenses education, etc. Attach Form 2106 or 2106-EZ if required. (See instr.) and Certain Miscellaneous 21 **Deductions** 750 22 Tax preparation fees ...... 22 Other expenses - investment, safe deposit box, etc. List type and amount 23 750 24 Add lines 21 through 23 24 25 Enter amount from Form 1040, line 38 25 6,501 Multiply line 25 by 2% (0.02) 26 27 0 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-Other - from list in instructions. List type and amount Other Miscellaneous **Deductions** 28 Is Form 1040, line 38, over \$155,650? Total No. Your deduction is not limited. Add the amounts in the far right column Itemized **Deductions** for lines 4 through 28. Also, enter this amount on Form 1040, line 40. WK.A.. 29 63,439 Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter. 30 If you elect to itemize deductions even though they are less than your standard 

# 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/schedulee.

2016

OMB No. 1545-0074

Attachment Sequence No. 1

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

AKSHAI K & CHANCHAL RUNCHAL

Your social security number 553 - 39 - 5912

Pa	art I Income or Loss From Rental Real Estate and Royalties N		-						
	Schedule C or C-EZ (see instructions). If you are an individual				r loss from <b>Form</b>	1 4835 <sub>-</sub>		e 2, lir	
	Did you make any payments in 2016 that would require you to file Form(s)	1099?	(see i	nstructions)		Į	_  Yes	Ļ	No
	If "Yes," did you or will you file required Forms 1099?	L	Yes	L	<u>No</u>				
	1a Physical address of each property (street, city, state, ZIP code)								
	A 3106 INGLEWOOD BLVD, LOS ANGELES, CA 90066								
	B 12029 CLOVER AVE, LOS ANGELES, CA 90066								
	C 105 ST STEPHENS, Tyrone, GA 30290								
1	1b Type of Property 2 For each rental real estate property listed above, report the number of fair rental ar			Fair Renta			1	Q.	JV
	personal use days. Check the QJV box			Days	D:	ays			
	A 1 only if you meet the requirements to file a qualified joint venture. See instructions		Α	365		0			<u> </u>
	<u> </u>	•	В	365		0			<u> </u>
	C 4		С	240		0		L	
	pe of Property:			- 0 11					
	3	Land		7 Self-l					
		Roya	Ities		r (describe)				
	ncome: Properties:			<b>A</b>	<b>B</b>	0.0	-1		070
3	Rents received	3		66,000	68,2	00		54,	273
4	Royalties received	4							
-	penses:	_		705		~ c			705
5	Advertising	5		725		26			725
6	Auto and travel (see instructions)	6		992		90			104
7	Cleaning and maintenance	7		2,513	4,0	25		/ ,	352
8	Commissions	8		705		1.0			0.40
9	Insurance	9		785 646			3,043		
10	Legal and other professional fees	10		271		260		924 4 <b>,</b> 086	
11	Management fees	11		1 (50					
12	Mortgage interest paid to banks, etc. (see instructions)	12		1,659		4 -		43,	540
13	Other interest · · · · · · · · · · · · · · · · · · ·	13		10		45			105
14	· ·	14		6,057	4,2			ر د	216
15	Supplies	15		638	1,1			2.0	601
16	Taxes	16		5,091 1,131	6,0			∠8 <b>,</b>	071
17	· · · · · · · · · · · · · · · · · · ·	17		1,131		93		26	717
18	Depreciation expense or depletion	18		6 <b>,</b> 898	8,4	88		∠0,	204
19	Other (list)  Total expenses. Add lines 5 through 19	19		26,770	26,8	61	1	2.1	688
20 21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	20		20,770	20,0	01		<b>,</b>	000
21	result is a (loss), see instructions to find out if you must								
	file Form 6198 · · · · · · · · · · · · · · · · · · ·	21		39,230	41,3	30		3 2	585
22	Deductible rental real estate loss after limitation, if any,	21		39,230	41,3	39		J Z ,	303
22	on Form 8582 (see instructions)	22	,	,	,		,		١
232	a Total of all amounts reported on line 3 for all rental properties			23a	725,3	33			,
2Ja b				23b	723,3	0			
				23c	176,2	_			
c d				23d	99,7				
				23a 23e	605,3				
е 24	Income. Add positive amounts shown on line 21. <b>Do not</b> include any lo					24	1	5.2	311
2 <del>4</del> 25	Losses. Add royalty losses from line 21 and rental real estate losse		• △22 □	nter total losses	here	25			320
26	Total rental real estate and royalty income or (loss). Combine lines 2					23	'	J 0 ,	J _ U
	If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this				010.				
	17, or Form 1040NR, line 18. Otherwise, include this amount in the total of					26	1	19.	991

#### **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.

2016

Your social security number

OMB No. 1545-0074

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

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

Attachment Sequence No. 13

	I K & CHANCI	HAL RUNCHAL					5 5	3-39	<u>) – 59</u>	12
Part I	Income or Loss Fr	om Rental Real Estate and Royalties N	lote:	If you a	are in the busine	ss of ren	ting persona	ıl proper	ty, use	
	Schedule C or C-E	<b>Z</b> (see instructions). If you are an individua	al, rep	ort farn	n rental income	or loss fr	om Form 48	<b>35</b> on p	age 2,	line 40.
A Did yo	u make any payments i	n 2016 that would require you to file Form(s)	1099	)? (see	instructions)			Y€	es	☐ No
B If "Yes	," did you or will you file	required Forms 1099?						Y€	es	☐ No
1a	Physical address of eac	ch property (street, city, state, ZIP code)								
A 4	416 KATHERINE A	VE, SHERMAN OAKS, CA 91423								
B 2	408 OCEAN PARK,	Santa Monica, CA 90405								
C 1	4523 TUPPER STR	EET, PANORAMA CITY, CA 9140	2		_					
1b	Type of Property	2 For each rental real estate property liste			Fair Rent	al	Personal I	Jse		QJV
	(from list below)	above, report the number of fair rental a personal use days. Check the <b>QJV</b> box			Days		Days			QJ V
Α	1	only if you meet the requirements to file	as	Α	0		0			
В	2	a qualified joint venture. See instructions	S.	В	0		0			
С	2			С	0		0			
Type of I	Property:									
Single	Family Residence	3 Vacation/Short-Term Rental 5	Lan	d	7 Self-	-Rental				
Multi-F	amily Residence	4 Commercial 6	Roy	alties	8 Othe	er (descr	be)			
Incom	e:	Properties:			Α		В		С	
3 Rent	s received		3		31,046	1	.56 <b>,</b> 301		148	<b>,</b> 729
			4							
Expense	es:									
	9		5				2,276			
6 Auto		ons) · · · · · · · · · · · · · · · · · · ·	6		25		1,153			963
	3		7		6 <b>,</b> 754		14,697		8	<b>,</b> 873
			8				1,200			
			9		863		7,175			,925
		fees	10		1,170		4,957			,720
	ŭ		11				3,015			,740
,	, ,	nks, etc. (see instructions)	12		15,548		43,588		32	,142
			13		74		3,895			204
			14		12,470		21,092			,402
			15		2,200		1,376			,821
			16		8,457		11,955	_		,683
			17		113	-	14,130	<u> </u>		739
		letion	18		11,479				22	,552
	r (list) MISC		19		FO 1FO	1	20 500	+	100	600
	expenses. Add lines 5 th	· ·	20		59,153	1 1	30,509	<u>'</u>	129	,364
		rents) and/or 4 (royalties). If								
	, ,	ions to find out if you must			(20 107)		25 700	,	1 (	265
	orm 6198	lang after limitation if any	21		(28,107)	-	25,792	-		,365
		loss after limitation, if any,	1 22	1,	20 107					
	orm 8582 (see instructi	,	22	](	28,107	1		-1(		
	•	on line 3 for all rental properties			23a					
	•	on line 4 for all royalty properties on line 12 for all properties			23b			-		
	•	on line 18 for all properties			23c			-		
	•	on line 20 for all properties			23a			-		
	•		loess		<u></u>			4		
	·	nts shown on line 21. <b>Do not</b> include any l			Enter total lesses	c here		5 (		
	• •	from line 21 and rental real estate losses fi I royalty income or (loss). Combine lines						<del>-  </del>		
		on page 2 do not apply to you, also enter this				icic.				
		on page 2 do not apply to you, also enter this . Otherwise, include this amount in the total						6		
17,0		. Onto wise, include this allibuilt in the total (		C + 1 UI	ipayez ••			~		

#### **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/schedulee.

OMB No. 1545-0074

Attachment Sequence No. 13

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

CHANCHAL RUNCHAL

Your social security number

AKS:	HAI K & CHANC	HAL RUNCHAL							553-	-39-5	91	2
Part		om Rental Real Estate and Royalties N	lote: If	you a	re in the bu	sines	s of rent					
	Schedule C or C-E	<b>Z</b> (see instructions). If you are an individua	ıl, repo	rt farm	rental inco	me or	loss fro	om <b>Form</b>	1 4835 (	on page	2, lin	e 40.
A Di		n 2016 that would require you to file Form(s)								Yes		No
B If'	'Yes," did you or will you file	required Forms 1099?							[	Yes		No
1a	Physical address of eac	ch property (street, city, state, ZIP code)										
Α	8055 SENOIA ROAD	, FAIRBURN, GEORGIA, Fairbu	rn, (	GA 3	0213							
В												
C												
1b	Type of Property	2 For each rental real estate property liste			Fair	Renta	ıl	Persor	nal Use		QJ	v
	(from list below)	above, report the number of fair rental a personal use days. Check the <b>QJV</b> box			D	ays		D	ays		——	·
A	4	only if you meet the requirements to file	as	Α	(	0			0			
В		a qualified joint venture. See instructions	S.	В								
C				С								
	of Property:											
	gle Family Residence		Land			Self-F						
	ti-Family Residence		Roya	Ities	8	Other	(descril	oe)				
Inco	ome:	Properties:			Α			В	$\rightarrow$		С	
			3		100,78	34			$\longrightarrow$			
	,		4						$\longrightarrow$			
Expe			_									
	· ·	• • • • • • • • • • • • • • • • • • •	5						$\longrightarrow$			
	•	ions) · · · · · · · · · · · · · · · · · · ·	6		F 1 (	<u> </u>			$\longrightarrow$			
	•		7		5,18	85			$\longrightarrow$			
			8		2 61	0.0			$\rightarrow$			
			9		2,69	90			$\longrightarrow$			
	egal and other professional	fees	10		1 6	20			$\longrightarrow$			
			11		1,62				$\longrightarrow$		—	
	flortgage interest paid to bar	nks, etc. (see instructions)	12		39,78	33			$\longrightarrow$		—	
			14		1,3				$\rightarrow$			
	•		15		1,5	10			$\rightarrow$			
			16		33,13	1 5			$\rightarrow$			
			17		2,88	_			$\rightarrow$			
		pletion	18		24,13							
	Other (list) MISC	nouon	19		2 1 <b>/</b> ± .	9						
	otal expenses. Add lines 5 t	hrough 19	20		110,99				$\dashv$			
	•	rents) and/or 4 (royalties). If	<u>-</u> -		,	- '			$\dashv$			
	esult is a (loss), see instruct	, , ,										
	le Form 6198		21		(10,2	13) l						
<b>22</b> D	eductible rental real estate	loss after limitation, if any,			, ,							
0	n Form 8582 (see instructi	ions)	22	(	10,21	13)	(		)	(		)
<b>23a</b> T	otal of all amounts reported	on line 3 for all rental properties • • •				23a	,			Ì		
b T	otal of all amounts reported	on line 4 for all royalty properties			[	23b						
	•	on line 12 for all properties				23c						
		on line 18 for all properties			[	23d						
e T	otal of all amounts reported	on line 20 for all properties			[	23e						
24 Ir	ncome. Add positive amou	ints shown on line 21. <b>Do not</b> include any	losses						24			
25 L	osses. Add royalty losses	from line 21 and rental real estate losses for	rom lin	e 22. E	Enter total I	osses	here		25	(		
26 T	otal rental real estate and	d royalty income or (loss). Combine lines	24 an	d 25. E	nter the re	sult he	ere.					
lf	Parts II, III, IV, and line 40	on page 2 do not apply to you, also enter this	s amou	ınt on F	orm 1040,	line						
1	7. or Form 1040NR. line 18	Otherwise, include this amount in the total	on line	41 on	page 2				26			

 $\label{eq:Name} Name(s) \ shown \ on \ return. \ Do \ not \ enter \ name \ and \ social \ security \ number \ if \ shown \ on \ page \ 1.$ 

AKSHAI K & CHANCHAL RUNCHAL

Your social security number 553-39-5912

Caution.	The IRS con	npares amounts re	ported on your	tax return with	amounts shown or	Schedule(s	) K-1.

Part II	ncome or Loss From Partnerships and S Corporations Note: If you report a loss from an at-risk activity for which	nich
	any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See instructions.	

Pa	rt II Income or Los											ctivity for	which
	<b>any</b> amount is <b>not</b> a										ons.		
27	Are you reporting any loss n						•			•			
	unallowed loss from a passi				Form 8582),	or u	nreimb	ursed p	artnership exp	enses'	' I† □	Yes	⊠ No
	you answered "Yes," see ins	structions beto	re completing	this section.	(b) Enter B fo	_	(a) Ch	ook if	(d) Emp	lovor			
28	(	(a) Name (b) Enter P for partnership; S foreign (d) Emplo			ication any amount is			ount is					
<b>A</b> M	D LIVE OAK PROI		LLC		for S corporation	n	partne F	rship 7	26-04		5.2	not at	risk T
AMI BMI			LLC		P P			<u>]</u> 1	26-04				<u>]</u> ]
C DIVI	D LIVE OAK PROI	FELITES	тис		Г			<u>]</u> 1	20-04	<u> </u>	<u> </u>		<u>J</u> 1
B M I							<u>_</u>	<u> </u> 					<u>]</u> ]
<u> </u>	Passive Income	and I nee		1			lonnas	seiva Ir	L ncome and Los				
			-t t	(In) NI-			Ionpu			33	<i>(</i> , ,		
	(f) Passive loss allowed (attach Form 8582 if required)	1	sive income hedule K-1	, ,	npassive loss chedule K-1				tion 179 expense from <b>Form 4562</b>			lonpassive ir m <b>Schedule</b>	
A				1								71.	121
A B C D													120
С												/	
D													
29a	Totals											142,	241
b	Totals												
30	Add columns (g) and (j) of li	ne 29a 🕠								30		142,	241
31	Add columns (f), (h), and (i)	of line 29b								31	(		)
32	Total partnership and S c	orporation in	come or (los	s). Combine	lines 30 and	31. E	nter th	ne			Ì		
	result here and include in the	e total on line 4	11 below •							32		142,	241
Pa	rt III Income or Los	s From Es	tates and <sup>-</sup>	Trusts									
33			(a) Na								(b) E	Employer	
			(a) Nam	ne							identifica	ation number	,
В													
В													
	Pas	ssive Income	and Loss					N	onpassive Inc	ome a	nd Los	ss	
	(c) Passive deduction or loss allow		, ,	Passive income				eduction		(f) Other income from Schedule K-1			m
$\overline{}$	(attach Form 8582 if required	)	110	m Schedule K-1	ule K-1 from Schedule K-1			ile K-1		301	ieuule K-1		
В													
	Totala												
34a	Totals												
5 35	Totals Add columns (d) and (f) of li	2/2								35	<u> </u>		
36	Add columns (c) and (e) of I					• •				36	,		1
37	Total estate and trust inc							 nd		30			
٠.	include in the total on line 41	, ,								37			
Pa	rt IV Income or Los		al Estate N	/lortgage l	nvestmer	nt C	ondu	its (F	REMICs) - R		ual H	lolder	
		(b) Employer ic		(c) Exces	s inclusion from				come (net loss)			come from	
38	(a) Name	num			ules Q, line 2c instructions)		1 ' '		les Q, line 1b			les Q, line 3	b
39	Combine columns (d) and (e	e) only. Enter th	ne result here a	and include in	the total on I	ine 4	1 belov	V		39			
Pa	rt V Summary												
40	Net farm rental income or (	loss) from For	<b>m 4835</b> . Also	, complete lin	e 42 below					40			
41	Total income or (loss). Con	mbine lines 26, 32	, 37, 39, and 40. E	nter the result her	e and on Form 1	040, lii	ne 17, or	Form 10	40NR, line 18	41		262,	232
42	Reconciliation of farming	and fishing i	ncome. Ente	r your <b>gross</b>									
	farming and fishing income	reported on Fo	orm 4835, line	7; Schedule K	(-1								
	(Form 1065), box 14, code I	3; Schedule K-	1 (Form 1120	S), box 17, co	de								
	V; and Schedule K-1 (Form	1041), box 14,	code F (see i	nstructions)		42	<u></u>						
43	Reconciliation for real es	tate profession	onals. If you	were a real e	state								
	professional (see instruction	s), enter the n	et income or (I	loss) you repo	orted								
	anywhere on Form 1040 or	Form 1040NR	from all rental	l real estate a	ctivities								
	in which you materially partic	cipated under	the passive ac	tivity loss rule	s	43							

### **Alternative Minimum Tax - Individuals**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) Information about Form 6251 and its separate instructions is at www.irs.gov/form6251. ► Attach to Form 1040 or Form 1040NR.

Attachment 32 Sequence No.

	al Revenue Service (99) Attach to Form 1040 or Form 1040NR.  (s) shown on Form 1040 or Form 1040NR	Vour soci	Sequence No.  al security number	. 32
			-	
	KSHAI K & CHANCHAL RUNCHAL  IT I Alternative Minimum Taxable Income (See instructions for how to complete each line.)	55	3-39-59	12
			1	
1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41, and go to line 2. Otherwise,	1	261	600
2	enter the amount from Form 1040, line 38, and go to line 7. (If less than zero, enter as a negative amount.)	· ·   - '	261,	609
2	Medical and dental. If you or your spouse was 65 or older, enter the <b>smaller</b> of Schedule A (Form 1040),			
,	line 4, <b>or</b> 2.5% (0.025) of Form 1040, line 38. If zero or less, enter -0- · · · · · · · · · · · · · · · · · ·		17	211
3		. 4	47,	<u> </u>
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet in the instructions for this line  Miscellaneous deductions from Schedule A (Form 1040), line 27			
5			,	412)
6	If Form 1040, line 38 is \$155,650 or less, enter -0 Otherwise, see instructions  Tax refund from Form 1040, line 10 or line 21			469)
7	·		0,	409)
8				
9				
10			1	
11 12	Alternative tax net operating loss deduction		1	
13	Qualified small business stock, see instructions	. 13		
14	Exercise of incentive stock options (excess of AMT income over regular tax income)			
15	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)			
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)			
17	Disposition of property (difference between AMT and regular tax gain or loss)			
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)			1
19	Passive activities (difference between AMT and regular tax income or loss)			1
20	Loss limitations (difference between AMT and regular tax income or loss)			
21	Circulation costs (difference between regular tax and AMT)			
22	Long-term contracts (difference between AMT and regular tax income)	. 22		
23	Mining costs (difference between regular tax and AMT)	. 23		
24	Research and experimental costs (difference between regular tax and AMT)	. 24		
25	Income from certain installment sales before January 1, 1987	. 25	(	
26	Intangible drilling costs preference	. 26	,	
27	Other adjustments, including income-based related adjustments	. 27		
28	Alternative minimum taxable income. Combine lines 1 through 27. (If married filing separately and line			
	28 is more than \$247,450, see instructions.)	. 28	299,	941
Pa	rt II Alternative Minimum Tax (AMT)			
29	Exemption. (If you were under age 24 at the end of 2016, see instructions.)			
	IF your filing status is AND line 28 is not over THEN enter on line 29			
	Single or head of household • • • • • • \$ 119,700 • • • • • • \$ 53,900			
	Married filing jointly or qualifying widow(er) 159,700 · · · · · · · 83,800	29	48,	740
	Married filing separately · · · · · · · · 79,850 · · · · · · · 41,900			
	If line 28 is <b>over</b> the amount shown above for your filing status, see instructions.			
30	Subtract line 29 from line 28. If more than zero, go to line 31. If zero or less, enter -0- here and on lines 31, 33,			
	and 35, and go to line 34	- 30	251,	201
31	• If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter.			
	If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends			
	on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured			
	for the AMT, if necessary), complete Part III on the back and enter the amount from line 64 here.			
	• All others: If line 30 is \$186,300 or less (\$93,150 or less if married filing separately), multiply line	31	66,	603
	30 by 26% (0.26). Otherwise, multiply line 30 by 28% (.28) and subtract \$3,726 (\$1,863 if			
	married filing separately) from the result.			
32	Alternative minimum tax foreign tax credit (see instructions)			<u> </u>
33	Tentative minimum tax. Subtract line 32 from line 31	- 33	66,	603
34	Add Form 1040, line 44 (minus any tax from Form 4972), and Form 1040, line 46. Subtract from the result any			
	foreign tax credit from Form 1040, line 48. If you used Schedule J to figure your tax on Form 1040, line 44,	24	5.0	201
25	refigure that tax without using Schedule J before completing this line (see instructions)		59,	
35	AMT. Subtract line 34 from line 33. If zero or less, enter -0 Enter here and on Form 1040, line 45- · · · · · ·	35	<u> </u>	222

### Part III Tax Computation Using Maximum Capital Gains Rates

	Complete Part III only if you are required to do so by line 31 or by the Foreign Earned Income Tax Worksheet in	the ins	tructions.
36	Enter the amount from Form 6251, line 30. If you are filing Form 2555 or 2555-EZ, enter the amount from		
	line 3 of the worksheet in the instructions for line 31	36	251 <b>,</b> 201
37	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions		
	for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet in the instructions for		
	Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If		
	you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	37	59
38	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see		
	instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	38	0
39	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount		
	from line 37. Otherwise, add lines 37 and 38, and enter the <b>smaller</b> of that result or the amount from line		
	10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or		
	2555-EZ, see instructions for the amount to enter	39	59
40	Enter the <b>smaller</b> of line 36 or line 39	40	59
41	Subtract line 40 from line 36	41	251 <b>,</b> 142
42	If line 41 is \$186,300 or less (\$93,150 or less if married filing separately), multiply line 41 by 26% (0.26). Otherwise,		66 504
	multiply line 41 by 28% (0.28) and subtract \$3,726 (\$1,863 if married filing separately) from the result	42	66,594
43	Enter:		
	• \$75,300 if married filing jointly or qualifying widow(er),	40	75 200
	• \$37,650 if single or married filing separately, or	43	75 <b>,</b> 300
44	• \$50,400 if head of household.		
44	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet in the instructions for		
	Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either		
	worksheet for the regular tax, enter the amount from Form 1040, line 43; if zero or less, enter -0 If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	44	254,422
45	Subtract line 44 from line 43. If zero or less, enter -0-	45	254,422
46	Enter the <b>smaller</b> of line 36 or line 37 · · · · · · · · · · · · · · · · · ·	46	59
47	Enter the <b>smaller</b> of line 45 or line 46. This amount is taxed at 0% · · · · · · · · · · · · · · · · · ·	47	3 3
48	Subtract line 47 from line 46 · · · · · · · · · · · · · · · · · ·	48	59
49	Enter:		
	• \$415,050 if single		
	• \$233,475 if married filing separately	49	466,950
	• \$466,950 if married filing jointly or qualifying widow(er)		,
	• \$441,000 if head of household		
50	Enter the amount from line 45	50	
51	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions		
	for Form 1040, line 44, or the amount from line 19 of the Schedule D Tax Worksheet, whichever applies		
	(as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the		
	amount from Form 1040, line 43; if zero or less, enter -0 If you are filing Form 2555 or Form 2555-EZ,		
	see instructions for the amount to enter	51	254 <b>,</b> 422
52	Add line 50 and line 51 · · · · · · · · · · · · · · · · · ·	52	254 <b>,</b> 422
53	Subtract line 52 from line 49. If zero or less, enter -0-	53	212,528
54	Enter the smaller of line 48 or line 53	54	59
55	Multiply line 54 by 15% (0.15)	55	9
56	Add lines 47 and 54	56	59
	If lines 56 and 36 are the same, skip lines 57 through 61 and go to line 62. Otherwise, go to line 57.		
57	Subtract line 56 from line 46	57	
58	Multiply line 57 by 20% (0.20)	58	
EC	If line 38 is zero or blank, skip lines 59 through 61 and go to line 62. Otherwise, go to line 59.		051 001
59 60	Add lines 41, 56, and 57 Subtract line 59 from line 36 Subtract line 50 Su	59	251 <b>,</b> 201
60 61	Subtract line 59 from line 36	60	
61 62		61	66 602
62 63	,,,	62	66,603
63	If line 36 is \$186,300 or less (\$93,150 or less if married filing separately), multiply line 36 by 26% (0.26).	63	66 610
64	Otherwise, multiply line 36 by 28% (0.28) and subtract \$3,726 (\$1,863 if married filing separately) from the result • • • Enter the <b>smaller</b> of line 62 or line 63 here and on line 31. If you are filing Form 2555 or 2555-EZ, do not	- 03	66,610
J-7	enter this amount on line 31. Instead, enter it on line 4 of the worksheet in the instructions for line 31.	64	66,603
	Since the difficultion of the following of the filter of the worksheet in the library deficit for the of the since the filter of the since	V-T	00,003

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

Attach to your tax return.

OMB No. 1545-2227 **2016** 

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

▶ Information about Form 8960 and its separate instructions is at www.irs.gov/form8960.

Attachment Sequence No. 72

Your social security number or EIN

		553-39	-5912
Par	t I Investment Income Section 6013(g) election (see instructions)		
	Section 6013(h) election (see instructions)		
	Regulations section 1.1411-10(g) election (see instructions)		
1	Taxable interest (see instructions)		674
2	Ordinary dividends (see instructions)		59
3	Annuities (see instructions)	. 3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts,		
	etc. (see instructions)	32	
b	Adjustment for net income or loss derived in the ordinary course of		
	a non-section 1411 trade or business (see instructions) 4b (142, 2	41)	
С	Combine lines 4a and 4b	- 4c	119,991
5a	Net gain or loss from disposition of property (see instructions)		
b	Net gain or loss from disposition of property that is not subject to		
	net investment income tax (see instructions) 5b		
С	Adjustment from disposition of partnership interest or S corporation		
	stock (see instructions) 5c		
d	Combine lines 5a through 5c	- 5d	0
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)	6	
7	Other modifications to investment income (see instructions)	7	
_8_	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7	8	120,724
Par			
9a	Investment interest expenses (see instructions) 9a		
b	State, local, and foreign income tax (see instructions) • • • • • • • • • • • • • • • • • • •	07	
С	Miscellaneous investment expenses (see instructions) • • • • • • • • • • • • • • • • • • •		
d	Add lines 9a, 9b, and 9c		10,707
10	Additional modifications (see instructions)	- 10	
11	Total deductions and modifications. Add lines 9d and 10	. 11	10,707
Par	t III Tax Computation		
12	Net investment income. Subtract Part II, line 11 from Part I, line 8. Individuals complete lines 13-		
	17. Estates and trusts complete lines 18a-21. If zero or less, enter -0-	12	110,017
	Individuals:		
13	Modified adjusted gross income (see instructions)		
14	Threshold based on filing status (see instructions)		
15	Subtract line 14 from line 13. If zero or less, enter -0	48	
16	Enter the smaller of line 12 or line 15 · · · · · · · · · · · · · · · · · ·	- 16	75,048
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (.038). Enter here and		
	include on your tax return (see instructions)	- 17	2 <b>,</b> 852
	Estates and Trusts:		
18a	Net investment income (line 12 above)		
b	Deductions for distributions of net investment income and		
	deductions under section 642(c) (see instructions) 18b		
С	Undistributed net investment income. Subtract line 18b from 18a (see		
	instructions). If zero or less, enter -0		
	Adjusted gross income (see instructions)		
b	Highest tax bracket for estates and trusts for the year (see		
	instructions)		
С	Subtract line 19b from line 19a. If zero or less, enter -0- · · · · · · · · · · · · · · · 19c		
20	Enter the smaller of line 18c or line 19c	- 20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (.038). <b>Enter here</b>		
	and include on your tax return (see instructions)	. 21	

#### **Credit for Prior Year Minimum Tax-**Individuals, Estates, and Trusts

Information about Form 8801 and its separate instructions is at www.irs.gov/form8801.

OMB No. 1545-1073 2016

Attachment Sequence No. 74

Identifying number

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

Attach to Form 1040, 1040NR, or 1041.

553-39-5912 AKSHAI K & CHANCHAL RUNCHAL Part I **Net Minimum Tax on Exclusion Items** Combine lines 1, 6, and 10 of your 2015 Form 6251. Estates and trusts, see instructions 296,001 Enter adjustments and preferences treated as exclusion items (see instructions) 2 23,418 3 Minimum tax credit net operating loss deduction (see instructions) 3 Combine lines 1, 2, and 3. If zero or less, enter -0- here and on line 15 and go to Part II. If more 319,419 than \$246,250 and you were married filing separately for 2015, see instructions 4 Enter: \$83,400 if married filing jointly or qualifying widow(er) for 2015; \$53,600 if single or head of household for 2015; or \$41,700 if married filing separately for 2015. Estates and trusts, enter \$23,800 5 83,400 Enter: \$158,900 if married filing jointly or qualifying widow(er) for 2015; \$119,200 if single or head of household for 2015; or \$79,450 if married filing separately for 2015. Estates and trusts, enter 6 158,900 160,519 7 Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9 7 40,130 8 Multiply line 7 by 25% (0.25) 8 Subtract line 8 from line 5. If zero or less, enter -0-. If under age 24 at the end of 2015, see instructions 9 43,270 10 Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15 and go to Part II. Form 10 276,149 If for 2015 you filed Form 2555 or 2555-EZ, see instructions for the amount to enter. 11 If for 2015 you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b (Form 1041, line 2b(2)); or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (lines 18a and 19, column (2), of Schedule D (Form 1041)), complete Part III of Form 8801 and enter the amount from line 55 here. Form 1040NR filers, see instructions. 54,450 11 All others: If line 10 is \$185,400 or less (\$92,700 or less if married filing separately for 2015), multiply line 10 by 26% (0.26). Otherwise, multiply line 10 by 28% (0.28) and subtract \$3,708 (\$1,854 if married filing separately for 2015) from the result. Form 1040NR filers, see instructions. 12 Minimum tax foreign tax credit on exclusion items (see instructions) 12 54,450 13 Tentative minimum tax on exclusion items. Subtract line 12 from line 11 13 48,967 Enter the amount from your 2015 Form 6251, line 34, or 2015 Form 1041, Schedule I, line 55 14 14 Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0-15 5,483

Form 8801 (2016) Page **2** 

Form	8801 (2016)		Page 2
Pa	rt II Minimum Tax Credit and Carryforward to 2017		
16	Enter the amount from your 2015 Form 6251, line 35, or 2015 Form 1041, Schedule I, line 56	16	5,483
17	Enter the amount from line 15	17	5,483
18	Subtract line 17 from line 16. If less than zero, enter as a negative amount	18	
19	2015 credit carryforward. Enter the amount from your 2015 Form 8801, line 26 · · · · · · · · · · · · · · · · · ·	19	
20	Enter your 2015 unallowed qualified electric vehicle credit (see instructions)	20	
21	Combine lines 18 through 20. If zero or less, stop here and see the instructions	21	
22	Enter your 2016 regular income tax liability minus allowable credits (see instructions)	22	59,381
23	Enter the amount from your 2016 Form 6251, line 33, or 2016 Form 1041, Schedule I, line 54	23	66,603
24	Subtract line 23 from line 22. If zero or less, enter -0-	24	0
25	Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2016 Form 1040, line 54 (check box b); Form 1040NR, line 51 (check box b); or Form 1041, Schedule G, line 2c	25	
26	Credit carryforward to 2017. Subtract line 25 from line 21. Keep a record of this amount because you may use it in future years	26	

EEA Form **8801** (2016)

# Part III Tax Computation Using Maximum Capital Gains Rates

	Complete Part III only if you are required to do so by line 11 or by the Foreign Earned Income Tax Worksheet in t	he inst	ructions.
	Caution: If you didn't complete the 2015 Qualified Dividends and Capital Gain Tax Worksheet,		
	the 2015 Schedule D Tax Worksheet, or Part V of the 2015 Schedule D (Form 1041), see the		
	instructions before completing this part.*		
27	Enter the amount from Form 8801, line 10. If you filed Form 2555 or 2555-EZ for 2015, enter the		
	amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions	27	276,149
	Caution: If for 2015 you filed Form 1040NR, 1041, 2555, or 2555-EZ, see the instructions before		
	completing lines 28, 29, and 30.		
28	Enter the amount from line 6 of your 2015 Qualified Dividends and Capital Gain Tax Worksheet,		
	the amount from line 13 of your 2015 Schedule D Tax Worksheet, or the amount from line 26 of		
	the 2015 Schedule D (Form 1041), whichever applies*	28	153,240
	If you figured your 2015 tax using the 2015 Qualified Dividends and Capital Gain Tax		
	Worksheet, skip line 29 and enter the amount from line 28 on line 30. Otherwise, go to line		
	<b>29</b> .		
29	Enter the amount from line 19 of your 2015 Schedule D (Form 1040), or line 18b, column (2), of the		
	2015 Schedule D (Form 1041)	29	49,246
30	Add lines 28 and 29, and enter the <b>smaller</b> of that result or the amount from line 10 of your 2015		
	Schedule D Tax Worksheet	30	202,486
	Enter the <b>smaller</b> of line 27 or line 30 · · · · · · · · · · · · · · · · · ·	31	202,486
	Subtract line 31 from line 27 · · · · · · · · · · · · · · · · · ·	32	73,663
33	If line 32 is \$185,400 or less (\$92,700 or less if married filing separately for 2015), multiply line 32		
	by 26% (0.26). Otherwise, multiply line 32 by 28% (0.28) and subtract \$3,708 (\$1,854 if married		
	filing separately for 2015) from the result. Form 1040NR filers, see instructions	33	19,152
34	Enter:		
	• \$74,900 if married filing jointly or qualifying widow(er) for 2015,		
	• \$37,450 if single or married filing separately for 2015,		74 000
	• \$50,200 if head of household for 2015, or	34	74,900
	• \$2,500 for an estate or trust.		
	Form 1040NR filers, see instructions.		
35	Enter the amount from line 7 of your 2015 Qualified Dividends and Capital Gain Tax Worksheet, the		
	amount from line 14 of your 2015 Schedule D Tax Worksheet, or the amount from line 27 of the 2015		
	Schedule D (Form 1041), whichever applies. If you didn't complete either worksheet or Part V of the		
	2015 Schedule D (Form 1041), enter the amount from your 2015 Form 1040, line 43, or 2015 Form	0.5	127 552
•	1041, line 22, whichever applies; if zero or less, enter -0 Form 1040NR filers, see instructions	35	137,553
	Subtract line 35 from line 34. If zero or less, enter -0-  Enter the <b>smaller</b> of line 27 or line 28 · · · · · · · · · · · · · · · · · ·	36 37	153,240
		38	133,240
	Enter the <b>smaller</b> of line 36 or line 37 · · · · · · · · · · · · · · · · · ·	39	153,240
	Enter:	39	133,240
40	• \$413,200 if single for 2015,		
	• \$232,425 if married filing separately for 2015,		
	\$464,850 if married filing jointly or qualifying widow(er) for 2015,     \$464,850 if married filing jointly or qualifying widow(er) for 2015,	40	464,850
	• \$439,000 if head of household for 2015, or	70	101,000
	• \$12,300 for an estate or trust.		
	Form 1040NR filers, see instructions.		
41	Enter the amount from line 36	41	
	Form 1040 filers, enter the amount from line 7 of your 2015 Qualified Dividends and Capital Gain Tax	7.	
74	Worksheet or the amount from line 19 of your 2015 Schedule D Tax Worksheet, whichever applies. If you		
	didn't complete either worksheet, see instructions. Form 1041 filers, enter the amount from line 27 of your		
	2015 Schedule D (Form 1041) or line 18 of your 2015 Schedule D Tax Worksheet, whichever applies. If		
	you didn't complete either the worksheet or Part V of the 2015 Schedule D (Form 1041), enter the amount		
	from your 2015 Form 1041, line 22; if zero or less, enter -0 Form 1040NR filers, see instructions	42	88,307
	,		

EEA Form **8801** (2016)

<sup>\*</sup> The 2015 Qualified Dividends and Capital Gain Tax Worksheet is in the 2015 Instructions for Form 1040. The 2015 Schedule D Tax Worksheet is in the 2015 instructions for Schedule D (Form 1040) (or the 2015 Instructions for Schedule D (Form 1041)).

1 0111	6001 (2010) ANDHAL IN & CHANCHAL NONCHAL	555	JJ JJIZ Fage +
Pa	t III Tax Computation Using Maximum Capital Gains Rates (continued)		
			00.00
43	Add lines 41 and 42	43	88 <b>,</b> 307
44	Subtract line 43 from line 40. If zero or less, enter -0-	44	376 <b>,</b> 543
45	Enter the <b>smaller</b> of line 39 or line 44	45	153 <b>,</b> 240
46	Multiply line 45 by 15% (0.15)	46	22,986
47	Add lines 38 and 45	47	153,240
	If lines 47 and 27 are the same, skip lines 48 through 52 and go to line 53. Otherwise, go to		,
	line 48.		
48	Subtract line 47 from line 37	48	
49	Multiply line 48 by 20% (0.20)	49	
	If line 29 is zero or blank, skip lines 50 through 52 and go to line 53. Otherwise, go to line 50.		
50	Add lines 32, 47, and 48	50	226,903
51	Subtract line 50 from line 27	51	49,246
52	Multiply line 51 by 25% (0.25)	52	12,312
53	Add lines 33, 46, 49, and 52	53	54,450
54	If line 27 is \$185,400 or less (\$92,700 or less if married filing separately for 2015), multiply line 27		
	by 26% (0.26). Otherwise, multiply line 27 by 28% (0.28) and subtract \$3,708 (\$1,854 if married		
	filing separately for 2015) from the result. Form 1040NR filers, see instructions	54	73,614
55	Enter the smaller of line 53 or line 54 here and on line 11. If you filed Form 2555 or 2555-EZ for		
	2015, don't enter this amount on line 11. Instead, enter it on line 4 of the Foreign Earned Income		
	Tax Worksheet in the instructions for line 11	55	54,450
			Form 9904 (2016)

EEA

Form 8801 (2016)

# Passive Activity Loss Limitations ▶ See separate instructions.

Attach to Form 1040 or Form 1041.

2016 Attachment

OMB No. 1545-1008

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

▶ Information about Form 8582 and its instructions is available at www.irs.gov/form8582.

Sequence No. 88

Identifying number

AKS	SHAI K & CHANCHAL RUNCHAL				553-39-5912
Pa	rt I 2016 Passive Activity Loss				
	Caution: Complete Worksheets 1, 2, and 3 before completing Part I.				
Rent	al Real Estate Activities With Active Participation (For the definition of active	parti	cipation, see		
Spec	cial Allowance for Rental Real Estate Activities in the instructions.)				
1a	Activities with net income (enter the amount from Worksheet 1,				
	column (a))	1a	158,311		
b	Activities with net loss (enter the amount from Worksheet 1, column		,		
	(b))	1b	( 38,320)		
С	Prior years unallowed losses (enter the amount from Worksheet 1,		,		
	column (c))	1c	( )		
d	Combine lines 1a, 1b, and 1c			1d	119,991
Com	mercial Revitalization Deductions From Rental Real Estate Activities				,
2a	Commercial revitalization deductions from Worksheet 2, column (a)	2a	( )		
b	Prior year unallowed commercial revitalization deductions from		,		
	Worksheet 2, column (b)	2b	( )		
С	Add lines 2a and 2b			2c	(
All C	ther Passive Activities				
3a	Activities with net income (enter the amount from Worksheet 3,				
	column (a))	3a			
b	Activities with net loss (enter the amount from Worksheet 3, column				
	(b))	3b	( )		
С	Prior years unallowed losses (enter the amount from Worksheet 3,		,		
	column (c))	3с	( )		
d	Combine lines 3a, 3b, and 3c			3d	
4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include th	is forr	n with		
	your return; all losses are allowed, including any prior year unallowed losses ente	red o	n line 1c,		
	2b, or 3c. Report the losses on the forms and schedules normally used			4	119,991
	If line 4 is a loss and:  • Line 1d is a loss, go to Part II.				
	<ul> <li>Line 2c is a loss (and line 1d is zero or more), skip P</li> </ul>	art II a	and go to Part III.		
	<ul> <li>Line 3d is a loss (and lines 1d and 2c are zero or mo</li> </ul>	re), s	kip Parts II and III and go to	line 15	5.
Caut	ion: If your filing status is married filing separately and you lived with your spous	se at	any time during the year, <b>d</b>	o not	complete
Part	II or Part III. Instead, go to line 15.				
Pa	t II Special Allowance for Rental Real Estate Activities \	<b>Vith</b>	<b>Active Participation</b>		
	Note: Enter all numbers in Part II as positive amounts. See instruction	s for	an example.		
5	Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4			5	
6	Enter \$150,000. If married filing separately, see instructions	6			
7	Enter modified adjusted gross income, but not less than zero (see inst.)	7			
	Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9,				
	enter -0- on line 10. Otherwise, go to line 8.				
8	Subtract line 7 from line 6	8			
9	Multiply line 8 by 50% (0.5). <b>Do not</b> enter more than \$25,000. If married filing s	separa	ately, see instructions .	9	
10	Enter the <b>smaller</b> of line 5 or line 9 · · · · · · · · · · · · · · · · · ·			10	0
	If line 2c is a loss, go to Part III. Otherwise, go to line 15.				
Pa	rt III Special Allowance for Commercial Revitalization De	educ	ctions From Rental F	Real	Estate Activities
	Note: Enter all numbers in Part III as positive amounts. See the exam	ple fo	or Part II in the instructions.		
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separate	ly, see	e instructions • • •	11	
12	Enter the loss from line 4			12	
13	Reduce line 12 by the amount on line 10 · · · · · · · · · · · · · · · · · ·			13	
14	Enter the <b>smallest</b> of line 2c (treated as a positive amount), line 11, or line 13			14	
	t IV Total Losses Allowed				<del></del>
15	And the mostle, it arry, on three ra and od and other the total			15	
16	Total losses allowed from all passive activities for 2016. Add lines 10, 14,	and 1	5. See		
	instructions to find out how to report the losses on your tax return			16	1 ()

### **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No. 1545-0172 2016

Attach to your tax return. Attachment Department of the Treasury Sequence No. 179 Internal Revenue Service (99) ▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562. Business or activity to which this form relates Identifying number Name(s) shown on return CHANCHAL RUNCHAL 3106 INGLEWOOD BLVD 553-39-5912 AKSHAI K & **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I Maximum amount (see instructions) ..... 1 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 6 (a) Description of property (b) Cost (business use only) (c) Elected cost

7	Listed property. Enter the amount from line 29		7			
8	Total elected cost of section 179 property. Add amounts in column (c),	lines 6 and 7			8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8 · · · · ·				9	
10	Carryover of disallowed deduction from line 13 of your 2015 Form 4562	62			10	
11	Business income limitation. Enter the smaller of business income (not	less than zero) or	line 5	(see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter mo	ore than line 11			12	
13	Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line	ne 12	13			
Note:	Don't use Part II or Part III below for listed property. Instead, use Pa	art V.				

t II   Special Depreciation Allowance and Other Depreciation (Don't include listed pro	perty.)	(See instructions.)
Special depreciation allowance for qualified property (other than listed property) placed in service		
during the tax year (see instructions)	14	
Property subject to section 168(f)(1) election $\cdots \cdots \cdots$	15	
Other depreciation (including ACRS)	16	6,898
	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)  Property subject to section 168(f)(1) election	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)

MACRS Depreciation (Don't include listed property.) (See instructions.)

S	ЭС	ti	0	n	F

- 17 MACRS deductions for assets placed in service in tax years beginning before 2016
- 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	ce During 2016 Tax Year	Using the G	Seneral Deprec	iation System	1
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a	3-year property						
b	5-year property						
С	7-year property						
d	10-year property						
е	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental			27.5 yrs.	MM	S/L	
	property			27.5 yrs.	MM	S/L	
i	Nonresidential real			39 yrs.	MM	S/L	
	property				MM	S/L	
	Section C - Assets I	Placed in Service	e During 2016 Tax Year	Jsing the Al	ternative Depr	eciation Syste	em
20 a	Class life					S/L	
		1					

4	20 a	Class life				S/L	
	b	12-year		12 yrs.		S/L	
		40-year	·	40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter		
	here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	6,898
22			

23

For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Form	4562	(2016)

# **Depreciation and Amortization** (Including Information on Listed Property)

OMB No. 1545-0172 2016

Denart	ment of the Treasury			Attach t	o your tax	return.					Attachment	
	Revenue Service (99)	► Information	about Form 45	62 and its sep	arate ins	tructions	s is a	t www.irs.go	v/form4	562.	Sequence No.	179
Name(s) shown on return Business or activity to which this form rel							is form relates			Identifying number		
AKS	SHAI K & CI	HANCHAL	RUNCHAL		120	29 C	LOV	ER AVE			553-39-5	912
Pai	rt I Election	To Expens	e Certain Pro	perty Und	er Secti	on 179	)					
	Note: If yo	ou have any liste	ed property, comp	olete Part V be	fore you c	omplete	Part I					
1	Maximum amount (	see instructions)	)							1		
2	Total cost of section	n 179 property pl	aced in service (s	see instructions	)					2		
3	Threshold cost of se	ection 179 prope	erty before reducti	on in limitation	(see instru	ictions)				3		
4	Reduction in limitati	ion. Subtract line	3 from line 2. If z	ero or less, en	ter -0-					4		
5	Dollar limitation for	tax year. Subtrad	ct line 4 from line	1. If zero or les	s, enter -0	. If marri	ed filir	ng				
	separately, see inst	ructions · · ·								5		
6		(a) Description of pr	operty		(b) Cost (bu	siness use	only)	(c) Elec	ted cost			
7	Listed property. Ent	er the amount fro	om line 29 •				7					
8	Total elected cost of	f section 179 pro	perty. Add amour	nts in column (d	c), lines 6 a	and 7				8		
9	Tentative deduction	n. Enter the <b>sm</b> a	<b>aller</b> of line 5 or l	ine 8 • • • •						9		
10	Carryover of disallo	wed deduction fi	rom line 13 of you	ır 2015 Form 4	562 •					10		
11	Business income lin	nitation. Enter th	e smaller of busir	ness income (n	ot less tha	n zero) oı	r line :	5 (see instruc	tions)	11		
12	Section 179 expens	se deduction. Ad	d lines 9 and 10, l	but don't enter	more than	line 11				12		
13	Carryover of disallo	wed deduction to	o 2017. Add lines	9 and 10, less	line 12	<b>•</b>	13					
Note	: Don't use Part II o	r Part III below f	or listed property	. Instead, use	Part V.							
Pai	rt II Special	Depreciatio	n Allowance	and Other	Deprec	iation	(Dor	<b>ı't</b> include list	ed prope	erty.) (	See instructions.)	
14	Special depreciation	n allowance for o	qualified property	(other than liste	ed property	) placed	in ser	vice				
	during the tax year	(see instructions	)							14		
15	Property subject to	section 168(f)(1)	election • •							15		
16	Other depreciation	(including ACRS	)							16	5,	826
Pai	rt III MACRS	S Depreciati	ON (Don't inclu	ude listed prop	erty.) (See	instructi	ons.)					
				S	ection A							
17	MACRS deductions	for assets place	ed in service in ta	x years beginni	ng before 2	2016				17	2,	662
18	If you are electing to	o group any asse	ets placed in servi	ice during the t	ax year into	one or i	more	general				
	asset accounts, che	eck here • •						· · · · · <b>&gt;</b>				
	Sec	ction B - Assets	Placed in Service	e During 2010	Tax Year	Using th	ne Ge	neral Depred	iation S	ystem	<u> </u>	
	(a) Classification of p	roperty	(b) Month and year placed in service	(c) Basis for dep (business/investruent) only-see instruent	nent use	(d) Recov	ery (	e) Convention	(f) Meth	iod	(g) Depreciation ded	uction
19 a	3-year property											
b	5-year property											
С	7-year property											
d	10-year property											
е	15-year property											
f	20-year property											
g	25-year property					25 yrs	s.		S/	L		
h	Residential rental					27.5 yr	rs.	MM	S/	L		
	property					27.5 yr	rs.	MM	S/	L		
i	Nonresidential real					39 yrs	s.	MM	S/	L		
	property							MM	S/	L		
	Sect	tion C - Assets I	Placed in Service	e During 2016	Tax Year	Using the	e Alte	rnative Depr	eciation	Syste	m	
20 a	Class life								S/	L		
b	12-year					12 yrs	s.		S/	L		
С	40-year					40 yrs	s.	MM	S/	L		
Pai	rt IV Summa	ary (See instru	ctions.)									
21	Listed property. En								• •	21		
22	Total. Add amount	s from line 12, li	ines 14 through 1	17, lines 19 an	d 20 in col	umn (g),	and I	ine 21. Enter				
	here and on the app	propriate lines of	your return. Partı	nerships and S	corporatio	ns - see	instru	ctions		22	8,	488
23	For assets shown a	bove and placed	d in service during	the current ye	ar, enter th	ne						

23

# **Depreciation and Amortization** (Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

Department of the Treasury

Attachment

Interna	Revenue Service (99)   Information	about Form 45	62 and its sep	arate inst	tructions is	at www.irs.go	v/form4	562.	Sequence No. 179
Name(s) shown on return  Business or activity to which this form relates  Identify									
AKS	SHAI K & CHANCHAL I					OAKS LL	С		553-39-5912
Par	t I Election To Expense	Certain Pro	perty Und	er Secti	on 179				
	Note: If you have any liste	d property, comp	olete Part V be	fore you c	omplete Pai	rt I.			
1	Maximum amount (see instructions)							1	
2	Total cost of section 179 property pla	aced in service (s	ee instructions	)				2	
3	Threshold cost of section 179 prope	rty before reducti	on in limitation	(see instru	ictions)			3	
4	Reduction in limitation. Subtract line	3 from line 2. If z	ero or less, en	ter -0-				4	
5	Dollar limitation for tax year. Subtract	t line 4 from line	1. If zero or les	s, enter -0-	If married	filing			
	separately, see instructions • • •							5	
6	(a) Description of pro	perty		(b) Cost (bu	siness use only	) <b>(c)</b> Ele	cted cost		
7	Listed property. Enter the amount fro	m line 29 •			7	,			
8	Total elected cost of section 179 pro	perty. Add amour	nts in column (d	c), lines 6 a	and 7			8	
9	Tentative deduction. Enter the sma	I <b>ller</b> of line 5 or li	ine 8 • • • •					9	
10	Carryover of disallowed deduction from							10	
11	Business income limitation. Enter the				n zero) or lin	e 5 (see instruc	tions)	11	
12	Section 179 expense deduction. Add		•		,		,	12	
13	Carryover of disallowed deduction to	•				3			
	: Don't use Part II or Part III below fo					- 1			
Par					iation (D	on't include lis	ted prop	ertv.) (	See instructions.)
14	Special depreciation allowance for q						.оч р.ор	, (	
	during the tax year (see instructions)		•		, ·			14	
15	Property subject to section 168(f)(1)	•						15	
16	Other depreciation (including ACRS)							16	
Par									
	im torto poprodidit	DOIT INCID		ection A	instruction.	5.)			
17	MACRS deductions for assets place	d in service in tax			2016 .			17	
18	If you are electing to group any asse		, ,	•	_0.0				
.0	, , ,		•	•		•	. $\square$		
	Section B - Assets						riation S	vetom	
		(b) Month and year	(c) Basis for dep			Jeneral Depre		yotem	
	(a) Classification of property	placed in service	(business/investrue only-see instrue	nent use	(d) Recovery period	(e) Convention	(f) Meth	nod	(g) Depreciation deduction
19 a	3-year property								
b	5-year property								
С	7-year property								
d	10-year property								
е	15-year property								
f	20-year property								
g	25-year property				25 yrs.		S/	L	
h	Residential rental				27.5 yrs.	MM	S/	L	
	property				27.5 yrs.	MM	S/	L	
i	Nonresidential real	05-2016	1,634	<b>,</b> 710	39 yrs.	MM	S/	L	26,204
	property					MM	S/	L	
	Section C - Assets F	Placed in Service	During 2016	Tax Year I	Using the A	Iternative Depr	eciation	Syste	m
20 a	Class life						S/	L	
b	12-year				12 yrs.		S/	L	
С	40-year				40 yrs.	MM	S/	L	
Par	t IV Summary (See instruc	tions.)							
21	Listed property. Enter amount from	line 28 • • •	<del></del>			<del></del>		21	
22	Total. Add amounts from line 12, lin	nes 14 through 1	7, lines 19 and	d 20 in col	umn (g), an	d line 21. Enter			
	here and on the appropriate lines of	your return. Partr	nerships and S	corporatio	ns - see inst	tructions		22	26,204
23	For assets shown above and placed	in service during	the current ye	ar, enter th	ne				
	portion of the basis attributable to se	ction 263A costs			2	3			

#### **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

2016

Department of the Treasury Internal Revenue Service (99)

Attachment

179 Sequence No. Information about Form 4562 and its separate instructions is at www.irs.gov/form4562. Business or activity to which this form relates Identifying number Name(s) shown on return 4416 KATHERINE AVE 553-39-5912 AKSHAI K & CHANCHAL RUNCHAL

Pai	irt i Election to Expense Certain Property Under Section 179		
	Note: If you have any listed property, complete Part V before you complete Part I.		
1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)		
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	
6	(a) Description of property (b) Cost (business use only) (c) E	Elected cost	
7	Listed property. Enter the amount from line 29		
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8	9	
0	Carryover of disallowed deduction from line 13 of your 2015 Form 4562	10	
1	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instru	uctions) 11	
2	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
3	Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12		
lote	e: Don't use Part II or Part III below for listed property. Instead, use Part V.		
Pai	Irt II Special Depreciation Allowance and Other Depreciation (Don't include I	listed property.) (	See instructions.)
4	Special depreciation allowance for qualified property (other than listed property) placed in service		
	during the tax year (see instructions)	14	
5	Property subject to section 168(f)(1) election · · · · · · · · · · · · · · · · · · ·	15	
6	Other depreciation (including ACRS)	16	
Pai	Int III MACRS Depreciation (Don't include listed property.) (See instructions.)		

Section A 17 11,479 MACRS deductions for assets placed in service in tax years beginning before 2016 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 2016 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year d) Recovery placed in (business/investment use (f) Method (a) Classification of property (e) Convention (g) Depreciation deduction service only-see instructions) 19 a 3-year property b 5-year property С 7-year property 10-year property 15-year property 20-year property 25-year property 25 yrs. S/L Residential rental MM S/L 27.5 yrs. property MM 27.5 yrs. S/L MM S/L Nonresidential real 39 yrs. property MM Section C - Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System S/L

20a Class life 12-year S/L b 12 yrs. 40-year 40 yrs. MM S/L Summary (See instructions.) 21 Listed property. Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 22 11,479 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

#### **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

2016

Department of the Treasury

Attachment

ernal Revenue Service (99)	Information about Form 4562 and its se	parate instructions is at www.irs.gov/form4562.	
me(s) shown on return		Business or activity to which this form relates	lo

Sequence No. 179

entifying number 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) 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 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 Carryover of disallowed deduction from line 13 of your 2015 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12 13 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property.) (See instructions.) 22,156 17 MACRS deductions for assets placed in service in tax years beginning before 2016 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 2016 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation placed in (g) Depreciation deduction (e) Convention (f) Method (a) Classification of property service only-see instructions) 19 a 3-year property 5-year property b С 7-year property 10-year property 15-year property 20-year property 25 yrs. 25-year property MM S/L Residential rental 27.5 yrs. property 27.5 yrs. MM S/L MM S/L Nonresidential real 39 yrs. property 07-2016 23,734 27.5 MM 396 Section C - Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year S/L 12 yrs. 40-year 40 yrs MM S/L

Summary (See instructions.)

Listed property. Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), a

here and on the appropriate lines of your return. Partnerships and S corporations - see in For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

and III	ne 21. Enter		
nstruc	tions		22

23

22,552

Form 4562 (2016)

# **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No. 1545-0172 2016

Attach to your tax return. Attachment Department of the Treasury 179 Internal Revenue Service (99) Information about Form 4562 and its separate instructions is at www.irs.gov/form4562. Sequence No. Business or activity to which this form relates Identifying number Name(s) shown on return CHANCHAL RUNCHAL MEADOW GLEN LLC 553-39-5912 AKSHAI K & Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 . . . . . . . . 9 10 Carryover of disallowed deduction from line 13 of your 2015 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12 13 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property.) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2016 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 2016 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year d) Recovery placed in (a) Classification of property (e) Convention (f) Method (a) Depreciation deduction only-see instructions) service 19 a 3-year property 5-year property b С 7-year property 10-year property 15-year property 20-year property 25 yrs. 25-year property Residential rental MM S/L 27.5 yrs. property 27.5 yrs. MM S/L 05 - 20161,504,156 MM S/L 24,11 Nonresidential real 39 yrs. property MM Section C - Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year S/L 12 yrs. 40-year 40 yrs. MM S/L Part IV Summary (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 22 here and on the appropriate lines of your return. Partnerships and S corporations - see instructions 24,112 For assets shown above and placed in service during the current year, enter the

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File U.S. Individual Income Tax Return

Information about Form 4868 and its instructions is available at www.irs.gov/form4868.

OMB No. 1545-0074 **2016** 

**Date to file by:** 04-18-2017

**Payment:** \$48,180

Payment Method: Your payment can be by either check or money order

payable to the "United States Treasury." Include your SSN, daytime phone number, and "2016 Form 4868" on your check or money order. Do not send cash. To

pay by credit card, go to www.1040paytax.com.

Address to file: Internal Revenue Service

P.O. Box 7122

San Francisco, CA 94120-7122

Other Instructions: An extension to file does not extend the time to pay

your tax. You can also e-file Form 4868 and make

payment by authorizing an electronic funds

withdrawal from your checking or savings account.

Taxpayer	Records	:
----------	---------	---

NOTE

Amount Paid	
Check Number	

Date Mailed

Detach this entire note (cut on dotted lines) and enclose with the payment and the 4868 voucher (below) <u>ONLY</u> if Form 4868 was e-filed and ACCEPTED; otherwise, detach the 4868 voucher (cut on the *lower* dotted line) and submit only the voucher with the payment.

# The extension request was originally filed electronically.

▼ DETACH HERE ▼

						. ▼	וט	= 1 A
_	_	_	_	_	_	_	_	_

Application for Automatic Extension of Time
To File U.S. Individual Income Tax Return
Internal Revenue Service (99) For calendar year 2016, or other tax year beginning 2016, ending

Part I Identification Part II Individual Income Tax

4 Estimate of total tax liability for 2016 . . . . \$

OSES-7700P A) Z3J39NA 20J

2 Your social security number 3 Spouse's social security number 573-41-5200

Amount you are paying (see instructions)

didn't receive wages as an employee subject to U.S. income tax withholding

For Privacy Act and Paperwork Reduction Act Notice, see page 4. EEA

Form 4868 (2016)

48,180

OMB No. 1545-0074

2016

Department of the Treasury

Internal Revenue Service

IRS e-file Signature Authorization

▶ Don't send to the IRS. This isn't 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

2016

Submission Identification Number (SID)				
Taxpayer's name	Social security number			
AKSHAI K RUNCHAL		553-39-5912		
Spouse's name		Spouse's social security		
CHANCHAL RUNCHAL	•	573-41-52	00	
Part I Tax Return Information - Tax Year Ending December 31, 201		ole dollars only)		
1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4; Fo		NR,		205 240
line 37)			1	325,048
2 Total tax (Form 1040, line 63; Form 1040A, line 39; Form 1040EZ, line 12; Form 1040NR,	•		2	69,455
<b>3</b> Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 64; Form 1040A, Form 1040EZ, line 7; Form 1040NR, line 62a)			,	
4 Refund (Form 1040, line 76a; Form 1040A, line 48a; Form 1040EZ, line 13a; Form 1040-S			3	
Form 1040NR, line 73a)		·	4	9,875
5 Amount you owe (Form 1040, line 78; Form 1040A, line 50; Form 1040EZ, line 14; Form 1			5	3,013
Part II Taxpayer Declaration and Signature Authorization (Be sure				our return)
I received during the tax year. I further declare that the amounts in Part I above are the amounts from my electrintermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and freceipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or reauthorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (caccount indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a pinstitution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4 received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution for taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable	and to receing and to recein and direct debit payment of e U.S. Treat 1537. Paymitutions involutions i	ve from the IRS (a) an a (c) the date of any reful entry to the financial in festimated tax, and the sury Financial Agent to nent cancellation requesolved in the processing ent. I further acknowled	acknowled nd. If appl stitution financial terminate sts must b of the election	dgement icable, I the ee ctronic e
Taxpayer's PIN: check one box only				
X   Lauthorize J ARORA INC to enter or generate	mv PIN	95912		
ERO firm name		Enter five digits, but		
as my signature on my tax year 2016 electronically filed income tax return.		don't enter all zeros		
I will enter my PIN as my signature on my tax year 2016 electronically filed income tax r entering your own PIN and your return is filed using the Practitioner PIN method. The E				
Spouse's PIN: check one box only	DINI	1 = 2 0 0		
X I authorize J ARORA INC to enter or generate  ERO firm name	my PIN	15200 Enter five digits, but		
as my signature on my tax year 2016 electronically filed income tax return.		don't enter all zeros		
I will enter my PIN as my signature on my tax year 2016 electronically filed income tax r	eturn Ch	eck this box <b>only</b> if v	ou are	
entering your own PIN <b>and</b> your return is filed using the Practitioner PIN method. The E		•		
		·		
Spouse's signature ▶		Date >		
		•		
Practitioner PIN Method Returns Only - contin		ow		
Part III Certification and Authentication - Practitioner PIN Method C	Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		962607-50		Lavos
Landifully the share an arrange and a state of the state			't enter al	1 20103
I certify that the above numeric entry is my PIN, which is my signature for the tax year 2016 electron the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the remethod and <b>Pub.1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income Tax F	quiremen			
ERO's signature ▶		Date ▶ <u>05-24-</u>	2017	
ERO Must Retain This Form - See Inst	truction	16		
Don't Submit This Form to the IRS Unless Requ				

Department of the Treasury - Internal Revenue Service

Form **9325** (January 2017)

# Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you	for participating in IRS e-file.				
axpayer n	ame				
AKSHA	I K & CHANCHAL				
	oddress (optional) STRADELLA RD				
	NGELES, CA 90077-2320				
1. X	Your federal income tax return for 2016 was filed electronically with the IRS Submission  Processing Center. The electronic filing services were provided by J ARORA INC				
2.	Your return was accepted on using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you. The Submission ID assigned to your return is				
3.	Your return was accepted on Allow 4 to 6 weeks for the processing of your return.  The Earned Income Credit or a dependent's exemption on your return may be reduced or disallowed due to a child's name and social security number mismatch.				
4.	Your electronic funds withdrawal payment request was accepted for processing.				
5.	Your electronic funds withdrawal payment request was not accepted for processing. Refer to the "If You Owe Tax" section.				

DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

#### If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at <a href="https://www.irs.gov">www.irs.gov</a>, or you can call the IRS toll-free at 1-800-829-1040.

#### If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to www.irs.gov and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

EEA www.irs.gov Form **9325** (Rev. 1-2017)

The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

#### If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to <a href="https://www.irs.gov/e-pay">www.irs.gov/e-pay</a>.

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to <a href="https://www.irs.gov">www.irs.gov</a>. You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

#### If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

#### Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. **If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.** 

#### **Instructions for Electronic Return Originators**

Line 2 - PIN Presence Indicator - Check box 2 if the taxpayer entered a PIN or authorized the ERO to enter or generate the PIN for the taxpayer, and the Acknowledgement File PIN Presence Indicator is a "Practitioner PIN," "Self-Select PIN" or "Online Filer PIN." Form 8879, IRS *e-file* Signature Authorization, is required if the ERO enters or generates the PIN or if the Practitioner PIN method is used. Use Form 8453, U.S. Individual Income Tax Transmittal for an IRS *e-file* Return, to send required paper forms or supporting documentation listed next to the form check boxes (do not send Forms W-2, W-2G, or 1099R).

- Line 3 Exception Processing Check box 3 if the Acknowledgement File Acceptance Code equals "Exception." The acceptance code indicates that this return has been previously rejected and this subsequent submission still has invalid data.
- **Line 4** Payment Acknowledgement Literal Check box 4 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field equals "Payment Request Received."
- **Line 5** Payment Acknowledgement Literal Check box 5 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field does not equal "Payment Request Received." If box 5 is checked, inform the taxpayer that he/she must pay by check, money order, debit card, or credit card.

Note: EROs can use the Acknowledgement File information, translated by the transmitter, to complete Form 9325.

I ( - \		Summary of Estimates				
lame(s) as shown on return	אורטאד הייאיריי	7. T		Your SSN/EIN	20_5010	
AKSHAI K & CH Tederal	ANCHAL KUNCH	AL		] 553-	39-5912	
orm: 1040-ES						
		Payment Schedule				
oue Date	04-18-2017	06-15-2017	09-15-2017	01-16-2018	Total	
otal Installment Amount	19,110	19,110	19,110	19,110	76,440	
Overpayment Applied	0	0	0	0	0	
let Installment Due	19,110	19,110	19,110	19,110	76,440	
mount Actually Paid		Taxpayer Records				
ate Paid						
Check #/Confirmation						
			•			

	1040				Interest I	Listing				2016	
NAME(S) AS SHOWN ON RETURN AKSHAI K & CHANCHAL RUNCHAL			SSN 553-39-5912								
TSJ	NAME OF PAYER	RES ST	INTEREST INCOME	PENALTY FOR EARLY WITHDRAWAL	UNITED STATES GOVERNMENT INTEREST	RESIDENT STATE INTEREST	OTHER STATE INTEREST	NOMINEE INTEREST	ACCRUED INTEREST	OTHER TAX-EXEMPT INTEREST	FEDERAL TAX WITH/HELD
т	CHASE	CA	283	1		1		1	1	'	
J	QUICKEN LOANS	CA	64	1		, ,	1	1	1	1	
T	RPM INVESTMENTS INC	CA	59	1		, ,	1	1	1	1	1
T	RPM INVESTMENTS INC	CA	52	1	1	1	1	1	ſ.	1	1
T	STATE OF CALIFORNIA	CA	122	1		, ,	1	1	1	1	1
T	UNITED SHOLESALE MORTGAGE	CA	94	1		 		1	1	1	
	TOTALS	#	674			<del></del>			<del></del>		
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				1				1	1		
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1040	Overflow Statement	2016

Name(s) as shown on return

Your Social Security Number

AKSHAI K & CHANCHAL RUNCHAL 553-39-5912

### Schedule A, Line 5 - STATE AND LOCAL INCOME TAXES

Description		Amount
From Estimated Tax Payments	\$	5 <b>,</b> 000
CALIFORNIA		23,829
Total:	Ś	28,829

#### Worksheet 1 Forms 1040, 1040A

# Social Security Benefits Worksheet Figuring Your Taxable Benefits

(Keep for your records)

2016

Name(s) as shown on return

Tax ID Number

553-39-5912 AKSHAI K & CHANCHAL RUNCHAL Before you begin: • If you are married filing separately and you lived apart from your spouse for all of 2016, enter "D" to the right of the word "benefits" on Form 1040, line 20a, or Form 1040A, line 14a. • Do not use this worksheet if you repaid benefits in 2016 and your total repayments (box 4 of Forms SSA-1099 and RRB-1099) were more than your gross benefits for 2016 (box 3 of Forms SSA-1099 and RRB-1099). None of your benefits are taxable for 2016. For more information, see Repayments More Than Gross Benefits. • If you are filing Form 8815, Exclusion of Interest From Series EE and I U.S. Savings Bonds Issued After 1989, do not include the amount from line 8a of Form 1040 or Form 1040A on line 3 of this worksheet. Instead, include the amount from Schedule B (Form 1040A or 1040), line 2. 1. Enter the total amount from box 5 of ALL your Forms SSA-1099 and RRB-1099. **3.** Combine the amounts from: Form 1040: Lines 7, 8a, 9a, 10 through 14, 15b, 16b, 17 through 19, and 21 **5.** Enter the total of any exclusions/adjustments for: • Adoption benefits (Form 8839, line 28), • Foreign earned income or housing (Form 2555, lines 45 and 50, or Form 2555-EZ, line 18), and • Certain income of bona fide residents of American Samoa (Form 4563, line 15) or Puerto Rico .... 5. 7. Form 1040 filers: Enter the amounts from Form 1040, lines 23 through 32, and any write-in adjustments you entered on the dotted line next to line 36. Form 1040A filers: Enter the amounts from Form 1040A, lines 16 and 17 · · · · · · · · · · · · · · · · 7. 8. Is the amount on line 7 less than the amount on line 6? **STOP** None of your social security benefits are taxable. Enter -0- on Form 1040, line 20b, or Form 1040A, line 14b. X Yes. 9. If you are: Married filing jointly, enter \$32,000 • Single, head of household, qualifying widow(er), or married filing separately and you lived apart from your spouse for all of 2016, enter \$25,000  $\dots$  32,00Note: If you are married filing separately and you lived with your spouse at any time in 2016, skip lines 9 through 16; multiply line 8 by 85% (.85) and enter the result on line 17. Then go to line 18. 10. Is the amount on line 9 less than the amount on line 8? **STOP** None of your benefits are taxable. Enter -0- on Form 1040, line 20b, or on Form 1040A, line 14b. If you are married filing separately and you lived apart from your spouse for all of 2016, be sure you entered "D" to the right of the word "benefits" on Form 1040, line 20a, or on Form 1040A, line 14a. X Yes. 11. Enter \$12,000 if married filing jointly; \$9,000 if single, head of household, qualifying widow(er), or **14.** Enter one-half of line 13 ..... **14.** \_\_\_\_\_ 6 , 000 6,000 **16.** Multiply line 12 by 85% (.85). If line 12 is zero, enter -0- ..... **16.** 230, 696 19. Taxable benefits. Enter the smaller of line 17 or line 18. Also enter this amount on Form 1040, line If you received a lump-sum payment in 2016 that was for an earlier year, also complete

Worksheet 2 or 3 and Worksheet 4 to see if you can report a lower taxable benefit.

**TIP** 

# **Deduction for Exemptions Worksheet - Form 1040, Line 42**

(Keep for your records)

2016

Name(s) as shown on return

AKSHAI K & CHANCHAL RUNCHAL

553-39-5912

1.	Is the amount on Form 1040, line 38, more than the amount shown on line 4 below for your filing status?					
	No. STOP! Multiply \$4,050 by the total number of exemptions claimed on Form 1040, line 6d, and enter the result on line 42.					
	X Yes. Continue					
2.	Multiply \$4,050 by the total number of exemptions claimed on Form 1040, line 6d	8,100				
3.	Enter the amount from Form 1040, line 38 325, 048					
4.	Enter the amount shown below for your filing status.					
	<ul> <li>Single - \$259,400</li> <li>Married filing jointly or qualifying widow(er) - \$311,300</li> <li>Married filing separately - \$155,650</li> <li>Head of household - \$285,350</li> </ul>					
5.	Subtract line 4 from line 3. If the result is more than \$122,500 (\$61,250 if married filing separately), STOP. Enter -0- on line 42					
6.	Divide line 5 by \$2,500 (\$1,250 if married filing separately). If the result is not a whole number, increase it to the next higher whole number (for example, increase .00004 to 1)					
7.	Multiply line 6 by 2% (0.02) and enter the result as a decimal (rounded to at least three places	. 0.12				
_						
8.	Multiply line 2 by line 7 · · · · · · · · · · · · · · · · · ·	972				
9.	<b>Deduction for exemptions.</b> Subtract line 8 from line 2. Enter the result here and on Form					
	1040, line 42	7,128				

Form 1040

# Investment Income If You Are Filing Form 1040

(Keep for your records)

2016

Name(s) as shown on return

AKSHAI K & CHANCHAL RUNCHAL

553-39-5912

	est and Dividends		
1.	Enter any amount from Form 1040, line 8a · · · · · · · · · · · · · · · · · ·	1	674
2.	Enter any amount from Form 1040, line 8b, plus any amount on Form 8814, line 1b	2	
3.	Enter any amount from Form 1040, line 9a · · · · · · · · · · · · · · · · · ·	3	59
4.	Enter the amount from Form 1040, line 21, that is from Form 8814 if you are filing that form to report		
	your child's interest and dividend income on your return. (If your child received an Alaska Permanent		
	Fund dividend, use Worksheet 2, on the next page, to figure the amount to enter on this line.)	4	
Capi	tal Gain Net Income		
5.	Enter the amount from Form 1040, line 13. If the amount on that line is a		
	loss, enter -0	_	
6.	Enter any gain from Form 4797, Sales of Business Property, line 7. If the		
	amount on that line is a loss, enter -0 (But, if you completed lines 8 and		
	9 of Form 4797, enter the amount from line 9 instead.) 6.	_	
7.	Subtract line 6 of this worksheet from line 5 of this worksheet. (If the result is less than zero,		
	enter -0)	7	
Roya	alties and Rental Income from Personal Property		
8.	Enter any royalty income from Schedule E, line 4, plus any income from the		
	rental of personal property shown on Form 1040, line 21, minus any expenses		
	from Schedule E, line 20, related to royalty income, plus any expenses from		
	the rental of personal property deducted on Form 1040, line 36 of personal		
	property deducted on Form 1040, line 36 (If the result is less than zero, enter -0)	8	
Pass	ive Activities		
9.	Enter the total of any net income from passive activities (such as income		
	included on Schedule E, lines 26, 29a (col. (g)), 34a (col. (d)), or 40) and the		
	total of any losses from passive activities (included on Schedule E, lines		
	26, 29b (col. (f)), 34b (col. (c)), or 40). (See instructions below for line 9.)		
	(if zero or less, enter -0)	9.	119,991
10.	Adjustment from EIC screen	10.	<u> </u>
	Add the amounts on lines 1, 2, 3, 4, 7, 8, 9 and 10. Enter the total. <b>This is your Investment Income</b>		
	Is the amount on line 11 more than \$3,400?	_	
	Yes. You cannot take the credit.		
	No. Go to Step 3 of the Form 1040 instructions for lines 66a and 66b to find out if you can take		
	the credit (unless you are using this publication to find out if you can take the credit; in that case, go		
	to Rule 7, next).		
Instr	uctions for line 9. In figuring the amount to enter on line 9, do not take into account any royalty income (or loss)		
	ded on line 26 of Schedule E or any amount included in your earned income. To find out if the income on line 26 or line 40	of	
	dule E is from a passive activity, see the Schedule E instructions. If any of the rental real estate income (or loss) included		
	dule E, line 26, is not from a passive activity, print "NPA" and the amount of that income (or loss) on the dotted line next to		

#### **Estimated Tax Worksheet for Next Year**

(Keep for your records)

Name(s) as shown on return

Tax ID Number

(SH	AI K & CHANCHAL RUNCHAL	553-39-5912
	Wages	1
	Interest and Dividend income	2
3.	Capital gain income	3
4.	Taxable IRA/Pension income	4
5.	Taxable Social Security income	5
6.	Business income	6
7.	Other income • • • • • • • • • • • • • • • • • • •	7
3.	Total income (add lines 1 thru 7)	8
	Adjustments to income	9
0.	Adjusted gross income (subtract line 9 from line 8)	10
۱.	Exemption amount (exemptions * \$4,050)	11.
2.	Subtract line 11 from line 10	12.
3.	Itemized or Standard deduction	13.
I.	Projected Taxable income (subtract line 13 from line 12)	14.
5.	Projected Tax · · · · · · · · · · · · · · · · · · ·	15.
ô.		16.
7.	Total tax	17.
3.	Projected Credits · · · · · · · · · · · · · · · · · · ·	18.
Э.	Subtract line 16 from line 15	19.
0.	Projected SE Tax - Taxpayer	20.
		21.
2.		22.
3a.	Add lines 19 through 22	23a.
	Earned income credit, additional child tax credit, fuel tax credit, net premium tax credit,	
	refundable American opportunity credit, and refundable credit from Form 8885	23b.
c.	Total 2017 estimated tax. Subtract line 23b from line 23a. If zero or less enter -0- · · · · · · · · · · · · · · · · · ·	23c.
	Multiply line 23c by 90% (66 2/3% for farmers and fishermen) ••••••• 24a.	
b.	Required annual payment based on prior year's tax (see instructions) 110% · · · · 24b. 76,401	-
c.	Required annual payment to avoid a penalty. Enter the smaller of line 24a or 24b	- 24c. 76,40
5.	Projected Withholding	<b>25</b> .
6.	Projected Net Tax (subtract line 25 from line 24c)	<b>26</b> . 76,40

Estimates will be computed on \$76,401. This is line 26.

Use screen ETA to provide accurate estimates of next year's income, deductions, and credits. If screen ETA is used, lines 1-24a of this worksheet will be autofilled.

#### **Itemized Deductions Worksheet-Line 29**

Schedule A

Name(s) as shown on return 2016 (Keep for your records) Tax ID Number AKSHAI K & CHANCHAL RUNCHAL 553-39-5912

1.	Enter the total of the amounts from Schedule A, lines 4, 9, 15, 19, 20, 27, and 28	1	63 <b>,</b> 851
2.	Enter the total of the amount from Schedule A, lines 4, 14, and 20, plus any gambling and casualty or theft losses		
	included on line 28	2	
	Caution! Be sure your total gambling and casualty or theft losses are clearly identified on		
	the dotted lines next to line 28.		
3.	Is the amount on line 2 less than the amount on line 1?		
	No. STOP. Your deduction isn't limited. Enter the amount from line 1 of this		
	worksheet on Schedule A, line 29. <b>Don't</b> complete the rest of this worksheet.		
	Yes. Subtract line 2 from line 1	3.	63,851
4.	Multiply line 3 by 80% (0.80)		
5.	Enter the amount from Form 1040, line 38		
6.	Enter \$311,300 if married filing jointly or qualifying widow(er); \$285,350 if head of		
	household; \$259,400 if single; or \$155,650 if married filing separately 6. 311, 300		
7.	Is the amount on line 6 less than the amount on line 5?		
	No. STOP. Your deduction isn't limited. Enter the amount from line 1 of this		
	worksheet on Schedule A, line 29. <b>Don't</b> complete the rest of this worksheet.		
	Yes. Subtract line 6 from line 5		
8.	Multiply line 7 by 3% (0.03)		
9.	Enter the <b>smaller</b> of line 4 or line 8	9.	412
10.	<b>Total itemized deductions.</b> Subtract line 9 from line 1. Enter the result here and on Schedule A, line 29 · · · ·	10.	63,439
	,		

#### Qualified Dividends and Capital Gain Tax Worksheet - Line 44 (Form 1040) Line 28 (Form 1040A)

(Keep for your records)

2016

AKSHAI K & CHANCHAL RUNCHAL

Name(s) as shown on return

Tax ID Number

553-39-5912

59,381

**Before you begin:** • See the instructions for line 44 to see if you can use this worksheet to figure your tax. Before completing this worksheet, complete Form 1040 through line 43. • If you do not have to file Schedule D and you received capital gain distributions, be sure you checked the box on line 13 of Form 1040. 1. Enter the amount from Form 1040, line 43 (Form 1040A, line 27). However, if you are filing Form 2555 or 2555-EZ (relating to foreign earned income), enter the amount from 3. Are you filing Schedule D?\* Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or line 16 is blank or a loss, enter -0-No. Enter the amount from Form 1040, line 13 (or Form 1040A, line 10) **5.** If filing Form 4952 (used to figure investment interest expense deduction), enter any amount from line 4g of that form. Otherwise, enter -0-6. Subtract line 5 from line 4. If zero or less, enter -0-7. Subtract line 6 from line 1. If zero or less, enter -0-8. Enter: \$37,650 if single or married filing separately, ..... **8**. 75,300 \$75,300 if married filing jointly or qualifying widow(er), \$50.400 if head of household. 9. Enter the smaller of line 1 or line 8 ..... 9. **15.** Enter: \$415,050 if single, \$233,475 if married filing separately, \$466,950 if married filing jointly or qualifying widow(er), \$441.000 if head of household. 24. Figure the tax on the amount on line 7. If the amount on line 7 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet **26.** Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet . . . . . . 26. 27. Tax on all taxable income. Enter the smaller of line 25 or line 26. Also include this amount on Form 1040, line 44 (Form 1040A, line 28). If you are filing Form 2555 or 2555-EZ, do not enter this amount on Form

1040, line 44 (or Form 1040A, line 28). Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet

\* If you are filing Form 2555 or 2555-EZ, see the footnote in the Foreign Earned Income Tax Worksheet before completing this line.

#### Qualified Dividends and Capital Gain Tax Worksheet - Line 44 (Form 1040) Line 28 (Form 1040A)

Computation for WK ES

(Keep for your records)

2016

Name(s) as shown on return

AKSHAI K & CHANCHAL RUNCHAL

Tax ID Number

553-39-5912

**Before you begin:** • See the instructions for line 44 to see if you can use this worksheet to figure your tax. Before completing this worksheet, complete Form 1040 through line 43. • If you do not have to file Schedule D and you received capital gain distributions, be sure you checked the box on line 13 of Form 1040. 1. Enter the amount from Form 1040, line 43 (Form 1040A, line 27). However, if you are filing Form 2555 or 2555-EZ (relating to foreign earned income), enter the amount from 3. Are you filing Schedule D?\* Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or line 16 is blank or a loss, enter -0-**No.** Enter the amount from Form 1040, line 13 (or Form 1040A, line 10) 5. If filing Form 4952 (used to figure investment interest expense deduction), enter any amount from line 4g of that form. Otherwise, enter -0-**6.** Subtract line 5 from line 4. If zero or less, enter -0-8. Enter: \$37,650 if single or married filing separately, ..... **8**. 75,300 \$75,300 if married filing jointly or qualifying widow(er), \$50.400 if head of household. 9. Enter the smaller of line 1 or line 8 **15.** Enter: \$415,050 if single, \$233,475 if married filing separately, \$466,950 if married filing jointly or qualifying widow(er), \$441.000 if head of household. 24. Figure the tax on the amount on line 7. If the amount on line 7 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet **26.** Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet . . . . . . 26. 27. Tax on all taxable income. Enter the smaller of line 25 or line 26. Also include this amount on Form 1040, line 44 (Form 1040A, line 28). If you are filing Form 2555 or 2555-EZ, do not enter this amount on Form 59,114 1040, line 44 (or Form 1040A, line 28). Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet \* If you are filing Form 2555 or 2555-EZ, see the footnote in the Foreign Earned Income Tax Worksheet before completing this line.

### Modified Adjusted Gross Income (MAGI) Form 8582, Line 7

(Keep for your records)

2016

Name(s) as shown on return Tax ID Number

AKSHAI K & CHANCHAL RUNCHAL 553-39-5912

ncome	Regular tax	Alt Min Tax
Wages · · · · · · · · · · · · · · · · · · ·		
Interest income before Series EE bond exclusion	674	674
Dividend income · · · · · · · · · · · · · · · · · · ·		5.9
Taxable state and local refunds	8,469	
Alimony received	<u> </u>	
Nonpassive business income or (loss)		
Schedule D and Form 4797 · · · · · · · · · · · · · · · · · ·		
Taxable IRA distributions	6,111	6,111
Taxable pensions and annuities	24,089	24,089
Nonpassive partnership income or (loss) (including overall PTP gains and sold PTP losses)	142,241	142,242
Nonpassive S corporation income or (loss)		
Nonpassive estate and trust income or (loss)		
Real Estate Mortgage Investment Conduits (REMICS)		
Royalty Income		
Net rental real estate gains for a real estate professional or non-passive rental		
Overall loss from the entire disposition of a passive activity		
Nonpassive farm income or (loss)		
Unemployment compensation		
Other income		
Total income	181,643	173,175
Total medine	101,045	175,175
Adjustments		
Educator expenses		
Certain business expenses of reservists, performing artists, and		
fee-based government officials		
Health savings account deduction		
Moving expenses · · · · · · · · · · · · · · · · · ·		
Self-employed SEP, SIMPLE, and qualified plans		
Self-employed health insurance deduction		
Penalty on early withdrawal of savings		
Alimony paid		
Other adjustments		
Outor daylocations		
Total adjustments	0	(
Subtract total adjustments from total income	181,643	173,175
MAGI adjustment from input screen E2		

#### **Passive Activity Deduction Worksheet**

Tax ID Number

Form 1040 or 1041 (Keep for your records) 2016

553-39-5912 AKSHAI K & CHANCHAL RUNCHAL PAN 4 Activity 4416 KATHERINE AVE Form SCH E 100% Disposed Of NO **Regular Tax Loss Calculations Prior Year Current Year** Utilized in Losses Suspended Income/Loss **Current Year** To Next Year **Suspended Losses** Operating (28, 107)(28,107) Form 4797 - Part I Form 4797 - Part II TOTALS **Alternative Minimum Tax Loss Calculations Prior Year Current Year** Utilized in Losses Suspended **Current Year Suspended Losses** Income/Loss To Next Year

(28, 107)

(28, 107)

(28, 107)

(28, 107)

Name(s) as shown on return

Operating Form 4797 - Part I Form 4797 - Part II

**TOTALS** 

#### **Passive Activity Deduction Worksheet**

Form 1040 or 1041 (Keep for your records) 2016

Name(s) as shown on return Tax ID Number 553-39-5912 AKSHAI K & CHANCHAL RUNCHAL PAN 7 Activity MEADOW GLEN LLC Form SCH E 100% Disposed Of NO **Regular Tax Loss Calculations Prior Year Current Year** Utilized in Losses Suspended Income/Loss **Current Year** To Next Year **Suspended Losses** Operating (10,213)(10,213)Form 4797 - Part I Form 4797 - Part II TOTALS **Alternative Minimum Tax Loss Calculations Prior Year Current Year** Utilized in Losses Suspended **Current Year Suspended Losses** Income/Loss To Next Year (10,213)(10,213)Operating Form 4797 - Part I Form 4797 - Part II

(10,213)

(10,213)

**TOTALS** 

# Worksheet 1 For Form 8582, Lines 1a, 1b, and 1c (See instructions.)

2016

Name(s) as shown on return

Tax ID Number

KSHAI K & CHANCHAL RUNCI	Current	vear	Prior years		553-39-5912 erall gain or loss		
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss		
3106 INGLEWOOD BLVD 12029 CLOVER AVE CARRIAGE OAKS LLC 4416 KATHERINE AVE 2408 OCEAN PARK 14523 TUPPER STREET MEADOW GLEN LLC	39,230 41,339 32,585 0 25,792 19,365	0 0 0 28,107 0 0 10,213	0 0 0 0 0 0	39,230 41,339 32,585 0 25,792 19,365	28,10 10,21		
Total. Enter on Form 8582, lines 1a, 1b, and 1c ▶	158,311	38,320	0	158,311	38,32		

# FOR ALT MIN TAX PURPOSES ONLY

# **Passive Activity Loss Limitations**

► See separate instructions.

Attach to Form 1040 or Form 1041.

Department of the Treasury
Internal Revenue Service (99)

Information about Form 8582 and its instructions is available at www.irs.gov/form8582.

OMB No. 1545-1008

2016

Attachment
Sequence No. 88

Name(s) shown on return

Form

8582

Identifying number

AK	SHAI K & CHANCHAL RUNCHAL		553-39-5912
Pa	rt I 2016 Passive Activity Loss		
	Caution: Complete Worksheets 1, 2, and 3 before completing Part I.		
Ren	tal Real Estate Activities With Active Participation (For the definition of active participation, see		
Spe	cial Allowance for Rental Real Estate Activities in the instructions.)		
1a	Activities with net income (enter the amount from Worksheet 1,		
	column (a))		
b	Activities with net loss (enter the amount from Worksheet 1, column		
	(b)) 1b ( 38,320)		
С	Prior years unallowed losses (enter the amount from Worksheet 1,		
	column (c))		
d	Combine lines 1a, 1b, and 1c	1d	119,992
Com	mercial Revitalization Deductions From Rental Real Estate Activities		
2a	Commercial revitalization deductions from Worksheet 2, column (a) · · · 2a (		
b	Prior year unallowed commercial revitalization deductions from		
	Worksheet 2, column (b)		
С	Add lines 2a and 2b	2c	( )
All C	Other Passive Activities		
3a	Activities with net income (enter the amount from Worksheet 3,		
	column (a))		
b	Activities with net loss (enter the amount from Worksheet 3, column		
	(b)) · · · · · · · · · · · · · · · · · ·		
С	Prior years unallowed losses (enter the amount from Worksheet 3,		
	column (c)) 3c (		
d	Combine lines 3a, 3b, and 3c	3d	
4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with		
	your return; all losses are allowed, including any prior year unallowed losses entered on line 1c,		
	2b, or 3c. Report the losses on the forms and schedules normally used	4	119,992
	If line 4 is a loss and:  • Line 1d is a loss, go to Part II.		
	<ul> <li>Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.</li> </ul>		
	<ul> <li>Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to</li> </ul>	line 15	5.
	tion: If your filing status is married filing separately and you lived with your spouse at any time during the year, <b>d</b>	o not	complete
	II or Part III. Instead, go to line 15.		
Pa	rt II Special Allowance for Rental Real Estate Activities With Active Participation	l	
	Note: Enter all numbers in Part II as positive amounts. See instructions for an example.		Г
5	Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4	5	
6	Enter \$150,000. If married filing separately, see instructions		
7	Enter modified adjusted gross income, but not less than zero (see inst.)		
	Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9,		
_	enter -0- on line 10. Otherwise, go to line 8.		
8	Subtract line 7 from line 6		
9	Multiply line 8 by 50% (0.5). <b>Do not</b> enter more than \$25,000. If married filing separately, see instructions	9	
10	Enter the smaller of line 5 or line 9	10	0
Da	If line 2c is a loss, go to Part III. Otherwise, go to line 15.	) I	F-4-4- A-41-141
Pa	rt III Special Allowance for Commercial Revitalization Deductions From Rental F	Keai	Estate Activities
	Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.		
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	
12	Enter the loss from line 4	12	
13	Reduce line 12 by the amount on line 10	13	
14 Da	Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14	
	rt IV Total Losses Allowed	1=	<u> </u>
15	Add the income, if any, on lines 1a and 3a and enter the total	15	
16	Total losses allowed from all passive activities for 2016. Add lines 10, 14, and 15. See	I	

instructions to find out how to report the losses on your tax return

#### FOR ALT MIN TAX PURPOSES ONLY Worksheet 1 For Form 8582, Lines 1a, 1b, and 1c

(See instructions.)

2016

Name(s) as shown on return

Tax ID Number

553-39-5912 AKSHAI K & CHANCHAL RUNCHAL Current year Prior years Overall gain or loss (a) Net income (b) Net loss Name of activity (c) Unallowed (d) Gain (e) Loss (line 1b) loss (line 1c) (line 1a) 3106 INGLEWOOD BLVD 39,230 39,230 0 0 0 12029 CLOVER AVE 41,340 0 41,340 CARRIAGE OAKS LLC 32,585 0 0 32,585 0 0 28,107 4416 KATHERINE AVE 28,107 2408 OCEAN PARK 25,792 0 25,792 0 0 14523 TUPPER STREET 19,365 0 19,365 10,213 MEADOW GLEN LLC 10,213 0 Total. Enter on Form 8582, lines 1a, 1b, and 1c . . . . . . . . . . . ▶ 158,312 38,320 0 158,312 38,320

Federal Supporting Statement DO NOT FILE. KEEP FOR YOUR RECO	nts DRDS. 2016
me(s) as shown on return  KSHAI K & CHANCHAL RUNCHAL	Your Social Security Number 553-39-5912
ROHAT K & CHANCHAL KUNCHAL	333-39-3912
Form 8960 Line 4b Item Detail	
K-1: MD LIVE OAK PROPERTIES LLC K-1: MD LIVE OAK PROPERTIES LLC	(71,121)
	(71 <b>,</b> 120)
Total	(142,241)

# Lines 9 and 10 - Application of Itemized Deduction Limitations on Deductions Properly Allocable to Investment Income Worksheet - continued

Form 8960

(Keep for your records)

2016

10,707

Name(s) as shown on return Tax ID Number 553-39-5912 AKSHAI K & CHANCHAL RUNCHAL

investment income from column (C) of Part II:				
<u>Description</u>	<u>Line</u>	<u>Amount</u>		
(a)				
(b)				
Enter the amount of state, local, and foreign income	taxes that are prop	erly		
allocable to investment income See. be	elow for c	alculation. 2	10,707	
Enter the amounts of other Itemized Deductions sub				
and properly allocable to investment income before	any itemized deduc	tion		
limitations (Description and Form 8960 line number)	:			
<u>Description</u>	<u>Line</u>	<u>Amount</u>		
(a)				
(b)				
Enter the total deductions properly allocable to inves				40 50
the sum of lines 1 through 3			· · · · · · · · · · · 4	10,70
Enter the amount of total itemized deductions reported				
line 40		5	63 <b>,</b> 439	
Enter all other itemized deductions allowed but not s	ubject to the section	n 68		
deduction limitation:				
(a) Investment Interest Expense				
(b) Casualty Losses (other than losses described	in section			
<b>(b)</b> Casualty Losses (other than losses described 165(c)(1))	in section			
<b>(b)</b> Casualty Losses (other than losses described 165(c)(1))	in section			
<ul><li>(b) Casualty Losses (other than losses described 165(c)(1))</li><li>(c) Medical Expenses</li></ul>	in section			
<b>(b)</b> Casualty Losses (other than losses described 165(c)(1))	in section		s. <u> </u>	
<ul> <li>(b) Casualty Losses (other than losses described 165(c)(1))</li> <li>(c) Medical Expenses</li> <li>(d) Gambling Losses</li> <li>(e) Total of lines 6(a) through 6(d)</li> </ul>	in section	6e		63,43
<ul> <li>(b) Casualty Losses (other than losses described 165(c)(1))</li> <li>(c) Medical Expenses</li> <li>(d) Gambling Losses</li> <li>(e) Total of lines 6(a) through 6(d)</li> <li>Subtract line 6e from line 5</li> </ul>	in section		7.	
<ul> <li>(b) Casualty Losses (other than losses described 165(c)(1))</li> <li>(c) Medical Expenses</li> <li>(d) Gambling Losses</li> <li>(e) Total of lines 6(a) through 6(d)</li> <li>Subtract line 6e from line 5</li> <li>Enter the lesser of line 7 or line 4</li> </ul>	in section	6e	7	10,70
(b) Casualty Losses (other than losses described 165(c)(1))	in section	6e		10,70
(b) Casualty Losses (other than losses described 165(c)(1))	in section	6e		10,70
(b) Casualty Losses (other than losses described 165(c)(1))	in section	6e		10,70
<ul> <li>(b) Casualty Losses (other than losses described 165(c)(1))</li> <li>(c) Medical Expenses</li> <li>(d) Gambling Losses</li> <li>(e) Total of lines 6(a) through 6(d)</li> <li>Subtract line 6e from line 5</li> <li>Enter the lesser of line 7 or line 4</li> <li>This is the amount of itemized deductions that and 68 deduction limitations. Use Part IV of the on Form 8960, lines 9 and 10.</li> </ul>	in section	6e		10,70
(b) Casualty Losses (other than losses described 165(c)(1))	in section	able to investment income	after the application of the section	10,70
(b) Casualty Losses (other than losses described 165(c)(1))	in section	able to investment income concile this amount to the i	after the application of the section	10,70 ns 67 orted
(b) Casualty Losses (other than losses described 165(c)(1))	in section	able to investment income concile this amount to the i	after the application of the section	10,70 ns 67 orted  120,72 325,04
(b) Casualty Losses (other than losses described 165(c)(1))	in section	able to investment income concile this amount to the investment income to the investment income to the investment income to the investment income investment investment income investment investmen	after the application of the section individual deduction amounts repo	10,70 ns 67 orted
(b) Casualty Losses (other than losses described 165(c)(1))	in section	able to investment income concile this amount to the income the samount to the income and the samount to the income and the samount to the income and the samount to the sa	after the application of the section ndividual deduction amounts repo	10,70 ns 67 orted  120,72 325,04

NOTE: Used the "reasonable method" example from the instructions for Form 8960.

5. Amount for line 2 of this worksheet (line 3 X line 4).....

#### Lines 9 and 10 - Application of Itemized Deduction Limitations on Deductions Property Allocable to Investment Income Worksheet - continued

Form 8960

(Keep for your records)

2016

Name(s) as shown on return

AKSHAI K & CHANCHAL RUNCHAL

553-39-5912

				(B)		
			THE	n Part III, line 4, N divide line 8 by		(C)
(A)  Reenter the amounts and descriptions from Part I  Miscellaneous Itemized Deductions properly allocab	amo <b>IF</b> repo	4 AND enter the punt in column (B). If the amounts orted on Part III,		Multiply the individual amounts in column (A) by the amount in column (B). Enter		
investment income: <u>Description</u>	<u>Line</u>	<u>Amount</u>	eq	nes 4 and 8 are ual, <b>THEN</b> enter 00 in column (B).		these amounts in the appropriate location on lines 9 and 10.
1. (a)			x		= .	
(b)			x		= .	
2. State, local, and foreign income taxes temized Deductions Subject to Section 68 included 3 of Part III:	_ l on Line	10,707	х	1.00000	= .	10,70
3. (a)			x		= .	
(b)					_	

3106 INGLEWOOD BLVD For your records only

2016 PAGE 1

Name(s) as shown on return

\* Item was disposed

of during current year.

2	KSHAI K & CHANCHAL RU	JNCHAL												553-39-5912	
No.	Description	Date	Cost	Salvage	Business percentage	Section 179	Depreciation Basis	Life	Method	Rate	Current depr.	Accumulated Depreciation	Prior expense	Bonus depreciation	AMT Current
1	3106 INGLEWOOD AVE	10011992	260,000	91,000	100.00		169,000	27.5	SL MM	3.636	6,145	147,235			6,145
2	3106 INGLEWOOD BLVD	02152011	20,710		100.00		20,710	27.5	SL MM	3.636	753	4,424			753
	Totals		280,710	91,000			189,710				6,898	151,659			6,8

12029 CLOVER AVE

2016

PAGE 1

Name(s) as shown on return

\* Item was disposed

of during current year.

AKSHAI K & CHANCHAL RUNCHAL

1	AKSHAI K & CHANCHAL RU	JNCHAL												553-39-5912	
No.	Description	Date	Cost	Salvage	Business percentage	Section 179	Depreciation Basis	Life	Method	Rate	Current depr.	Accumulated Depreciation	Prior expense	Bonus depreciation	AMT Current
4	12029 CLOVER AVE-IMP	09012013	160,214		100.00		160,214	27.5	SL MM	3.636	5,826	19,349			5,825
	I	03152014	73,201		100.00		73,201		1	3.636					2,662
_															
	Totals		233,415				233,415				8,488	26,780			8,48

CARRIAGE OAKS LLC

2016 PAGE 1

For your records only

Name(s) as shown on return

\* Item was disposed

of during current year.

AKSHAI K & CHANCHAL RUNCHAL

	AKSHAI K & CHANCHAL RU	JNCHAL												553-39-5912	
No.	Description	Date	Cost	Salvage	Business percentage	Section 179	Depreciation Basis	Life	Method	Rate	Current depr.	Accumulated Depreciation	Prior expense	Bonus depreciation	AMT Current
_	Description	Date			percentage				Method SL MM	Rate 1.603	depr.	Depreciation	Prior	Bonus	
	Totals		2,104,110				1,634,710				26,204	26,204			26,20

4416 KATHERINE AVE
For your records only

2016 PAGE 1

Name(s) as shown on return

\* Item was disposed

of during current year.

AKSHAI K & CHANCHAL RUNCHAL

No. Description Date Cost Salvage Business Section Percentage Life Method Rate Current depr. Accumulated Prior Bonus depreciation 179 Sains 315,700 27.5 St MM 3.636 11,479 91,356	AMT Current 11,479
3 4416 KATHERINE AVE 01022009 315,700 100.00 315,700 27.5 SL NM 3.636 11,479 91,356	11,479
Totals 315,700 315,700 11,479 91,356	11,4

\* Item was disposed 2408 OCEAN PARK of during current year.

# **Depreciation Detail Listing**

2016 PAGE 1

For your records only

Name(s) as shown on return

AKSHAI K & CHANCHAL RUNCHAL														553-39-5912		
No.	Description	Date	Cost	Salvage	Business percentage	Section 179	Depreciation Basis	Life	Method	Rate	Current depr.	Accumulated Depreciation	Prior expense	Bonus depreciation	AMT Current	
7	2408 OCEN PARK	02011985	425,000	127,500	100.00		297,500	27.5		0						
	Totals		425,000	127,500			297,500									

\* Item was disposed Deprect of during current year.

# **Depreciation Detail Listing**

14523 TUPPER STREET For your records only

2016 PAGE 1

Name(s) as shown on return

AKSHAI K & CHANCHAL RUNCHAL

Social security number/EIN
553-39-5912

	AKSHAI K & CHANCHAL RU	JNCHAL													553-39-5912	
No.	Description	Date	Cost	Salvage	Business percentage	Section 179	Depreciation Basis	Life	Meth	nod	Rate	Current depr.	Accumulated Depreciation	Prior expense	Bonus depreciation	AMT Current
5	14523 TUPPER STREET	03142012	1,020,413	428,573	100.00		591,840	27.5	SL	MM	3.636	21,519	103,117			21,519
6	TUPPER STREET-IMPROVE	03012014	17,515		100.00		17,515	27.5	SL	MM	3.636	637	1,778			637
11	LH IMPROVEMENTS	07012016	23,734		100.00		23,734	27.5	SL	MM	1.667	396	396			396
	Totals		1,061,662	428,573			633,089					22,552	105,291			22,552

MEADOW GLEN LLC For your records only

2016

PAGE 1

Name(s) as shown on return

\* Item was disposed

of during current year.

P	KSHAI K & CHANCHAL RU	JNCHAL												553-39-5912	
No.	Description	Date	Cost	Salvage	Business percentage	Section 179	Depreciation Basis	Life	Method	Rate	Current depr.	Accumulated Depreciation	Prior expense	Bonus depreciation	AMT Current
10	MEADOW GLEN	05052016	1,942,256	438,100	100.00		1,504,156	39	SL MM	1.603	24,112	24,112			24,112
	Totals		1,942,256	438,100			1,504,156				24,112	24,112			24,11

(Keep for your records)

		(Keep to	r your records)			201	
	is ahown on retui	n CHANCHAL RUNCHAL				Tax ID N	lumber -39-5912
Form	Multi-Form	Description	Date	Basis	Method	Life	Deduction
E	1	3106 INGLEWOOD AVE	10011992		SL	27.5	
						27.5	
E	1	3106 INGLEWOOD BLVD IMPR			SL		
E	4	4416 KATHERINE AVE	01022009		М	27.5	-
E	2	12029 CLOVER AVE-IMPROVE			SL	27.5	
E	6	14523 TUPPER STREET	03142012		М	27.5	
E	6	TUPPER STREET-IMPROVEMEN	03012014	17,515	M	27.5	
E	5	2408 OCEN PARK	02011985	297,500	M	27.5	
E	2	IMPROVEMENTS	03152014	73,201	М	27.5	2,662
E	3	CARRIAGE OAKS PARTNERS		1,634,710	SL	39	41,916
E	7	MEADOW GLEN		1,504,156	SL	39	38 <b>,</b> 568
E	6	LH IMPROVEMENTS	07012016		SL	27.5	863
_			0,012010	20,701		27.0	0 0 0
		TOTAL					130,371
		IOIAL					130,371
	I	I	I	I	1	ļ	

# Projected State and Local Income Tax Refund Worksheet For 2017

This taxpayer is subthe attout to will have the transmitted the taxable next year. The amount of the state refunder to the attack the transmitted with the taxable next year.

_			not be
	ne(s) account of the complete accuracy.	Tax ID Number	
AF	KSHAI K & CHANCHAL RUNCHAL	553-39	-5912
	Worksheet 1 - 2016 Schedule A worksheet as filed		
	Enter the total amount from Schedule A, line 5		<u> 28,829</u>
2.	Multiply line 1 by 80% (.80)		23,063
	Enter the amount from 1040, line 38		<u>25,048</u>
4.	Enter: \$311,300(MFJ) / \$285,350(HOH) / \$259,400(S) / \$155,650(MFS)		11,300
5.	Subtract line 4 from line 3	5	13,748
	Multiply line 5 by 3% (.03)	6	412
7.	Enter the smaller of line 2 or line 6 · · · · · · · · · · · · · · · · · ·	7	412
8.	Total state and local taxes deducted on 2016 return. Subtract line 7 from line 1	8	28,417
	Worksheet 2 - 2016 Schedule A worksheet recomputed using original Schedule A line 5 less state ref	funds	
1.	Enter the total state taxes actually paid in 2016 (line 1 above less		
	state refund that will be received on 2017 Form 1099-G)		19 <b>,</b> 077
	Multiply line 1 by 80% (.80)		15,262
	Enter the amount from 1040, line 38		25,048
4.	Enter: \$311,300(MFJ) / \$285,350(HOH) / \$259,400(S) / \$155,650(MFS)	<b>4</b> . 3	11,300
5.	Subtract line 4 from line 3	5	13,748
6.	Multiply line 5 by 3% (.03)	6	412
7.	Enter the smaller of line 2 or line 6 · · · · · · · · · · · · · · · · · ·	7	412
8.	Total state and local taxes that would have been deducted if Schedule A line 5		
	reflected only the portion of the total state and local taxes paid that were due. Subtract line 7 from line 1	8.	18,665
	Worksheet 3 - Difference		
1.	Enter the amount from line 8, worksheet 1 above	1.	28,417
2.	Enter the amount from line 8, worksheet 2 above	2.	18,665
3.	Subtract line 2 from line 1. This is the <b>maximum</b> amount of the total refund that is taxable in 2017	3.	9,752
	If line 3 is -0- or less, <b>STOP.</b> None of your state refund is taxable.		
	If line 3 is greater than -0-, complete worksheet 4 below to determine		
	how much of your state refund is taxable.		
	Worksheet 4 - State and Local Income Tax Refund Worksheet		
1.	Enter the amount from line 3, worksheet 3 above	1.	9,752
2.	Enter your total allowable itemized deductions from your 2016 Schedule A line 29	2.	63,439
	Note. If your 2016 filing status was MFS and your spouse itemized deductions		
	in 2016, skip lines 3, 4, and 5, and enter the amount from line 2 on line 6 below.		
3.	Enter the amount shown below for the filing status claimed on your 2016 Form 1040.		
	Enter: \$6,300(S) / \$12,600(MFJ) / \$6,300(MFS) / \$9,300(HOH)	3.	12,600
4.	Did you fill in line 39a on your 2016 Form 1040?		,
	No. Enter -0		
	Yes. Multiply the number in the box on line 39a of your 2016 Form 1040 by:		
	\$1,250 if your 2016 filing status was MFJ or MFS or QW;		
	\$1,550 if your 2016 filing status was single or HOH	4.	2,500
5.	Add lines 3 and 4	5.	15,100
1	Is the amount on line 5 less than the amount on line 2?		10,100
"	No. STOP None of your refund is taxable.		
	Yes. Subtract line 5 from line 2	6.	48,339
7	Enter the smaller of line 1 or line 6	7.	9,752
	Taxable income for 2016 · · · · · · · · · · · · · · · · · · ·		54,481
	Taxable part of your refund. If line 8 is zero or more, enter the amount from line 7. If line 8 is less than zero, add lines	<u>.                                    </u>	
•	7 and 8, and enter the result but not less than zero.	9.	9,752
	Worksheet 5 - State and Local Income Tax and General State Sales Tax Computation	<u></u>	- J , 1 J Z
1	2016 State Income Tax Deduction from Schedule A, Line 5	1.	28,829
	2016 State General Sales Tax Deduction not taken on Schedule A, Line 5	2.	2,795
1	Difference		26,034
	Taxable part of your refund from line 9 of worksheet 4	4.	9,752
	Lesser of line 3 or 4	5.	9,752
"	This is the maximum taxable portion of your state refund.	<u>-</u>	3,132
L	This is the maximum taxable portion or your state returne.		

# Carryover Worksheet List of items that will carryover to the 2017 tax return

(Keep for your records)

2016

Name(s) as shown on return

AKSHAI K & CHANCHAL RUNCHAL

Tax ID Number

553-39-5912

Itemized Deductions	Carryover Amount
Contributions subject to 100% of AGI limitations	•
Contributions subject to 50% of AGI limitations	
Contributions subject to 30% of AGI limitations (50% capital gains appreciated property)	
Contributions subject to 30% of AGI limitations	
Contributions subject to 20% of AGI limitations (30% capital gains appreciated property)	
Taxable state and local refunds to Form 1040, line 10	9,752
State/local taxes paid in 2017 to flow to the Schedule A	23,162
Preparer Fee to flow to the Schedule A	775
State donations and contributions carryover	
State overpayment applied to next year · · · · · · · · · · · · · · · · · · ·	
Expenses	
Office in home operating expenses	
Office in home excess casualty losses and depreciation	
Disallowed investment interest expense AMT Reg. Tax	
Section 179 expense · · · · · · · · · · · · · · · · · · ·	
Operating expenses, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use	
Excess depreciation, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use	
Losses	
Short-term capital loss · · · · · · · · · · · · · · · · · ·	
Long-term capital loss · · · · · · · · · · · · · · · · · ·	
Net operating loss · · · · · · · · · · · · · · · · · ·	
Nonrecaptured net section 1231 losses from WK_1231C · · · · · · · · AMT Reg. Tax	
Credits	
Mortgage interest credit	
Credit for prior year minimum tax	
Foreign Tax credit · · · · · · · · · · · · · · · · · · ·	
District of Columbia first time home owner's credit	
Res. energy efficient property credit • • • • • • • • • • • • • • • • • • •	
Overpayment applied to next year's estimates	
Estimated Tax Payment 1 19, 110 Estimated Tax Payment 2	19,110
Estimated Tax Payment 3 19, 110 Estimated Tax Payment 4	19,110
Federal tax liability for 2210 calculation	69,455
State tax liability for state 2210 calculation	18,410
IRA basis · · · · · · · · Spouse Spouse	
Passive Activity  At Risk Limitations	

#### FOR ALT MIN TAX PURPOSES ONLY

### Qualified Dividends and Capital Gain Tax Worksheet - Line 44 (Form 1040) Line 28 (Form 1040A)

(Keep for your records)

2016

Name(s) as shown on return

AKSHAI K & CHANCHAL RUNCHAL

Tax ID Number

553-39-5912

Be	fore you begin: • See the instructions for line 44 to see if you can use this worksheet to figure your tax.
	<ul> <li>Before completing this worksheet, complete Form 1040 through line 43.</li> </ul>
	If you do not have to file Schedule D and you received capital gain distributions, be sure
	you checked the box on line 13 of Form 1040.
4	Enter the amount from Form 1040, line 42 (Form 1040A, line 27). However, if you are filling Form
١.	Enter the amount from Form 1040, line 43 (Form 1040A, line 27). However, if you are filing Form 2555 or 2555-EZ (relating to foreign earned income), enter the amount from
2.	line 3 of the Foreign Earned Income Tax Worksheet
3.	Are you filing Schedule D?*
J.	Yes. Enter the smaller of line 15 or 16 of Schedule D. If either
	line 15 or line 16 is blank or a loss, enter -0-
	No. Enter the amount from Form 1040, line 13 (or Form 1040A, line 10)
4.	Add lines 2 and 3
<del>5</del> .	If filing Form 4952 (used to figure investment interest expense deduction),
0.	enter any amount from line 4g of that form. Otherwise, enter -0-
6.	Subtract line 5 from line 4. If zero or less, enter -0
7.	Subtract line 6 from line 1. If zero or less, enter -0
8.	Enter:
٠.	\$37,650 if single or married filing separately,
	\$75,300 if married filing jointly or qualifying widow(er),
	\$50,400 if head of household.
9.	Enter the smaller of line 1 or line 8 • • • • • • • • • • • • • • • • • •
10.	Enter the smaller of line 7 or line 9
11.	Subtract line 10 from line 9. This amount is taxed at 0%
12.	Enter the smaller of line 1 or line 6
13.	Enter the amount from line 11
14.	Subtract line 13 from line 12
15.	Enter:
	\$414,050 if single,
	\$233,475 if married filing separately,
	\$466,950 if married filing jointly or qualifying widow(er),
	\$441,000 if head of household.
16.	Enter the smaller of line 1 or line 15
17.	Add lines 7 and 11
18.	Subtract line 17 from line 16. If zero or less, enter -0
19.	Enter the smaller of line 14 or line 18
20.	Multiply line 19 by 15% (.15)
21.	Add lines 11 and 19
22.	Subtract line 21 from line 12
23.	Multiply line 22 by 20% (.20)
24.	Figure the tax on the amount on line 7. If the amount on line 7 is less than \$100,000, use the Tax Table
0.5	to figure the tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet 24.
	Add lines 20, 23, and 24
26.	Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table
27	to figure the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet 26.
21.	Tax on all taxable income. Enter the smaller of line 25 or line 26. Also include this amount on Form
	1040, line 44 (Form 1040A, line 28). If you are filing Form 2555 or 2555-EZ, do not enter this amount on Form
	1040, line 44 (or Form 1040A, line 28). Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet • 27.
* If yo	bu are filing Form 2555 or 2555-EZ, see the footnote in the Foreign Earned Income Tax Worksheet before completing this line.

#### **Exemption Worksheet - Line 29**

Form 6251 2016 (Keep for your records)

Name(s) as shown on return Tax ID Number 553-39-5912

Note. If Form 6251, line 28, is equal to or more than: \$335,300 if single or head of household; \$494,900 if married filing jointly or qualifying widow(er); or \$247,450 if married filing separately, your exemption is zero. Don't complete this worksheet; instead, enter the amount from Form 6251, line 28, on line 30 and go to line 31.

AKSHAI K & CHANCHAL RUNCHAL

<ol> <li>Enter: \$53,900 if single or head of household; \$83,800 if married filing jointly or qualifying widow(er); \$41,900 if married filing separately</li> <li>1.</li> </ol>	83,800
2. Enter your alternative minimum taxable income	
(AMTI) from Form 6251, line 28	
3. Enter: \$119,700 if single or head of household; \$159,700 if married filing	
jointly or qualifying widow(er); \$79,850 if married filing separately 3 159,700	
<b>4.</b> Subtract line 3 from line 2. If zero or less, enter -0-	
<b>5.</b> Multiply line 4 by 25% (.25) <b>5.</b>	35,060
6. Subtract line 5 from line 1. If zero or less, enter -0 If any of the three conditions under Certain Children	
Under Age 24 apply to you, complete lines 7 through 10. Otherwise, <b>stop here</b> and enter this amount on Form 6251, line 29, and go to Form 6251, line 30 · · · · · · · · · · · · · · · · · ·	48,740
7. Minimum exemption amount for certain children under age 24	\$7,400
8. Enter your earned income, if any (see instructions)8.	0
<b>9.</b> Add lines 7 and 8 <b>9.</b>	0
<b>10.</b> Enter the <b>smaller</b> of line 6 or line 9 here and on Form 6251, line 29, and go to Form 6251, line 30 · · · · · ▶ <b>10.</b>	0

# Form 6251, Line 19 - Passive Activities

(Keep for your records)

2016

ame(s) as shown on return	· · · · ·		Tax	ID Number
KSHAI K & CHANCHAL RUNCHAL			5.5	3-39-5912
Description	Form/ Sch	AMT Inc/Loss	Regular Inc/Loss	Difference Line 19
Bocompani			1110/2000	
12029 CLOVER AVE	SCH E	41,340	41,339	1
	TOTALS	41,340	41,339	1
		=======================================		

### 2016

# TAX RETURN COMPARISON 2014 / 2015 /2016

Name(s) as shown on return

AKSHAI K & CHANCHAL RUNCHAL

Identifying number 553-39-5912

	2014	2015	2016	Difference 2015-2016
Filing Status		2	2	
Number of Exemptions		2	2	
Income				
Wages, salaries, tips, etc.				
Taxable interest and dividends		365	733	368
Taxable state and local refunds · · · ·			8,469	8,469
Alimony			,	,
Business income (loss) · · · · · · ·				
Gains (losses)		202,128		(202,128)
Pensions and IRA distributions		6,382	30,200	23,818
Rent and royalty income (loss)		1,934	119,991	118,057
Part, S-corps, trusts income (loss)		104,746	142,241	37,495
Farm income (loss)		,	,	, ,
Unemployment compensation				
Total SS benefits received		27,551	27,546	(5)
Taxable SS benefits		23,418	23,414	(4)
Other income (loss)		20,120	20,121	( - /
Total Income · · · · · · · · · · ·		338,973	325,048	(13,925)
Adjusted Gross Income		3337373	020,010	(10/320)
Half of self-employment tax				
IRA deduction · · · · · · · · ·				
Other adjustments · · · · · · · ·				
Total Adjusted Gross Income		338,973	325,048	(13,925)
Deductions		3307373	323,010	(13/323)
Medical deductions				
State and local taxes · · · · · · ·		23,418	47,211	23,793
Interest · · · · · · · · · · · · · · · · · · ·		18,354	16,640	(1,714)
Contributions		1,200	10,010	(1,200)
Employee business expenses · · · ·		1,200		(1,200)
Standard or other deductions				
Total Itemized or Standard Ded		42,100	63,439	21,339
Exemption Amount		6,080	7,128	1,048
Tax and Credits	<u> </u>	0,000	1,120	1,040
Taxable Income		290,793	254,481	(36,312)
Tax · · · · · · · · · · · · · · · · · · ·		54,450	66,603	12,153
Credits		34,430	00,003	12,133
Self-employment tax				
Other taxes		3,381	2,852	(529)
Total Tax · · · · · · · · · · · · · · · · · · ·		57,831	69,455	11,624
Payments		37,031	09,433	11,024
Withholdings				
Estimated tax payments			31,820	31,820
Earned income credit			31,020	31,020
Other payments and credits		20,000	48,180	28,180
Overpayment		20,000	10,545	10,545
Overpayment Applied			10,343	10,343
Refund			9,875	0 075
Balance Due		38,872	9,013	9,875
Resident State		CA	CA	(38,872)
<u> </u>				/10 EC2\
Taxable income		276,706	258,143	(18,563)
Tax · · · · · · · · · · · · · · · · · · ·		20,360	18,410	(1,950)
<del></del>		8,469	21,327	12,858
Balance Due		22.00	22.00	
Marginal tax rate		33.00	33.00	7 17
Effective tax rate		19.00	26.17	7.17

TAXABLE YEAR	FOR	RM
2016 California Resident Income Tax Return	54	0
APE	ATTACH FEDERAL RETURN	
		Α
553-39-5912 RUNC 573-41-5200	16	R
AKSHAI K RUNCHAL		RP
CHANCHAL RUNCHAL		
1021 (MD) DELLA DD		
1931 STRADELLA RD		
LOS ANGELES CA 90077-2320		

10-16-1943 07-16-1951

	1	Single	Э	4 📗 H	ead of household (with qualifying	person). See instructions.	
Filing Status	2	X Marrie	ed/RDP filing jointly. See inst.	5 🗌 Q	ualifying widow(er) with depender	nt child. Enter year spouse/RD	P died
Ē Š	3		ed/RDP filing separately. Enter spou			e	
	6	If someone	e can claim you (or your spouse/RDF	) as a depende	ent, check the box here. See inst.	• 6 □	
	<b>•</b>	For line 7, lin	ne 8, line 9, and line 10: Multiply the	amount you ent	ter in the box by the pre-printed do	ollar amount for that line.	Whole dollars only
	7		If you checked box 1, 3, or 4 above	•	_		000
	8	*	enter 2, in the box. If you checked thou (or your spouse/RDP) are visual		~	2 X \$111= (•) \$ [	222
	0	•		y iiripaireu, eiri	<u> </u>	X \$111 = (•) \$	
	9		you (or your spouse/RDP) are 65 o	older, enter 1;	~		
		if both are 6	65 or older, enter 2		9	2 X \$111= <b>(•)</b> \$ [	222
	10	Dependent	ts: Do not include yourself or you	r spouse/RDP.			
<u>0</u>			Dependent 1		Dependent 2	Depende	nt 3
Exemptions		First Name	<b>⊙</b>		<b>⊙</b>		
Exen		Last Name	•		•		
		SSN	•		•	•	
		Dependent's relationship to you	•		•	•	
		Total depen	ndent exemptions		• 10	X \$344 = • \$	
	11	Exemption	n amount: Add line 7 through line 1	Transfer this	s amount to line 32		444

043

Your name:		ne: AKSHAI K & CHANCHAL RUNC Your SSN or ITIN: 5	53-39-5912		
	12	State wages from your Form(s) W-2, box 16 · · · · · · · · · · · • 12			
		Enter federal adjusted gross income from Form 1040, line 37; 1040A, line 21; 1040EZ, I		32504800	0
		California adjustments - subtractions. Enter the amount from Schedule CA (540), line 37	Ū	31883	_ 
ше	15	Subtract line 14 from line 13. If less than zero, enter the result in parentheses. See instru	uctions · · · · 15	293165 .00	<u>]</u>
luco	16	California adjustments - additions. Enter the amount from Schedule CA (540), line 37, cd	olumn C · · · • 16		2
Taxable Income		California adjusted gross income. Combine line 15 and line 16	44; <b>OR</b> us:	293165 .00	<u></u>
		If Married/RDP filing separately or the box on line 6 is checked, STOP. See instr	•	35022 .00	)
	19	Subtract line 18 from line 17. This is your <b>taxable income.</b> If less than zero, enter -0-		258143 .00	0
	31	Tax. Check the box if from: Tax Table X Tax Rate Schedule			7
	32	● ☐ FTB 3800 ● ☐ FTB 3803 · · · · · · · · · · Exemption credits. Enter the amount from line 11. If your federal AGI is more than \$182,	459	18854	7
Тах		see instructions		444 ]. 00	<u>기</u>
	33	Subtract line 32 from line 31. If less than zero, enter -0-		18410	2
	34	Tax. See instructions. Check the box if from:	5870A · · · · · • <b>34</b>		2
	35	Add line 33 and line 34		18410 .00	<u></u>
	40	Nonrefundable Child and Dependent Care Expenses Credit. See instructions	• 40	00	0
ω	43	Enter credit name code •	and amount • 43	.00	0
Credit	44	Enter credit name code •	and amount ● 44	.00	0
Special Cred	45	To claim more than two credits, see instructions. Attach Schedule P (540)	• 45	.00	0
Ø	46	Nonrefundable renter's credit. See instructions	· · · · · · • 46	. 00	0
	47	Add line 40 through line 46. These are your total credits		0.00	0
	48	Subtract line 47 from line 35. If less than zero, enter -0-		18410 .00	0
S.	61	Alternative minimum tax. Attach Schedule P (540)	• 61	.00	0
Other Taxes	62	Mental Health Services Tax. See instructions	• 62	00	<u></u>
Othe	63	Other taxes and credit recapture. See instructions	• 63	.00	<u></u>
	64	Add line 48, line 61, line 62, and line 63. This is your total tax	• 64	18410 .00	0

Side 2 Form 540 C1 2016

Your	nam	ne: AKSHAI K & CHANCHAL RUNC Your SSN or ITIN: 553-39-5912	
	71	California income tax withheld. See instructions	.00
	72	2016 CA estimated tax and other payments. See instructions • • • 72 40000	.00
Payments	73	Withholding (Form 592-B and/or 593). See instructions • • • <b>73</b>	.00
Pa	74	Excess SDI (or VPDI) withheld. See instructions • • • 74	.00
	75	Earned Income Tax Credit (EITC)	.00
	76	Add lines 71 through 75. These are your total payments. See instructions	.00
Use	91	Use Tax. See instructions	
		Use Tax. See instructions	.00
	92		.00
	92 93	Payments balance. If line 76 is more than line 91, subtract line 91 from line 76	$\Box$
	92 93 94	Payments balance. If line 76 is more than line 91, subtract line 91 from line 76	.00
Overpaid Tax/Tax Due Use Tax	92 93 94 95	Payments balance. If line 76 is more than line 91, subtract line 91 from line 76	.00





Your name:

AKSHAI K & CHANCHAL RU

Your SSN or ITIN: 553-39-5912

		Code	<u>Amount</u>
	California Seniors Special Fund. See instructions	• 400	.00
	Alzheimer's Disease/Related Disorders Fund	• 401	.00
	Rare and Endangered Species Preservation Program · · · · · · · · · · · · · · · · · · ·	• 403	.00
	California Breast Cancer Research Fund	• 405	.00
	California Firefighters' Memorial Fund · · · · · · · · · · · · · · · · · · ·	• 406	.00
	Emergency Food for Families Fund	• 407	.00
Contributions	California Peace Officer Memorial Foundation Fund	• 408	.00
ontrib	California Sea Otter Fund	• 410	.00
S	California Cancer Research Fund	• 413	.00
	RESERVED (DO NOT USE) · · · · · · · · · · · · · · · · · · ·		
	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
	State Children's Trust Fund for the Prevention of Child Abuse	• 430	.00
	Prevention of Animal Homelessness and Cruelty Fund	• 431	.00
	Revive the Salton Sea Fund	• 432	.00
	California Domestic Violence Victims Fund	• 433	.00
	Special Olympics Fund	• 434	.00
	Type 1 Diabetes Research Fund	• 435	.00
110	Add code 400 through code 435. This is your total contribution	• 110	.00

Your n	ame:	AKSHAI K & CHANCHAL RU Your SSN or ITIN: 553-39-5912								
Amount You Owe	111	AMOUNT YOU OWE. If you do not have an amount on line 96, add line 93, line 97, and line 110. See instructions. Do not send cash.  Mail to: FRANCHISE TAX BOARD  PO BOX 942867  SACRAMENTO CA 94267-0001 • • • 111  Pay online - Go to ftb.ca.gov for more information.	. 00							
es es	112	Interest, late return penalties, and late payment penalties	.00							
Interest and Penalties	113	3 Underpayment of estimated tax. Check the box: • X FTB 5805 attached • FTB 5805F attached • 113 263.0								
=	114	Total amount due. See instructions. Enclose, but <b>do not</b> staple, any payment 114	.00							
osit	Fill in t	the information to authorize direct deposit of your refund into one or two accounts. <b>Do not</b> attach a voided check or a deposit slip. See instructions.	.00							
Dep		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:								
Refund and Direct Deposit	• Ro	Type  outing number  Checking  Account number  116 Direct deposit amount								
fund	The re	emaining amount of my refund (line 115) is authorized for direct deposit into the account shown below:	.00							
ž	_	Type  Checking Account number  Type  117 Direct deposit amount	. 00							
IMPO	RTANT	Savings  See the instructions to find out if you should attach a copy of your complete federal tax return.								
To lea	rn abou earch fo ng acco	tyour privacy rights, how we may use your information, and the consequences for not providing the requested information, go to <b>ftb.ca.g</b> or <b>privacy notice</b> . To request this notice by mail, call 800.852.5711. Under penalties of perjury, I declare that I have examined this tax return privacy notice and statements, and to the best of my knowledge and belief, it is true, correct, and complete.    Date   Spouse's/RDP's signature (if a joint tax return, both must sign)   O5-24-2017								
Sigr	1	Your email address. Enter only one email address.     Preferred phone number								
Here It is un to forg	<b>e</b> lawful	Paid preparer's signature (declaration of preparer is based on all information of which preparer has any knowledge)								
spouse signatu	e's/RDP ure.	Firm's name (or yours, if self-employed)  PTIN	_							
	ax returi	7								
•		17037 CHATSWORTH ST STE 202 Granada Hills, CA 91344 32-0225393								
		Do you want to allow another person to discuss this tax return with us? See instructions  •••   Yes  Yes	_							
		Print Third Party Designee's Name  Telephone Number								

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3105164 Form 540 C1 2016 **Side 5** 

CAWK AGI	For your records only.	<b>2016</b> AGI	
CAWN_AGI	Adjusted Gross Income Split Worksheet FD/ST Summary		Summary
Name(s) as shown on state return		Social Securit	y Number
AKSHAI K &	CHANCHAL RUNCHAL	553-39-	5912

	Income & Adjustments		Fede	ral	State	
			Col. A	Col. B	Col. A	Col. B
			Taxpayer	Spouse	Taxpayer	Spouse
7	Wages, salaries, tips, etc.	7				
8a	Taxable interest	8a	642	32	642	3
9a	Ordinary dividends.	9a	30	29	30	2
10	Taxable refunds, credits, or offsets					
	of state and local income taxes	10	8,469		8 <b>,</b> 469	
11	Alimony received	11				
12	Business income or (loss)	12				
13	Capital gain or (loss)	13				
14	Other gains or (losses)	14				
15b	Taxable amount of IRA distributions	15b	6,111		6,111	
16b	Taxable amount of Pensions and annuities • •	16b	24,089		24,089	
17	Rental real estate, royalties, partnerships,					
	S corporations, trusts, etc.	17	171,497	90,735	171,497	90,73
18	Farm income or (loss) · · · · · · · · · · · ·	18	·	·		
19	Unemployment compensation	19				
20b	Taxable amount of Social security benefits	20b	23,414		23,414	
21	Other income.	21	·		,	
22	Add the amounts in each column for					
	Ins 7 thru 21. This is your total income • •	22	234,252	90,796	234,252	90,79
23	Educator Expenses	23	·	·	·	
24	Certain business expenses of reservists,					
	performing artists, & fee-basis gov. officials	24				
25	Health savings account deduction	25				
26	Moving expenses	26				
27	One-half of self-employment tax	27				
28	Self-employed SEP, SIMPLE, and					
	qualified plans	28				
29	Self-employed health insurance deduction • •	29				
30	Penalty on early withdrawal of savings · · ·	30				
31a	Alimony paid · · · · · · · · · · · · · · · · · · ·	31a				
32	IRA deduction • • • • • • • • • • • • • • • • • • •	32				
33	Student loan interest deduction	33				
34	Tuition and fees deduction	34				
35	Domestic production activities deduction · · ·	35				
	Line 36 other adjustments					
36	Add lines 23 thru 35	36				
37	Subtract In 36 from In 22. This is your <b>AGI</b> • •	37	234,252	90,796	234,252	90,79

# 2016 California Adjustments - Residents

CA (540)

Impo	ortant: Attach this schedule behind Form 540, Side 5 as a supporting California schedu	ıle.			
	(s) as shown on tax return		SSN	or ITIN	
AK	SHAI K & CHANCHAL RUNCHAL		55	3-39-5912	
	t I Income Adjustment Schedule	Ι,	Federal Amounts	_ Subtractions	Additions
	tion A - Income	*	(taxable amounts from your federal tax return)	See instructions	See instructions
7	Wages, salaries, tips, etc. See inst. before making an entry in column B or C · · 7	•		$\odot$	$\odot$
8	Taxable interest (b) 8(a)		674	0	$\odot$
9	Ordinary dividends. See instructions. (b)	) (•	59	$\odot$	$\odot$
10	Taxable refunds, credits, offsets of state and local income taxes · · · · · · · · 10		8469	8469	
11	Alimony received	ı (•	)		<u> </u>
12	<b>'</b>	2 [∙	)	<u> </u>	<u> </u>
13	1 0 1	₃ [•		Ŏ	<b>•</b>
14	Other gains or (losses)	۹ 💽	)	<u> </u>	<u> </u>
15	IRA distributions. See instructions. (a) 6111 · · · · · 15(b)	) (	6111	Ō	<u> </u>
16	Pensions and annuities. See instructions. (a) • 16(b)			Ŏ	<u> </u>
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc 17	7 🧐	262232	<u> </u>	<u> </u>
18		3 [•		<u> </u>	•
19	Unemployment compensation	-		<u> </u>	
20	Social security benefits (a) (27546 · · · · · · · · 20(b)	) (•	23414	23414	
21	Other income.		Г	a 👀	a
	a California lottery winnings e NOL from FTB 3805D, 3805Z,	۔ا	、 I	ь <u>•</u>	b
	<b>b</b> Disaster loss deduction from FTB 3805V 3806, 3807, or 3809 <b>21</b>	1 (•	<u> </u>	°.	· •
	c Federal NOL (Form 1040, line 21) f Other (describe):			d <u>O</u>	d
	d NOL deduction from FTB 3805V			t 💮	f (•)
22	Tatal Combined line 7 through line 24 in actions A Add line 7 through line 24f in		_	T ( )	f (•)
22	Total. Combine line 7 through line 21 in column A. Add line 7 through line 21f in column B and column C. Go to Section B	2	325048	<ul><li>31883</li></ul>	
	Column B and Column C. Go to Section B	۲۲	323040	<b>(</b> ) 31003	
Sect	tion B - Adjustments to Income				
23	Educator expenses · · · · · · · · · · · · · · · · · ·	•		$\odot$	
24	Certain business expenses of reservists, performing artists, and fee-basis				
	government officials · · · · · · · · · · · · · · · · · · ·	•	)	<u> </u>	<u> </u>
25	Health savings account deduction	•	)	<u> </u>	
26	Moving expenses	•	)		
27	Deductible part of self-employment tax · · · · · · · · · · · · · · · · · · ·	•	<u> </u>		
28	Self-employed SEP, SIMPLE, and qualified plans $$	(•	<u>)                                    </u>		
29	Self-employed health insurance deduction	-	2		
30	Penalty on early withdrawal of savings	(•	)		
31a	Alimony paid. (b) Recipient's: SSN (•)				
		_	`		h
00	<u> </u>	a (	·		<u>•</u>
32	IRA deduction	-	~		
33	Student loan interest deduction	-	Κ		•
34		-	₹	8	
35	Domestic production activities deduction	1	)	<u> </u>	
36	Add line 23 through line 31a and line 22 through line 35 in columns A. P. and C.				
36	Add line 23 through line 31a and line 32 through line 35 in columns A, B, and C. See instructions		<b>)</b>	•	$\odot$
	Occ monucuons 30	1	,	<u> </u>	
37	<b>Total.</b> Subtract line 36 from line 22 in columns A, B, and C. See instructions <b>37</b>	•	325048	<ul><li>31883</li></ul>	$_{\odot}$
J,	Total. Subtract line 30 from file 22 in columns A, D, and G. See instructions 37	<u></u>	, 343040	<u>C) 21003</u>	$\odot$

#### Part II Adjustments to Federal Itemized Deductions

38	Federal itemized deductions. Enter the amount from federal Schedule A (Form 1040), lines 4, 9, 15, 19, 20, 27, and 28 • • • • • • • • • • • • • • • • • •		
39	Enter total of federal Schedule A (Form 1040), line 5 (State Disability Insurance, and state and local income tax, or General Sales Tax) and line 8 (foreign income taxes <b>only</b> ). See instructions • • • • • • • • • • • • • • • • • • •	28829	
	General Sales Tax) and line o (foreign income taxes only). See instructions	20029	
40	Subtract line 39 from line 38	35022	
41	Other adjustments including California lottery losses. See instructions. Specify		
42	Combine line 40 and line 41	35022	
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	35022	
44	Enter the larger of the amount on line 43 or your standard deduction listed below  Single or married/RDP filing separately. See instructions		



### 2016 Passive Activity Loss Limitations

3801

Atta	ach to Form 540, Long Form 540NR, Form 541, or Form 100S (S Corporations).			
Nam	e(s) as shown on tax return SSN, ITIN, FEIN, or CA.		ation no.	
_A	KSHAI K & CHANCHAL RUNCHAL 553-39-5	<u>912</u>		
Ра	rt I 2016 Passive Activity Loss			
	See the instructions for Worksheet 1 and Worksheet 3 for federal Form 8582 before completing Part I. Be sure to	o use	California amounts	s.
Ren	ntal Real Estate Activities with Active Participation			
1a	Activities with net income from Worksheet 1, column (a) 1a 158,311 00			
1b	Activities with net loss from Worksheet 1, column (b)			
1c	Prior year unallowed losses from Worksheet 1, column (c) 1c ( ) 00			
1d	Combine line 1a, line 1b, and line 1c	1d	119,991	00
All (	Other Passive Activities			
2a	Activities with net income from Worksheet 2, column (a)			
2b	Activities with net loss from Worksheet 2, column (b) 2b ( ) 00			
_				
2c	Prior year unallowed losses from Worksheet 2, column (c) · · · · · · · · · · 2c   ( ) 00			Т
2d	Combine line 2a, line 2b, and line 2c	2d		00
3	Combine line 1d and line 2d. If the result is net income or zero, see the instructions for line 3. If line 3 and			
	line 1d are losses, go to line 4. Otherwise, enter -0- on line 9 and go to line 10. See instructions	3	119,991	00
Pa	rt II Special Allowance for Rental Real Estate with Active Participation			
	Enter all numbers in Part II as positive amounts. See instructions.			
				T
4	Enter the <b>smaller</b> of losses from line 1d or line 3	4		00
5	Enter \$150,000. If married/RDP filing a separate tax return, see instructions			
6	Enter federal modified adjusted gross income, but not less than 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			
	on line 9, and then go to line 10. Otherwise, go to line 7			
7	Subtract line 6 from line 5			T
8	Multiply line 7 by 50% (.50). <b>Do not</b> enter more than \$25,000 · · · · · · · · · · · · · · · · · ·	8		00
•		_		
9	Enter the smaller of line 4 or line 8	9		00
Pa	rt III Total Losses Allowed			
10	Add the income, if any, from line 1a and line 2a and enter the total	10		00
10	Add the income, if any, from line to one had the zo one enter the total	10		00
11	Total losses allowed from all passive activities for 2016. Add line 9 and line 10	11		00
	See the instructions on Page 2 to find out how to report the losses on your tax return.			

For Privacy Notice, get FTB 1131 ENG/SP. 043 7451164 FTB 3801 2016 **Side 1** 

### California Passive Activity Worksheet (See General Instructions for Step 1.)

Use this worksheet to figure California income (loss) from passive activities before application of passive activity loss (PAL) rules.

(a)	(a) (b) (c)		(d)	(e)	(f)	
Passive Activity Enter a description of the activity	Federal Schedule Enter the name of the federal form or schedule on which you reported the activity	California Schedule Enter the name of the California form or schedule, if any, used to calculate the California adjustment	ter the name of the nia form or schedule, used to calculate the before application of the street the name of the place in a federal net income (loss) resulting from different place in the		California Amount Combine column (d) and column (e)	
3106 INGLEWO	SCH E - 1		39,230	0	39,230	
12029 CLOVER	SCH E - 2		41,339	0	41,339	
CARRIAGE OAK	SCH E - 3		32 <b>,</b> 585	0	32 <b>,</b> 585	
4416 KATHERI	SCH E - 4		(28, 107)	0	(28,107)	
2408 OCEAN P	SCH E - 5		25 <b>,</b> 792	0	25 <b>,</b> 792	
14523 TUPPER	SCH E - 6		19,365	0	19 <b>,</b> 365	
MEADOW GLEN	SCH E - 7		(10,213)	0	(10,213)	

### California Adjustment Worksheets (See General Instructions for Step 4.)

Use these worksheets to figure your California adjustments after application of the PAL rules.

(a)	(b)	(c)	(d)	(e)
Activities	Passive or Nonpassive	California Amount	Federal Amount	California Adjustment
Enter a description of the	Enter the character of	Enter the California net	Enter the federal net	Subtract the Total amount of column (d) from the Total
activity. Group activities by	the activity as passive or	income (loss) from the	income (loss) from the	amount of column (c) and enter the difference in
the federal schedules on	nonpassive for California	activity after application of	activity after application of	column (e) below. Individuals should transfer this amount
which they were reported	purposes	the PAL rules	the PAL rules	to Schedule CA (540 or 540NR) as follows:

(a)	(b)	(c)	(d)	(e)
Schedule C Activities	Passive or Nonpassive	California Amount	Federal Amount	California Adjustment
				If the amount below is <b>positive</b> , transfer the amount to Schedule CA (540 or 540NR),
				line 12, column C.
				If the amount below is <b>negative</b> , transfer the amount to Schedule CA (540 or 540NR),
		1(c)	1(d)*	(as a positive amount) line 12, column B.

(a)	(b)	(c)	(d)	(e)
Schedule E Activities Passive or Nonpassive		California Amount Federal Amount		California Adjustment
Statement #714				If the amount below is <b>positive</b> , transfer the
				amount to Schedule CA (540 or 540NR),
				line 17, column C.
				If the amount below is <b>negative</b> , transfer the
				amount to Schedule CA (540 or 540NR),
				(as a positive amount) line 17, column B.
Total		2(c) 262,232	2(d)** 262,232	2(e) 0

(a)	(b)	(c)	(d)	(e)
Schedule F Activities	Passive or Nonpassive	California Amount	Federal Amount	California Adjustment
				If the amount below is <b>positive</b> , transfer the
				amount to Schedule CA (540 or 540NR),
				line 18, column C.
				If the amount below is <b>negative</b> , transfer the
				amount to Schedule CA (540 or 540NR),
				(as a positive amount) line 18, column B.
Total		3(c)	3(d)***	3(e)

<sup>\*</sup> This amount should be the same as the amount reported on Schedule CA (540 or 540NR), line 12, column A.

Side 2 FTB 3801 2016 043 7452164

<sup>\*\*</sup> This amount should be the same as the amount reported on Schedule CA (540 or 540NR), line 17, column A.

<sup>\*\*\*</sup> This amount should be the same as the amount reported on Schedule CA (540 or 540NR), line 18, column A.

Worksheet 1 For form FTB 3801, I	ine 1a, line 1b, and line	1c						
	Current year			Prior ye	ar	Overa	rall gain or loss	
Name of activity	(a) Net income (line 1a)	(b) Net loss (line	1b)	(c) Unallowed loss	(line 1c)	(d) Gain		(e) Loss
SEE CAWK3801			-,		,			
SEE CAWN3601								
Total. Enter on form FTB 3801, line 1a,								
line 1b, and line 1c	158,311	38,3	320					
Worksheet 2 For form FTB 3801, I	ine 2a, line 2b, and line	2c						
	Curre	nt year		Prior ye	ar	Overa	ıll ga	in or loss
	(a)	(b)		(c)		(d)		(e)
Name of activity	Net income (line 2a)	Net loss (line	2b)	Unallowed loss	(line 2c)	Gain		Loss
-								
T. I. E. I								
Total. Enter on form FTB 3801, line 2a,								
line 2b, and line 2c								
Worksheet 3 Use this worksheet if	an amount is shown on	form FTB 3801	, line 9.					ı
	Form or schedule	(a) Loss		(b) Ratio		(c) Special allowance		(d) Subtract column (c)
Name of activity	to be reported on	Loss		Ratio		Special allowance		Subtract column (c) from column (a)
Total				4.00				
Total · · · · · · · · · · · · · · · · · · ·				1.00				
Worksheet 4 Allocation of Unallo								
	Form or sche to be reporte	I		a) oss		(b) Ratio		(c) Unallowed loss
Name of activity	to be reporte	d on					_	
							<u> </u>	
Total						1.00		
Worksheet 5 Allowed Losses								
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Form or sche	adula		a)		(b)		(c)
Name of activity	to be reporte	I		oss	U	nallowed loss		Allowed loss
Name of activity							$\vdash$	
SEE CAWK3801.PG5							$\vdash$	
							$\vdash$	
							$\vdash$	
							$\vdash$	
							<u> </u>	
Total		• • • ▶		38,320				38,320

For Privacy Notice, get FTB 1131 ENG/SP. 043 7453164 FTB 3801 2016 **Side 3** 

### **CAWK3801**

### **Passive Activity Loss Limitations**

2016

Name(s) as shown on return

(Keep for your records)

California ID Number 553-39-5912

AKSHAI K & CHANCHAL RUNCHAL Worksheet 1 For form FTB 3801, lin For form FTB 3801, line 1a, line 1b, and line 1c

	Current year		Prior year	Overall gain or loss		
	(a)	(b)	(c)	(d)	(e)	
Name of activity	Net income (line 1a)	Net loss (line 1b)	Unallowed loss (line 1c)	Gain	Loss	
3106 INGLEWOOD BLVD	39,230			39,230		
2029 CLOVER AVE	41,339			41,339		
CARRIAGE OAKS LLC	32,585			32,585		
416 KATHERINE AVE		28,107			28,107	
2408 OCEAN PARK	25,792			25,792		
.4523 TUPPER STREET	19,365			19,365		
EADOW GLEN LLC		10,213			10,213	
otal. Enter on form FTB 3801, line 1a,						
ne 1b, and line 1c · · · · · · · ·	150 311	20 200				
CAWK3801.LD	158,311	38,320				

### **CAWK3801**

### **Passive Activity Loss Limitations**

2016

Name(s) as shown on return

(Keep for your records)

AKSHAI K & CHANCHAL RUNCHAL Worksheet 5 Allowed Losses

California ID Number 553-39-5912

lame of activity	Form or schedule to be reported on	(a) Loss	(b) Unallowed loss	(c) Allowed loss
106 INGLEWOOD BLVD	E LN 23			
2029 CLOVER AVE	E LN 23			
ARRIAGE OAKS LLC	E LN 23			
416 KATHERINE AVE	E LN 23	28,107		28,10
408 OCEAN PARK	E LN 23	28,107		28,10
4523 TUPPER STREET	E LN 23			
EADOW GLEN LLC	E LN 23	10 212		10,21
EADOW GLEN LLC	E LN 23	10,213		10,21
				i

**CA 3801 Passive Activity Loss Limitations** 2016 California Adjustment Worksheet - Schedule E Activities Statement #714 Use this worksheet to figure your California adjustments after application of the PAL rules. PG01 **Identifying Number** Name(s) shown on return

AKSHAI K & CHANCHAL RUNCHAL				553-39-5912			
(a) Activities	(b) Passive or Nonpassive	(c) California Amount	(d) Federal Amount	(e) California Adjustment			
3106 INGLEWO	P	39,230	39,230	If the amount below is <b>positive</b> , transfer the			
12029 CLOVER	P	41,339	41,339	amount to Schedule CA (540 or 540NR),			
CARRIAGE OAK	P	32,585	32 <b>,</b> 585	line 17, column C.			
4416 KATHERI	Р	(28,107)	(28,107)				
2408 OCEAN P	Р	25,792	25 <b>,</b> 792	If the amount below is negative, transfer the			
14523 TUPPER	P	19,365	19,365	amount to Schedule CA (540 or 540NR),			
MEADOW GLEN	P	(10,213)	(10,213)	(as a positive amount) line 17, column B.			
MD LIVE OAK	N	71,121	71,121				
MD LIVE OAK	N	71,120	71,120				

# Depreciation and Amortization Adjustments

CALIFORNIA FORM

3885A

2016 Do not complete this form if your California depreciation amounts are the same as federal amounts.

Name(s) as shown on tax return					SSN or I	ITIN
AKSHAI K & CHAN	NCHAL RUNCHAL				553	-39-5912
1 This form is being com	ty as Passive or Nonpassipleted for a passive activity	<i>i</i> .	SCH E	vity to which form FTE	3 3885A relates	
Part II Election to Exper	nse Certain Tangible Prop	erty (IRC Section 17				
2 Enter the amount from line					. (•) 2	
Part III Depreciation	(a) Description of property placed in service	(b)  Date placed in service (mm/dd/yyyy)	(c) California basis for depreciation	(d) Method	(e) Life or rate	(f) California depreciation deduction
3 CARRIAGE OAKS	S P	05/05/2016	2,104,1	10 SL	39	26,204
4 Add the amounts on line 3	B, column (f)				4	26,204
5 California depreciation for					5	
6 Total California depreciation					6	26,204
<ul><li>7 Total federal depreciation</li></ul>	•	·	•		7	26,204
8 a If line 6 is more than I	,		· ·		· .	
	ne 7, enter the difference h					
b if fine o is less than in	ne 7, enter the unlerence i	iere and see msudcu	ons		05	
Part IV Amortization	(a) Description of cost	(b) Date amortization begins (mm/dd/yyyy)	(c) California basis for amortization	(d) Code section	(e) Period or percentage	(f) California amortization deduction
9						
10 Total California amortization	on from this potivity. Add the	amounta on line 0	olumn (f)		10	
	•					
11 California amortization of	· ·					
12 Total California amortization	•					
13 Total federal amortization	•		·		.•	
14 a If line 12 is more than					•	
<b>b</b> If line 12 is <b>less</b> than l	line 13, enter the difference	e here and see instru	ctions		· · · · 14b	

### Depreciation and Amortization Adjustments

CALIFORNIA FORM

3885A

Do not complete this form if your California depreciation amounts are the same as federal amounts Name(s) as shown on tax return SSN or ITIN AKSHAI K & CHANCHAL RUNCHAL 553-39-5912 Business or activity to which form FTB 3885A relates Identify the Activity as Passive or Nonpassive. (See instructions.) 1 \( \sum \) This form is being completed for a passive activity. This form is being completed for a nonpassive activity. SCH E - 6 Election to Expense Certain Tangible Property (IRC Section 179). ◐ 2 Enter the amount from line 12 of the Tangible Property Expense Worksheet in the instructions Part III Depreciation (a)
Description of property placed (e) Life or service (mm/dd/yyyy) **IMPROVEMENTS** 07/01/2016 23,734 SL 27.5 396 396 4 Add the amounts on line 3, column (f) . . . . . . . . . . . 5 California depreciation for assets placed in service prior to 2016 Total California depreciation from this activity. Add the amounts on line 2, line 4, and line 5 Total federal depreciation from this activity. Enter depreciation from federal Form 4562, line 22 a If line 6 is more than line 7, enter the difference here and see instructions . . . . . **b** If line 6 is **less** than line 7, enter the difference here and see instructions · · · · · · · · 8b Part IV Amortization (b) Date amortization (f) California (a) Description of cost (c) California basis (d) Code (e) Period or begins (mm/dd/yyyy) for amortization section amortization deduction 9 Total California amortization from this activity. Add the amounts on line 9, column (f)

. . . . . . . . . .

043

11 California amortization of costs that began before 2016

12 Total California amortization from this activity. Add the amounts on line 10 and line 11

13 Total federal amortization from this activity. Enter amortization from federal Form 4562, line 44
14 a If line 12 is more than line 13, enter the difference here and see instructions
b If line 12 is less than line 13, enter the difference here and see instructions

### **Depreciation and Amortization Adjustments**

b If line 12 is less than line 13, enter the difference here and see instructions . . . . . .

CALIFORNIA FORM

3885A

2016 Do not complete this form if your California depreciation amounts are the same as federal amounts Name(s) as shown on tax return SSN or ITIN AKSHAI K & CHANCHAL RUNCHAL 553-39-5912 Business or activity to which form FTB 3885A relates Identify the Activity as Passive or Nonpassive. (See instructions.) 1 \( \sum \) This form is being completed for a passive activity. This form is being completed for a nonpassive activity. SCH E - 7 Part II Election to Expense Certain Tangible Property (IRC Section 179). ◐ 2 Enter the amount from line 12 of the Tangible Property Expense Worksheet in the instructions Part III Depreciation (a)
Description of property placed (e) Life or depreciation deduction service (mm/dd/yyyy) for depreciation rate 3 MEADOW GLEN 05/05/2016 SL 39 1,942,256 24,112 4 Add the amounts on line 3, column (f) . . . . . . . . . . 24,112 5 California depreciation for assets placed in service prior to 2016 Total California depreciation from this activity. Add the amounts on line 2, line 4, and line 5 24,112 Total federal depreciation from this activity. Enter depreciation from federal Form 4562, line 22 a If line 6 is more than line 7, enter the difference here and see instructions . . . . . **b** If line 6 is **less** than line 7, enter the difference here and see instructions · · · · · · · · 8b Part IV Amortization (b) Date amortization (f) California (a) Description of cost (c) California basis (d) Code (e) Period or begins (mm/dd/yyyy) for amortization section amortization deduction 9 Total California amortization from this activity. Add the amounts on line 9, column (f) 11 California amortization of costs that began before 2016 . . . . . . . . . . 12 Total California amortization from this activity. Add the amounts on line 10 and line 11 13 Total federal amortization from this activity. Enter amortization from federal Form 4562, line 44 14 a If line 12 is more than line 13, enter the difference here and see instructions ......

043

4/15/16 (•) \$

## Underpayment of Estimated Tax by Individuals and Fiduciaries

**CALIFORNIA FORM** 

2016 by Individuals and Fiduciaries	5805
Attach this form to the <b>back</b> of your Form 540, Long Form 540NR, or Form 541. Also, check the box follocated on Form 540, line 113; Long Form 540NR, line 123; or Form 541, line 44, whichever applies.	r underpayment of estimated tax
Name(s) as shown on return	SSN, ITIN, or FEIN
AKSHAI K & CHANCHAL RUNCHAL	553-39-5912
<ul> <li>IMPORTANT: In most cases, the Franchise Tax Board (FTB) can figure the penalty for you and you do not have Information B.</li> <li>If you meet any of the following conditions, you do not owe a penalty for underpayment of estimated tax. Do not one of the amount of your tax liability (not including tax on lump-sum distributions and accumulation distribution of the withholding credit) but not including estimated tax payments for either 2015 or 2016 was less than \$500 (or filing a separate return).</li> <li>Your 2015 return was for a full 12 months (or would have been if you were required to file) and you did not have the amount of your withholding plus your estimated tax payments, if paid in the required installments, is a your 2016 return or 100% of the tax shown on your 2015 return (110% if California adjusted gross income (AG \$75,000 if married/RDP filing a separate return) and you are not using the annualized income installment me AGI equal to or greater than \$1,000,000 (or \$500,000 if married/RDP filing a separate return), must use the tain they do not meet one of the two conditions above.</li> </ul>	complete or file this form if: usts) less credits (including r less than \$250 if married/RDP re any tax liability on that return. It least 90% of the tax shown on It) was more than \$150,000 or Ithod. Taxpayers with California
<ul> <li>Part I Questions. All filers must complete this part. Estates and Trusts, see General information E.</li> <li>Are you requesting a waiver of the penalty? If "Yes," provide an explanation below and be sure to che Long Form 540NR, line 123; or Form 541, line 44. If you need additional space, attach a statement. See General Information C</li> </ul>	
<ul> <li>Did you use the annualized income installment method? If "Yes," see instructions for Part III and be steen 540, line 113; Long Form 540NR, line 123; or Form 541, line 44</li> <li>Was your California withholding not withheld in equal installments and are you able to show the actual per period and the actual dates withheld?</li> </ul>	

If "Yes," enter the actual uneven amounts withheld on the spaces provided below. The total of the four amounts must equal the total

withholding 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 For estates and trusts: Was the date of death less than two years from the end of the taxable year? See General Information E



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	$\neg$	<b>٦-</b>	- ጘ	$\sim$	· ¬	9	/

_	333-39-3912
Par	t II Required Annual Payment. All filers must complete this part.
1	Current year tax. Enter your 2016 tax after credits. See instructions
2	Multiply line 1 by 90% (.90)
3	Withholding taxes. <b>Do not</b> include any estimated tax payments on this line. See instructions
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. <b>Do not</b> file form FTB 5805
5	Enter the tax shown on your 2015 tax return. <b>See instructions.</b> (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 2016, more than \$75,000) • • • • • • • • • • • • • • • • • •
6	Required annual payment. Enter the <b>smaller</b> 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)
Shor	t Method  ion: See the instructions to find out if you can use the short method. If you answered "Yes" to Question 2 in Part I, skip this part and go to Part III.  If you answered "No" to Question 2 in Part I and you cannot use the short method, go to Worksheet II in the instructions (page 4).
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 8 5,000.00
9	Add line 7 and line 8
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
11	Multiply line 10 by .02269425
12	<ul> <li>If the amount on line 10 was paid on or after 4/15/17, enter -0</li> <li>If the amount on line 10 was paid before 4/15/17, enter the result of the following computation:</li> </ul>
	Amount on Number of days paid line 10 X before 4/15/17 X .00010
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 44. Also, check the box for "FTB 5805."  100

#### Part III Annualized Income Installment Method Schedule.

Use this schedule ONLY if you earned taxable income at an UNEVEN RATE during 2016 (See Example A). If you earned your income at approximately the same rate each month (See Example B), then you should not complete this schedule. If you choose to figure the penalty, see Worksheet II, Regular Method to Figure Your Underpayment and Penalty, on page 4 of the instructions.

**Example A:** If you were a commissioned salesperson who earned no income during the first three months of the year, earned most of your income during the following six months, and earned very little during the last three months, you should complete this schedule. You may be able to benefit by using the annualized income installment method. The required installment of estimated tax figured using the annualized method may be less than your required installment figured using the required installment method.

Example B: If you worked all year and earned a monthly salary that did not change much during the year, you should not complete this schedule.

To	complete this schedule correctly, you must first complete Side 2, Part II, line 1 throu	ıah line	6.			
	ates and trusts, <b>do not</b> use the period ending dates shown to the right.	· J · · · · · ·		1	1	1
	tead, use the following: 2/29/16, 4/30/16, 7/31/16, and 11/30/16.		(a) 1/1/16 to	(b) 1/1/16 to	(c) 1/1/16 to	(d) 1/1/16 to
	cal year filers must adjust dates accordingly.		3/31/16	5/31/16	8/31/16	12/31/16
	Enter your California adjusted gross income (AGI) for each period.		0.0 10	5.61.16	0.00	120
-	Long Form 540NR filers, see instructions. Estates or Trusts, enter the amount					
	from Form 541, line 20 attributable to each period. See instructions	1				
2	Annualization amounts. Estates or Trusts, see instructions	2	4	2.4	1.5	1
	Annualized income. Multiply line 1 by line 2	3				<u> </u>
	Enter your itemized deductions for the period shown in each column. If you					
·	do not itemize deductions, enter -0- here and on line 6. Estates or Trusts,					
	enter -0- here, skip to line 9, and enter the amount from line 3 on line 9	4				
5	Annualization amounts	5	4	2.4	1.5	1
	Annualized itemized deductions. Multiply line 4 by line 5. See instructions	6			1.0	<del>'</del>
	Enter your standard deduction from your 2016 Form 540, or					
-	Long Form 540NR, line 18. Enter the total standard deduction amount					
	in each column. See instructions	7				
8	Enter line 6 or line 7, whichever is larger · · · · · · · · · · · · · · · · · · ·	8				
	Subtract line 8 from line 3 · · · · · · · · · · · · · · · · · ·	9				
	schedule in the instructions for Form 540, Long Form 540NR, or Form 541.					
	Also, include any tax from form FTB 3803. Estates or Trusts, see instructions	10				
11	Enter the total amount of exemption credits from your 2016 Form 540,			+		
	line 32 or Form 541, line 22. If you filed a Long Form 540NR, see instructions	11				
12	Subtract line 11 from line 10. Long Form 540NR filers, complete Worksheet I	<u> </u>		+		
-	on page 3 of the instructions	12				
13	Enter the total credit amount from your 2016 Form 540, line 47; or Form 541,	·		+		
	line 23. Long Form 540NR filers, see instructions	13				
14	a Subtract line 13 from line 12. If zero or less, enter -0-	14a				
•	b Enter the alternative minimum tax and mental health tax. See Instructions	14b				
	c Add line 14a and line 14b	14c				
	d Enter the excess SDI from Form 540, line 74 or Long Form 540NR, line 84	14d				
	e Subtract line 14d from line 14c. If zero or less, enter -0-	14e				
15	Applicable percentage	15	27%	63%	63%	90%
	Multiply line 14e by line 15	16				
	mplete Line 17 - Line 23 of each column before you go to the next column.					
	Enter the combined amounts shown on line 23 from all preceding columns · ·	17				
	Subtract line 17 from line 16. If zero or less, enter -0-	18				
	Enter 30% of the amount shown on form FTB 5805, Part II, line 6 in columns					
	(a & d), enter 40% of the amount on line 6 in column b, enter -0- in column c.	19				
20	Enter the amount from line 22 from the preceding column	20				
21	Add line 19 and line 20	21				
22	Subtract line 18 from line 21. If zero or less, enter -0-	22				
				1		
	sheet II, Regular Method to Figure Your Underpayment and Penalty, line 1 · ·	23	lacksquare	$\bullet$	$\odot$	•
	If you use the annualized income installment method for one payment due d				ue dates.	

This schedule automatically selects the smaller of your annualized income installment or your regular installment.

043 7673164 FTB 5805 2016 **Side 3** 

TAXABLE YEAR California e-file Signature Authorization for Individuals 2016 8879 Your name Your SSN or ITIN 553-39-5912 AKSHAI K RUNCHAL Spouse's/RDP's name Spouse's/RDP's SSN or ITIN CHANCHAL RUNCHAL 573-41-5200 Part I Tax Return Information (whole dollars only) 1 California Adjusted Gross Income (Form 540, line 17; Form 540 2EZ, line 16; Long Form 540NR, line 32; 2 Amount You Owe (Form 540, line 111; Form 540 2EZ, line 31; Long Form 540NR, line 121; or Short Form 540NR, line 121) · · · 2 3 Refund or No Amount Due (Form 540, line 115; Form 540 2EZ, line 32; Long Form 540NR, line 125; Part II Taxpayer Declaration and Signature Authorization (Be sure you obtain and keep a copy of your return.) Under penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2016, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider (including my name, address, and social security number or individual tax identification number) and the amounts shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If applicable, I authorize an electronic funds withdrawal of the amount on line 2 and/or the estimated tax payments as shown on my return and on form FTB 8455, California e-file Payment Record for Individuals, or a comparable form. If applicable, I declare that direct deposit refund amount on line 3 agrees with the direct deposit authorization stated on my return. If I have filed a joint return, this is an irrevocable appointment of the other spouse/RDP as an agent to authorize an electronic funds withdrawal or direct deposit. I authorize my ERO, transmitter, or intermediate service provider to transmit my complete return to the Franchise Tax Board (FTB). If the processing of my return or refund is delayed, I authorize the FTB to disclose to my ERO, intermediate service provider, and/or transmitter the reason(s) for the delay or the date when the refund was sent. If I am filing a balance due return, I understand that if the FTB does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I acknowledge that I have read and consent to the Electronic Funds Withdrawal Consent included on the copy of my electronic income tax return. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only lauthorize J ARORA INC 9 ERO firm name as my signature on my 2016 e-filed California individual income tax return. I will enter my PIN as my signature on my 2016 e-filed California individual 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 must complete Part III below. Date ► 05-24-2017 Your signature 🕨 Spouse's/RDP's PIN: check one box only lauthorize J ARORA INC to enter my PIN ERO firm name as my signature on my 2016 e-filed California individual income tax return. I will enter my PIN as my signature on my 2016 e-filed California individual 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 must complete Part III below. Date ► 05-24-2017 Practitioner PIN Method Returns Only -- continue below Part III **Certification and Authentication - Practitioner PIN Method Only** ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature for the 2016 California individual income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and FTB Pub. 1345, 2016 e-file Handbook for Authorized e-file Providers. Date ► 05-24-2017

AKSH  A. S  A  B. A  E  E  C. S  D. F  C  C  E  E  E  E	A2. Adjustmen A3. Total Adju  Applied amoun B1. Total Con B2. Penalty an B3. Overpayn B4. Other Tax B5. Total appl  Subtotal: State	e on return, after all adjustments  its to State/Local Refund  its  its  ributions, Donation, Checkoffs (Will carry to 2017 Sch A)  d/or interest (Will carry to 2017 ES screen)  (Use tax, Property tax, Tangible tax, etc)  ed amounts  / Local Refund plus Applied amounts	,	- 1	21,327 263 21,590
A. S A A A A A A A A A A A A A A A A A A	State / Local Re A1. Bottom lin A2. Adjustmel A3. Total Adju  Applied amoun B1. Total Con B2. Penalty an B3. Overpaym B4. Other Tax B5. Total appl  Subtotal: State	und e on return, after all adjustments its to State/Local Refund sted State/Local Refund  its ributions, Donation, Checkoffs (Will carry to 2017 Sch A) d/or interest	2 6 3  (Total of B1 thru B4)	A	21,327
B. 4 E E E E E E E E E E E E E E E E E E E	A1. Bottom lin A2. Adjustmen A3. Total Adju  Applied amoun B1. Total Con B2. Penalty an B3. Overpayn B4. Other Tax B5. Total appl  Subtotal: State	e on return, after all adjustments  its to State/Local Refund  its  its  ributions, Donation, Checkoffs (Will carry to 2017 Sch A)  d/or interest (Will carry to 2017 ES screen)  (Use tax, Property tax, Tangible tax, etc)  ed amounts  / Local Refund plus Applied amounts	2 6 3  (Total of B1 thru B4)	В.	263
B. 4 E E E E E E E E E E E E E E E E E E E	A1. Bottom lin A2. Adjustmen A3. Total Adju  Applied amoun B1. Total Con B2. Penalty an B3. Overpayn B4. Other Tax B5. Total appl  Subtotal: State	e on return, after all adjustments  its to State/Local Refund  its  its  ributions, Donation, Checkoffs (Will carry to 2017 Sch A)  d/or interest (Will carry to 2017 ES screen)  (Use tax, Property tax, Tangible tax, etc)  ed amounts  / Local Refund plus Applied amounts	2 6 3  (Total of B1 thru B4)	В.	263
B. A  E  E  E  C. S  D. F  C  C  C  E  E  E  E	A2. Adjustmen A3. Total Adju  Applied amoun B1. Total Con B2. Penalty an B3. Overpayn B4. Other Tax B5. Total appl  Subtotal: State	Its to State/Local Refund  Sted State/Local Refund  State State/Local Refund  (Will carry to 2017 Sch A)  (Will carry to 2017 ES screen)  (Use tax, Property tax, Tangible tax, etc)  State State/Local Refund plus Applied amounts	2 6 3  (Total of B1 thru B4)	В.	263
B. A E E E E E E E E E E E E E E E E E E	A3. Total Adju  Applied amoun  B1. Total Con  B2. Penalty an  B3. Overpayn  B4. Other Tax  B5. Total appl  Subtotal: State	sted State/Local Refund  is ributions, Donation, Checkoffs · · · (Will carry to 2017 Sch A) d/or interest · · · · · · · (Will carry to 2017 ES screen) ent applied to 2017 · · · · · · (Will carry to 2017 ES screen) (Use tax, Property tax, Tangible tax, etc) · · · · · · · · · · · · · · · · · · ·	263 - (Total of B1 thru B4)	В.	263
B. # E E E E E E E E E E E E E E E E E E	Applied amoun B1. Total Con B2. Penalty an B3. Overpaym B4. Other Tax B5. Total appl Subtotal: State	ributions, Donation, Checkoffs · · · (Will carry to 2017 Sch A)  d/or interest · · · · · (Will carry to 2017 Sch A)  ent applied to 2017 · · · · · (Will carry to 2017 ES screen)  (Use tax, Property tax, Tangible tax, etc) · · · · · · · · · · · · · · · · · · ·	263 - (Total of B1 thru B4)	В.	263
E. A	B1. Total Condition B2. Penalty an B3. Overpaym B4. Other Tax B5. Total appl Subtotal: State	ributions, Donation, Checkoffs (Will carry to 2017 Sch A)  d/or interest	(Total of B1 thru B4)	•	
E. A	B2. Penalty al B3. Overpayn B4. Other Tax B5. Total appl Subtotal: State	d/or interest	(Total of B1 thru B4)	•	
E. A	B3. Overpaym B4. Other Tax B5. Total appl Subtotal: State	ent applied to 2017 · · · · · · (Will carry to 2017 ES screen)  (Use tax, Property tax, Tangible tax, etc) · · · · · · · · · · · · · · · · · · ·	(Total of B1 thru B4)	•	
C. S D. F C C E. A	B4. Other Tax B5. Total appl Subtotal: State Payments	(Use tax, Property tax, Tangible tax, etc) ed amounts  / Local Refund plus Applied amounts	,	•	
E. A	B5. Total appl Subtotal: State Payments	ed amounts · · · · · · · · · · · · · · · · · · ·	,	•	
C. S D. F C C E. A	Subtotal: State	/ Local Refund plus Applied amounts	,	•	
D. F. C. C. C. C. E. A. E.	Payments		· · (Line A plus line B)	C.	21,590
D. F. C. C. C. C. E. A. E.	Payments		, , ,	-	,
E. <i>A</i>	•				
E. <i>A</i>	I)1 lay Withh		00 000		
E. <i>A</i>		Id/2016 payments deducted on Schedule A			
E. <i>A</i>		r estimate and extension paid in 2017	35,000	_	62 000
E	<b>D3</b> . Total payr	nents applied to 2016 State / Local tax return	· · (Total of D1 thru D2)	D	63,829
	Allocation of Pa	yments			
Е	E1. Percent o	payments made in 2016 · · · · · · · (D1 divided by D3)	0.4517		
_	<b>Ε2.</b> Line C mι	Itiplied by line E1 · · · · · · · · · · · · · · · · · ·	9,752		
E	E3. Percent o	payments made in 2017 · · · · · · · (D2 divided by D3)	0.5483		
E	E4. Line C mu	Itiplied by line E3	11,838		
F. T	Taxable State /	Local Refund· · · · · · · · · · · · · · · · · · ·	- (Lesser of E2 or D1)	F	9 <b>,</b> 752
G. T	Taxes paid in 2	017 deductible on 2017 Schedule A			
	-	estimate and extension paid in 2017 · · · · · (From line D2)	35,000		
	•	refund that did not carry to the 1040, line 10 · · · (From line E4)	11,838		
ď		axes paid in 2017 allowed to carry to 2017 Sch A		G.	23,162

CAWK_A5	State / Local tax payments made after 12/31/2016 that will be deductible on 2017 Federal Schedule A	2016
Name(s) as shown on return  AKSHAI K &	CHANCHAL RUNCHAL	Your Social Security Number 553-39-5912
A. 2016 Income taxo A1. 4th quarter of A2. Amount paid	es due that were paid after 12/31/2016 estimate/extension (may be adj. by refund) *** ADJUSTED**** 23,162 I with return ************************************	<b>A</b> . 23,162
<ul><li>B2. Contribution</li><li>B3. Other Tax pa</li></ul>	le to payments enalty	В
C. Total tax payments	deductible in 2017 (Line A less line B)	<b>c</b> . 23,162

CAWK_IRA	For your records only.	<b>2016</b> IRA		
OAMIL_IIIA	Total IRA Distributions Works	heet	FD/ST	Summary
Name(s) as shown or	state return		Social Security	Number
AKSHAI K & CHANCHAL RUNCHAL			553-39-5	912
Federal		Taxpayer	Spouse	Total
		6,111		6,111
Income Screen (Line 1	5a)			
	• • • • • • • • • • • • • • • • • • • •	C 111		
F. d	Subtotal:	6,111		6,111
Federal's Computation		C 111		C 111
Iotal IRA Distributions	(Amount carrying to the Federal)	6,111		6,111
		_	_	
State		Taxpayer	Spouse	Total
	4 if state distribution)	6,111		6,111
Income Screen (Line 1	5a)			
	Subtotal:	6,111		6,111
State's Computation				-
	(Amount carrying to the State)	6,111		6,111

CAWK_PEN	For your records only. Total Pensions and Annuities	Worksheet	<b>2016</b> FD/ST	Pension Summary
Name(s) as shown on	ame(s) as shown on state return		Social Security N	umber
AKSHAI K & 0	SHAI K & CHANCHAL RUNCHAL		553-39-5912	
Federal		Taxpayer	Spouse	Total
1099R (Line 1)		24,089		24,089
		,		,
Income Screen (Line 16	Sa)			
	Subtotal:	24,089		24,089
Federal's Computation				
Total Pensions and Ann	uities (Amount carrying to the Federal)	24,089		24,089
State		Taxpayer	Spouse	Total
		24,089		24,089
Income Screen (Line 16	Sa)			
	Subtotal:	24,089		24,089
State's Computation				, ,
Total Pensions and Ann	uities (Amount carrying to the State)	24,089		24,089

CAWK_E	For your records only. Rents, royalties, partnerships, estates, etc	Worksheet	2016 FD/ST	Schedule E Summary
Name(s) as shown or	n state return		Social Security I	Number
AKSHAI K &	CHANCHAL RUNCHAL		553-39-59	912
Federal		Taxpayer	Spouse	Total
Rental/Royalty Income		100,376	19,615	119,991
Federal 4835 Farm Re	ntal			
Partnership income (To	otal active & passive)	71,121	71,120	142,241
Estate/trust income (To	otal active & passive)			
Subchapter S income (	Total active & passive)			
Federal REMIC Sched	ule Q · · · · · · · · · · · · · · · · · ·			
Section 179 Deduction				
Federal 8829 Office in	Home deduction			
	Subtotal:	171,497	90,735	262,232
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	JU, 133	202,232
Federal's Computatio	n	1/1/10/	<i>30,</i> 733	202,232
•	Partnerships, Estates, etc (Amount carrying to the Federal)	171,497	90,735	262,232
•		,	,	·
Total Rents, Royalties,		171,497	90,735	262,232
Total Rents, Royalties,	Partnerships, Estates, etc (Amount carrying to the Federal) •	171,497 Taxpayer	90,735   Spouse	262,232
Total Rents, Royalties,  State  Rental/Royalty Income	Partnerships, Estates, etc (Amount carrying to the Federal)	171,497	90,735	262,232
Total Rents, Royalties,  State  Rental/Royalty Income  Federal 4835 Farm Re	Partnerships, Estates, etc (Amount carrying to the Federal) -	171,497  Taxpayer  100,376	90,735 Spouse 19,615	262,232 Total 119,991
Total Rents, Royalties,  State  Rental/Royalty Income Federal 4835 Farm Re Partnership income (To	Partnerships, Estates, etc (Amount carrying to the Federal)  ntal · · · · · · · · · · · · · · · · · · ·	171,497 Taxpayer	90,735   Spouse	262,232  Total 119,991
Total Rents, Royalties,  State Rental/Royalty Income Federal 4835 Farm Re Partnership income (To	Partnerships, Estates, etc (Amount carrying to the Federal)  ntal  otal active & passive)  otal active & passive)	171,497  Taxpayer  100,376	90,735 Spouse 19,615	262,232  Total 119,991
Total Rents, Royalties,  State  Rental/Royalty Income Federal 4835 Farm Re Partnership income (To Estate/trust income (To Subchapter S income (	Partnerships, Estates, etc (Amount carrying to the Federal)  ntal  otal active & passive)  tal active & passive)  Total active & passive)	171,497  Taxpayer  100,376	90,735 Spouse 19,615	262,232  Total 119,991
Total Rents, Royalties,  State  Rental/Royalty Income Federal 4835 Farm Re Partnership income (To Estate/trust income (To Subchapter S income ( Federal REMIC Schede	Partnerships, Estates, etc (Amount carrying to the Federal)  ntal  otal active & passive)  total active & passive)  Total active & passive)  ule Q	171,497  Taxpayer  100,376	90,735 Spouse 19,615	262,232 Total 119,991
Total Rents, Royalties,  State  Rental/Royalty Income Federal 4835 Farm Re Partnership income (To Estate/trust income (To Subchapter S income ( Federal REMIC Schedu Section 179 Deduction	Partnerships, Estates, etc (Amount carrying to the Federal)  ntal  ntal  otal active & passive)  tal active & passive)  Total active & passive)  ule Q	171,497  Taxpayer  100,376	90,735 Spouse 19,615	262,232
Total Rents, Royalties,  State  Rental/Royalty Income Federal 4835 Farm Re Partnership income (To Estate/trust income (To Subchapter S income ( Federal REMIC Schedu Section 179 Deduction	Partnerships, Estates, etc (Amount carrying to the Federal)  ntal  otal active & passive)  total active & passive)  Total active & passive)  ule Q	171,497  Taxpayer  100,376	90,735 Spouse 19,615	262,232 Total 119,991
Total Rents, Royalties,  State  Rental/Royalty Income Federal 4835 Farm Re Partnership income (To Estate/trust income (To Subchapter S income ( Federal REMIC Schedu Section 179 Deduction	Partnerships, Estates, etc (Amount carrying to the Federal)  ntal  ntal  otal active & passive)  tal active & passive)  Total active & passive)  ule Q	171,497  Taxpayer  100,376	90,735 Spouse 19,615	Total 119,991 142,241
State Rental/Royalty Income Federal 4835 Farm Re Partnership income (To Estate/trust income (To Subchapter S income ( Federal REMIC Schedel Section 179 Deduction	Partnerships, Estates, etc (Amount carrying to the Federal)  ntal  ntal  otal active & passive)  otal active & passive)  Total active & passive)  Home deduction	Taxpayer 100,376 71,121	90,735 Spouse 19,615 71,120	262,232  Total 119,991

**Social Security Benefits Worksheet Figuring Your Taxable Benefits** 2016 **CAWK SSB** (Keep for your records) Your Social Security Number Name(s) as shown on return AKSHAI K & CHANCHAL RUNCHAL 553-39-5912 1. Enter the total amount from box 5 of ALL your Forms SSA-1099 and RRB-1099. **3.** Combine the amounts from: Form 1040: Lines 7, 8a, 9a, 10 through 14, 15b, 16b, 17 through 19, and 21 4. Enter the amount, if any, from Form 1040 or 1040A, line 8b **5.** Enter the total of any exclusions/adjustments for: • Adoption benefits (Form 8839, line 28), • Foreign earned income or housing (Form 2555, lines 45 and 50, or Form 2555-EZ, line 18), and • Certain income of bona fide residents of American Samoa (Form 4563, line 15) or Puerto Rico 7. Form 1040 filers: Enter the amounts from Form 1040, lines 23 through 32, and any write-in adjustments you entered on the dotted line next to line 36. **8.** Is the amount on line 7 less than the amount on line 6? **STOP** None of your social security benefits are taxable. Enter -0- on Form 1040, line 20b, or Form 1040A, line 14b. X Yes. 9. If you are: Married filing jointly, enter \$32,000 • Single, head of household, qualifying widow(er), or married filing separately and you lived apart from your spouse for all of 2016, enter \$25,000 ..... 32,000 Note: If you are married filing separately and you lived with your spouse at any time in 2016, skip lines 9 through 16; multiply line 8 by 85% (.85) and enter the result on line 17. Then go to line 18. **10.** Is the amount on line 9 less than the amount on line 8? **STOP** None of your benefits are taxable. Enter -0- on Form 1040, line 20b, or on Form 1040A, line 14b. If you are married filing separately and you lived apart from your spouse for all of 2016, be sure you entered "D" to the right of the word "benefits" on Form 1040, line 20a, or on Form 1040A, line 14a. X Yes. 11. Enter \$12,000 if married filing jointly; \$9,000 if single, head of household, qualifying widow(er), or **14.** Enter one-half of line 13 ..... **14.** 6,000 **16.** Multiply line 12 by 85% (.85). If line 12 is zero, enter -0-230,<u>696</u> **17.** Add lines 15 and 16 ..... **17.** 236, 696 

Note: a. If both spouses received SS benefits, the taxable amount is allocated

between the spouses in the ratio of the benefits received by one spouse

Spouse's portion

b. If only one spouse received benefits, that spouse should report the portion of the benefits that is taxable.

19. Taxable benefits. Enter the smaller of line 17 or line 18. Also enter this amount on Form 1040, line

### Notes about SS benefits:

to the total benefits received.

CANOTES	Notes about the return	<b>2016</b> PAGE 1
Name(s) as shown on re	eturn	SSN/FEIN
AKSHAI K & C	HANCHAL RUNCHAL	553-39-5912

- 1. CA 540 2EZ/NRS is not produced due to senior's fund.
- 2. If you want to suppress the state's notes page from generating when it only concerns long form versus short form do the following:

Escape out of the tax package data entry screen, go to Setup-Options-States tab. Select CA from the list; check box for "Suppress the CA Notes Page concerning ONLY the reason a short form did not print."

Note: This will turn off ONLY notes about why a California short form was not generated.

3. Mandatory E-Pay Information

This client may be required to make their payments electronically (Mandatory E-Pay)

Starting January 1, 2011, the mandatory e-pay penalty will be assessed when a person required to make payments electronically pays using any other method.

The penalty is equal to one percent (1%) of the amount paid, unless failure to pay was for reasonable cause and not willful neglect. (Revenue and Taxation Code section 19011.5)

SB 1389 (Enacted September 30, 2008) added Section 19011.5 to the Revenue & Taxation Code, requiring some taxpayers to make their tax payments using an electronic method (Mandatory E-Pay).

Electronic payments are required once a person:

- 1. Makes an estimate tax or extension payment (by check or electronic method) over \$20,000.
- 2. Files an original tax return with a tax liability over \$80,000.

Taxpayers whose tax thresholds fall below the mandatory e-pay amounts may request to discontinue making electronic payments. In March 2009, FTB will provide a waiver form for taxpayers to file.

CAINST	Filing Instructions	2016
Name(s) as shown on return		SSN or EIN
AKSHAI K & CHANCHAL RUNCHAL		553-39-5912

**Date to file by:** 10-16-2017

Form to be filed: CA540 and supplemental forms and schedules

Sign and Date: Sign & date the return in the space provided. If a

joint tax return, spouse's signature is required.

**Refund:** \$21,327.00

Address to file: Franchise Tax Board

PO Box 942840

Sacramento, CA 94240-0001

Transaction Method: Refund will be mailed from the state in form of a

check. If you want to get your refund faster within several days then e-file and use direct deposit. To have your refund directly deposited into your bank account, fill in the account information on the tax

return.