

Prepared For  
AKSHAI K RUNCHAL  
and CHANCHAL RUNCHAL

J ARORA INC  
17037 CHATSWORTH ST SUITE 202  
GRANADA HILLS CA 91344  
Telephone: 818-285-6271

**J ARORA INC  
17037 CHATSWORTH ST SUITE 202  
GRANADA HILLS CA 91344  
818-285-6271**

April 19, 2015

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

Dear AKSHAI & CHANCHAL,

Enclosed are your 2012 Federal and state income tax returns.

Your Federal income tax balance due is \$2,614.00.

Your Federal tax return has been filed electronically. To pay your balance due, please make your check or money order payable to UNITED STATES TREASURY and write your Social Security Number, daytime phone number, and "2012 Form 1040" on the check. Mail the enclosed Form 1040-V and your payment on or before 10/15/2013 to the Internal Revenue Service at the address on Form 1040-V. Do not staple or otherwise attach your payment to Form 1040-V.

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

Your 2012 CA state tax return was filed electronically. There is no refund or tax due. Please keep the enclosed copy for your records.

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

Sincerely,

JAGJIT SINGH ARORA

**J ARORA INC**  
**17037 CHATSWORTH ST SUITE 202**  
**GRANADA HILLS CA 91344**  
**818-285-6271**

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

Dear AKSHAI K RUNCHAL & CHANCHAL RUNCHAL:

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

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

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

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

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

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

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

Sincerely,  
J. Arora, EA

(Both husband and wife must sign for preparation of joint returns)

Accepted By:

(T) \_\_\_\_\_ date: \_\_\_\_\_

(S) \_\_\_\_\_ date: \_\_\_\_\_

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

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

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

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

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

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

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

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

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

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

Please contact us at 818-285-6271 if you have any questions or concerns regarding our policy.

Form 1040	Department of the Treasury - Internal Revenue Service (99)	2012	OMB No. 1545-0074	IRS Use Only-Do not write or staple in this space.
For the year Jan. 1-Dec. 31, 2012, or other tax year beginning			2012, ending	20
See separate instructions.				
Your first name and initial AKSHAI K RUNCHAL			Last name RUNCHAL	
Your social security number 553-39-5912				
If a joint return, spouse's first name and initial CHANCHAL RUNCHAL			Last name RUNCHAL	
Spouse's social security no. 573-41-5200				
Home address (number and street). If you have a P.O. box, see instructions. 1931 STRADELLA RD			Apt. no.	
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). LOS ANGELES CA 90077-2320			Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse	
Foreign country name			Foreign province/county	
Foreign postal code				
<b>Filing Status</b>				
1 <input type="checkbox"/> Single				
2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income)				
3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ▶				
4 <input type="checkbox"/> Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶				
5 <input type="checkbox"/> Qualifying widow(er) with dependent child				
<b>Exemptions</b>				
6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a				
b <input checked="" type="checkbox"/> Spouse				
c Dependents:				
(1) First name Last name (2) Dependent's social security no. (3) Dependent's relationship to you (4) If child under age 17 qualifying for child tax credit (see instr.)				
If more than four dependents, see instr. and check here ▶ <input type="checkbox"/>				
d Total number of exemptions claimed				
<b>Income</b>				
7 Wages, salaries, tips, etc. Attach Form(s) W-2				
7 7				
8a Taxable interest. Attach Schedule B if required				
8a 155.				
b Tax-exempt interest. Do not include on line 8a				
8b				
9a Ordinary dividends. Attach Schedule B if required				
9a 253.				
b Qualified dividends				
9b 253.				
10 Taxable refunds, credits, or offsets of state and local income taxes				
10				
11 Alimony received				
11				
12 Business income or (loss). Attach Schedule C or C-EZ				
12				
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>				
13 (3,000.)				
14 Other gains or (losses). Attach Form 4797				
14				
15a IRA distributions				
15a				
b Taxable amount				
15b				
16a Pensions and annuities				
16a				
b Taxable amount				
16b				
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E				
17 52,034.				
18 Farm income or (loss). Attach Schedule F				
18				
19 Unemployment compensation				
19				
20a Social security benefits				
20a 26,303.				
b Taxable amount				
20b 21,805.				
21 Other income. List type and amount (see instr.)				
21				
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income				
22 71,247.				
<b>Adjusted Gross Income</b>				
23 Educator expenses				
23				
24 Certain business expenses of reservists, performing artists, and fee-basis gov. officials. Attach Form 2106 or 2106-EZ				
24				
25 Health savings account deduction. Attach Form 8889				
25				
26 Moving expenses. Attach Form 3903				
26				
27 Deductible part of self-employment tax. Attach Schedule SE				
27				
28 Self-employed SEP, SIMPLE, and qualified plans				
28				
29 Self-employed health insurance deduction				
29				
30 Penalty on early withdrawal of savings				
30				
31a Alimony paid b Recipient's SSN ▶				
31a				
32 IRA deduction				
32				
33 Student loan interest deduction				
33				
34 Tuition and fees. Attach Form 8917				
34				
35 Domestic production activities deduction. Attach Form 8903				
35				
36 Add lines 23 through 35				
36				
37 Subtract line 36 from line 22. This is your adjusted gross income				
37 71,247.				

**Tax and Credits**

<b>38</b>	Amount from line 37 (adjusted gross income)	<b>38</b>	71,247.
<b>39a</b>	Check <input checked="" type="checkbox"/> <b>You were born before Jan. 2, 1948,</b> <input type="checkbox"/> <b>Blind.</b> <b>Total boxes checked ▶ 39a</b> <b>1</b> if: <input type="checkbox"/> <b>Spouse was born before Jan. 2, 1948,</b> <input type="checkbox"/> <b>Blind.</b> <b>▶ 39b</b> <b>1</b>		
<b>b</b>	If your spouse itemizes on a separate return or you were a dual-status alien, check here		
<b>40</b>	<b>Itemized deductions</b> (from Schedule A) or your <b>standard deduction</b> (see left margin)	<b>40</b>	40,192.
<b>41</b>	Subtract line 40 from line 38	<b>41</b>	31,055.
<b>42</b>	<b>Exemptions.</b> Multiply \$3,800 by the number on line 6d	<b>42</b>	7,600.
<b>43</b>	<b>Taxable income.</b> Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	<b>43</b>	23,455.
<b>44</b>	<b>Tax</b> (see instructions). Check if any tax is from: <b>a</b> <input type="checkbox"/> Form(s) 8814 <b>b</b> <input type="checkbox"/> Form 4972 <b>c</b> <input type="checkbox"/> 962 election	<b>44</b>	2,614.
<b>45</b>	<b>Alternative minimum tax</b> (see instructions). Attach Form 6251	<b>45</b>	
<b>46</b>	Add lines 44 and 45	<b>46</b>	2,614.
<b>47</b>	Foreign tax credit. Attach Form 1116 if required	<b>47</b>	
<b>48</b>	Credit for child and dependent care expenses. Attach Form 2441	<b>48</b>	
<b>49</b>	Education credits from Form 8863, line 19	<b>49</b>	
<b>50</b>	Retirement savings contributions credit. Attach Form 8880	<b>50</b>	
<b>51</b>	Child tax credit. Attach Schedule 8812, if required	<b>51</b>	
<b>52</b>	Residential energy credits. Attach Form 5695	<b>52</b>	
<b>53</b>	Other credits from Form: <b>a</b> <input type="checkbox"/> 3800 <b>b</b> <input type="checkbox"/> 8801 <b>c</b> <input type="checkbox"/>	<b>53</b>	
<b>54</b>	Add lines 47 through 53. These are your <b>total credits</b>	<b>54</b>	
<b>55</b>	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	<b>55</b>	2,614.

**Standard Deduction for-**

- People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.
- All others:

Single or Married filing separately, \$5,950  
Married filing jointly or Qualifying widow(er), \$11,900  
Head of household, \$8,700

**Other Taxes**

<b>56</b>	Self-employment tax. Attach Schedule SE	<b>56</b>	
<b>57</b>	Unreported social security and Medicare tax from Form: <b>a</b> <input type="checkbox"/> 4137 <b>b</b> <input type="checkbox"/> 8919	<b>57</b>	
<b>58</b>	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	<b>58</b>	
<b>59a</b>	Household employment taxes from Schedule H	<b>59a</b>	
<b>b</b>	First-time homebuyer credit repayment. Attach Form 5405 if required	<b>59b</b>	
<b>60</b>	Other taxes. Enter code(s) from instructions	<b>60</b>	
<b>61</b>	Add lines 55 through 60. This is your <b>total tax</b>	<b>61</b>	2,614.

**Payments**

If you have a qualifying child, attach Schedule EIC.

<b>62</b>	Federal income tax withheld from Forms W-2 and 1099	<b>62</b>	
<b>63</b>	2012 estimated tax payments and amount applied from 2011 return	<b>63</b>	
<b>64a</b>	<b>Earned income credit (EIC)</b>	<b>64a</b>	
<b>b</b>	Nontaxable combat pay election <b>64b</b>		
<b>65</b>	Additional child tax credit. Attach Form 8812	<b>65</b>	
<b>66</b>	American opportunity credit from Form 8863, line 8	<b>66</b>	
<b>67</b>	Reserved	<b>67</b>	
<b>68</b>	Amount paid with request for extension to file	<b>68</b>	
<b>69</b>	Excess social security and tier 1 RRTA tax withheld	<b>69</b>	
<b>70</b>	Credit for federal tax on fuels. Attach Form 4136	<b>70</b>	
<b>71</b>	Credits from Form: <b>a</b> <input type="checkbox"/> 2439 <b>b</b> <input type="checkbox"/> Re-served <b>c</b> <input type="checkbox"/> 8801 <b>d</b> <input type="checkbox"/> 8885	<b>71</b>	
<b>72</b>	Add lines 62, 63, 64a, and 65 through 71. These are your <b>total payments</b>	<b>72</b>	

**Refund**

<b>73</b>	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you <b>overpaid</b>	<b>73</b>	
<b>74a</b>	Amount of line 73 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/>	<b>74a</b>	
<b>b</b>	Routing number <input type="text"/>	<b>c</b>	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
<b>d</b>	Account number <input type="text"/>		
<b>75</b>	Amount of line 73 you want <b>applied to your 2013 estimated tax</b>	<b>75</b>	

**Amount You Owe**

<b>76</b>	<b>Amount you owe.</b> Subtract line 72 from line 61. For details on how to pay, see inst.	<b>76</b>	2,614.
<b>77</b>	Estimated tax penalty (see instructions)	<b>77</b>	

**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS (see instructions)? <input checked="" type="checkbox"/> <b>Yes. Complete below.</b> <input type="checkbox"/> <b>No</b>	
Designee's name <b>JAGJIT S ARORA</b>	Phone no. <b>818-923-5038</b>
	Personal identification number (PIN) <b>50346</b>

**Sign Here**

Joint return? See instr. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	
Your signature <b>JAGJIT S ARORA</b>	Date <b>03/11/2015</b>
Spouse's signature. If a joint return, <b>both</b> must sign.	Date <b>03/11/2015</b>
Your occupation <b>ENGINEER</b>	Daytime phone number <b>818-923-5038</b>
Spouse's occupation <b>ANALYST</b>	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

**Paid Preparer's Use Only**

Print/Type preparer's name <b>JAGJIT SINGH ARORA</b>	Preparer's signature <b>JAGJIT SINGH ARORA</b>	Date <b>03/11/2015</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P00186900</b>
Firm's name <b>J ARORA INC</b>	Firm's EIN <b>32-0225393</b>			
Firm's address <b>17037 CHATSWORTH ST SUITE 202 GRANADA HILLS CA 91344-5882</b>	Phone no. <b>818-923-5038</b>			

US

## 1040, 1040A, 1040EZ, 1040NR Income Worksheet

2012

Name: AKSHAI K &amp; CHANCHAL RUNCHAL

SSN: 553-39-5912

**Interest.** List all interest on Schedule B, regardless of the amount.**Unemployment and/or state tax refund.** Fill out 1099G worksheet**Additional Earned Income**

Taxpayer

Spouse

Total

Scholarship income - no W2 .....

Household employee income - no W2 .....

**Social Security/Railroad Tier 1 Benefits**

Taxpayer

Spouse

Total

Social Security received this year .....

26,303.

Railroad tier 1 received this year .....

Total .....

26,303.

26,303.

Medicare to Schedule A .....

Federal tax withheld .....

**Married Filing Separately**

If the filing status is married filing separately and the taxpayer and spouse lived together at any time during the year, up to 85% of social security and railroad benefits received are taxable. See Main Information Sheet, filing status 3 .....

**All others**

Modified adjusted gross income for this computation consists of AGI (without social security or railroad benefits) + Form 8815, line 14, + Form 8839, line 30 + Form 2555 (EZ) exclusions + student loan interest adjustment 49,442.

+ tax-exempt interest: \_\_\_\_\_ and excluded income from American Samoa (Form 4563) or

Puerto Rico: \_\_\_\_\_ + 50% of the benefits received: 13,152. .....

62,594.

If the modified AGI is less than \$25,001 (\$32,001 married filing jointly), none of the Social Security and RR Benefits are taxable.

If the modified AGI is between \$25,000 and \$34,000 (\$32,000 and \$44,000 married filing jointly), 50% of the benefits received is taxable .....

If the modified AGI is greater than \$34,000 (\$44,000 married filing jointly):

85% of the social security and railroad benefits received is taxable .....

**A**

22,358.

Modified AGI .....	62,594.
\$34,000 (\$44,000) .....	44,000.
Subtract .....	18,594.

X 85% = 15,805.

Minimum 50% of the benefits received or \$4,500 (\$6,000 married filing jointly) .....

6,000.

Add .....

**B**

21,805.

**Taxable social security and railroad retirement tier 1.** Minimum of A or B .....

21,805.

**Lump Sum Payment of Social Security and Railroad Tier 1 Benefits**

Taxpayer

Spouse

Total

Gross amount received attributable to 2012 .....

Using the above modified AGI, this is the taxable amount of the 2011 benefit .....

Amounts taxable from previous years .....

**Taxable benefits using the lump-sum election method** .....

### What Is Form 1040-V

It is a statement you send with your check or money order for any balance due on the "Amount you owe" line of your 2012 Form 1040, Form 1040A, or Form 1040EZ.

**TIP** You can also pay your taxes online or by phone either by a direct transfer from your bank account or by credit or debit card. Paying online or by phone is convenient and secure and helps make sure we get your payments on time. For more information, go to [www.irs.gov/e-pay](http://www.irs.gov/e-pay).

### How To Fill In Form 1040-V

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

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

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

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

### How To Prepare Your Payment

- Make your check or money order payable to "United States Treasury." Do not send cash.
- Make sure your name and address appear on your check or money order.
- Enter your daytime phone number and your SSN on your check or money order. If you are filing a joint return, enter the SSN shown first on your return. Also enter "2012 Form 1040," "2012 Form 1040A," or "2012 Form 1040EZ," whichever is appropriate.
- To help us process your payment, enter the amount on the right side of your check like this: \$ XXX.XX. Do not use dashes or lines (for example, do not enter "\$ XXX-" or "\$ XXX xx/100").

### How To Send In Your 2012 Tax Return, Payment, and Form 1040-V

- Detach Form 1040-V along the dotted line.
- Do not staple or otherwise attach your payment or Form 1040-V to your return or to each other. Instead, just put them loose in the envelope.
- Mail your 2012 tax return, payment, and Form 1040-V to the address shown on page 2 that applies to you.

US1040V1

BCA

Form **1040-V** (2012)

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury  
Internal Revenue Service

2012

Form 1040-V Payment Voucher

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

553-39-5912

573-41-5200

Amount you are  
paying by check  
or money order

1045

Dollars

Cents

2,614.

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

PO BOX 7704  
SAN FRANCISCO CA 94120-7704

553395912 TR RUNC 30 0 201212 610



**SCHEDULE A  
(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Itemized Deductions****► Information about Schedule A and its separate instructions is at [www.irs.gov/form1040](http://www.irs.gov/form1040).**  
**► Attach to Form 1040.**

OMB No. 1545-0074

**2012**Attachment  
Sequence No. **07**

Name(s) shown on Form 1040

AKSHAI K &amp; CHANCHAL RUNCHAL

Your social security no.

553-39-5912

**Medical  
and  
Dental  
Expenses****Caution.** Do not include expenses reimbursed or paid by others.

- 1** Medical and dental expenses (see instructions) ..... **1**
- 2** Enter amount from Form 1040, line 38 ..... **2**
- 3** Multiply line 2 by 7.5% (.075) ..... **3**
- 4** Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- ..... **4**

**Taxes You  
Paid**

- 5** State and local
- a** ☐ Income taxes ..... **5** 1,322.
- b** ☒ General sales taxes ..... **6** 17,381.
- 6** Real estate taxes (see instructions) ..... **7**
- 7** Personal property taxes ..... **8**
- 8** Other taxes. List type and amount ► ..... **8**
- 9** Add lines 5 through 8 ..... **9** 18,703.

**Interest  
You Paid**

- 10** Home mortgage interest & points reported to you on Form 1098 ..... **10** 20,299.
- 11** Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see inst. and show that person's name, identifying no., and address ► ..... **11**
- Note.** Your mortgage interest deduction may be limited (see instructions).
- 12** Points not reported to you on Form 1098. See instructions for special rules ..... **12**
- 13** Mortgage insurance premiums (see instructions) ..... **13**
- 14** Investment interest. Attach Form 4952 if required. (See inst.) ..... **14**
- 15** Add lines 10 through 14 ..... **15** 20,299.

**Gifts to  
Charity**

If you made a gift and got a benefit for it, see instructions.

- 16** Gifts by cash or check. If you made any gift of \$250 or more, see instructions ..... **16** 1,190.
- 17** Other than by cash or check. If any gift of \$250 or more, see instructions. You **must** attach Form 8283 if over \$500. .... **17**
- 18** Carryover from prior year ..... **18**
- 19** Add lines 16 through 18 ..... **19** 1,190.

**Casualty and  
Theft Losses**

- 20** Casualty or theft loss(es). Attach Form 4684. (See instructions.) ..... **20**

**Job Expenses  
and Certain  
Miscellaneous  
Deductions**

- 21** Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ► ..... **21**
- 22** Tax preparation fees ..... **22**
- 23** Other expenses - investment, safe deposit box, etc. List type and amount ► ..... **23**
- 24** Add lines 21 through 23 ..... **24**
- 25** Enter amount from Form 1040, line 38 ..... **25**
- 26** Multiply line 25 by 2% (.02) ..... **26**
- 27** Subtract line 26 from line 24. If line 26 is more than line 24, enter -0- ..... **27**

**Other  
Miscellaneous  
Deductions**

- 28** Other - from list in the inst. List type and amount ..... ► ..... **28**

**Total  
Itemized  
Deductions**

- 29** Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40 ..... **29** 40,192.
- 30** If you elect to itemize deductions even though they are less than your standard deduction, check here ..... ☐

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule A (Form 1040) 2012

**SCHEDULE D  
(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Capital Gains and Losses**

▶ Attach to Form 1040 or Form 1040NR.

▶ Information about Schedule D and its separate instructions is at [www.irs.gov/form1040](http://www.irs.gov/form1040).

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

OMB No. 1545-0074

**2012**Attachment  
Sequence No. **12**

Name(s) shown on return

AKSHAI K &amp; CHANCHAL RUNCHAL

Your social security number

553-39-5912

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

Complete Form 8949 before completing line 1, 2, or 3.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price) from Form(s) 8949, Part I, line 2, column (d)	(f) Cost or other basis from Form(s) 8949, Part I, line 2, column (e)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1 Short-term totals from all Forms 8949 with <b>box A</b> checked on <b>Part I</b> .....		( )		
2 Short-term totals from all Forms 8949 with <b>box B</b> checked on <b>Part I</b> .....	71.	( 116 )		-45.
3 Short-term totals from all Forms 8949 with <b>box C</b> checked on <b>Part I</b> .....		( )		
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 .....				4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 .....				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions .....				6 ( )
7 <b>Net short-term capital gain or (loss)</b> . Combine lines 1 through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2 .....				7 -45.

**Part II****Long-Term Capital Gains and Losses - Assets Held More Than One Year**

Complete Form 8949 before completing line 8, 9, or 10.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price) from Form(s) 8949, Part II, line 4, column (d)	(f) Cost or other basis from Form(s) 8949, Part II, line 4, column (e)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 4, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8 Long-term totals from all Forms 8949 with <b>box A</b> checked on <b>Part II</b> .....		( )		
9 Long-term totals from all Forms 8949 with <b>box B</b> checked on <b>Part II</b> .....	2055.	( 3351 )		-1296.
10 Long-term totals from all Forms 8949 with <b>box C</b> checked on <b>Part II</b> .....		( )		
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 .....				11
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 .....				12
13 Capital gain distributions. See the instructions .....				13
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions .....				14 ( 3664 )
15 <b>Net long-term capital gain or (loss)</b> . Combine lines 8 through 14 in column (h). Then go to Part III on the back .....				15 -4960.

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

Schedule D (Form 1040) 2012

BCA

**Part III****Summary**

<b>16</b>	Combine lines 7 and 15 and enter the result .....	<b>16</b>	(5,005.)
<ul style="list-style-type: none"> <li>• If line 16 is a <b>gain</b>, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.</li> <li>• If line 16 is a <b>loss</b>, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> <li>• If line 16 is <b>zero</b>, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.</li> </ul>			
<b>17</b>	Are lines 15 and 16 <b>both</b> gains?		
<input type="checkbox"/>	<b>Yes.</b> Go to line 18.		
<input type="checkbox"/>	<b>No.</b> Skip lines 18 through 21, and go to line 22.		
<b>18</b>	Enter the amount, if any, from line 7 of the <b>28% Rate Gain Worksheet</b> in the instructions .....	<b>18</b>	
<b>19</b>	Enter the amount, if any, from line 18 of the <b>Unrecaptured Section 1250 Gain Worksheet</b> in the instructions .....	<b>19</b>	
<b>20</b>	Are lines 18 and 19 <b>both</b> zero or blank?		
<input type="checkbox"/>	<b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). <b>Do not</b> complete lines 21 and 22 below.		
<input type="checkbox"/>	<b>No.</b> Complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Do not</b> complete lines 21 and 22 below.		
<b>21</b>	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the <b>smaller</b> of:		
	<ul style="list-style-type: none"> <li>• The loss on line 16 or</li> <li>• (\$3,000), or if married filing separately, (\$1,500)</li> </ul>	<b>21</b>	(3,000.)
<b>Note.</b> When figuring which amount is smaller, treat both amounts as positive numbers.			
<b>22</b>	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?		
<input checked="" type="checkbox"/>	<b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42).		
<input type="checkbox"/>	<b>No.</b> Complete the rest of Form 1040 or Form 1040NR.		

## US Schedule D

## Schedule D Tax Worksheet

2012

Name: AKSHAI K &amp; CHANCHAL RUNCHAL

SSN: 553-39-5912

1	Taxable income from Form 1040, line 43, Form 1040NR, line 40, Form 1040A, line 27, or from the Foreign Earned Income Tax Worksheet .....			23,455.
2	Qualified dividends from Form 1040, line 9b, Form 1040A, line 9b, or Form 1040NR, line 10b .....	253.		
3	Line 4g of Form 4952 .....			
4	Line 4e of Form 4952 .....			
5	Subtract line 4 from line 3 .....			
6	Subtract line 5 from line 2. If -0- or less, enter -0- .....		253.	
7	Smaller of line 15 or line 16 of Schedule D .....			
8	Smaller of line 3 or line 4 .....			
9	Subtract line 8 from line 7. If -0- or less, enter -0- .....			
10	Add lines 6 and 9 .....		253.	
11	Add lines 18 and 19 of Schedule D .....			
12	Smaller of line 9 or line 11 .....			
13	Subtract line 12 from line 10. If -0- or less, enter -0- .....			253.
14	Subtract line 13 from line 1. If -0- or less, enter -0- .....			23,202.
15	Smaller of line 1 or \$70,700 if married filing jointly or qualifying widow(er); \$35,350, if single or married filing separately; \$47,350 if head of household .....	23,455.		
16	Smaller of line 14 or line 15 .....	23,202.		
17	Subtract line 10 from line 1. If -0- or less, enter -0- .....	23,202.		
18	Larger of line 16 or line 17 .....		23,202.	
19	Subtract line 16 from line 15 .....		253.	
20	Smaller of line 1 or line 13 .....			
21	Amount from line 19 .....			
22	Subtract line 21 from line 20 .....			
23	Multiply line 22 by 15% .....			
24	Smaller of line 9 above or Schedule D, line 19 .....			
25	Add lines 10 and 18 .....			
26	Amount from line 1 .....			
27	Subtract line 26 from line 25. If -0- or less, enter -0- .....			
28	Subtract line 27 from line 24. If -0- or less, enter -0- .....			
29	Multiply line 28 by 25% .....			
30	Add lines 18, 19, 22, and 28 .....			
31	Subtract line 30 from line 1 .....			
32	Multiply line 31 by 28% .....			
33	Tax on line 18 amount .....			2,614.
34	Add lines 23, 29, 32, and 33 .....			2,614.
35	Tax on line 1 amount .....			2,651.
36	<b>Tax on all taxable income.</b> Smaller of lines 34 or 35 .....			2,614.

Name: AKSHAI K &amp; CHANCHAL RUNCHAL

SSN: 553-39-5912

**Capital Loss Carryovers from This Year to Next Year**

1	Amount from Form 1040, line 41, or Form 1040NR, line 38 .....	31,055.
2	Loss shown on Schedule D, line 21 as a positive amount .....	3,000.
3	Combine lines 1 and 2. If -0- or less, enter -0- .....	34,055.
4	Smaller line 2 or line 3 .....	3,000.
5	Loss shown on Schedule D, line 7 as a positive amount .....	45.
6	Gain, if any, shown on Schedule D, line 15 .....	
7	Add lines 4 and 6 .....	3,000.
8	<b>Short-term capital loss carryover.</b> Subtract line 7 from line 5. If -0- or less, enter -0- .....	
9	Loss shown on Schedule D, line 15 as a positive amount .....	4,960.
10	Gain, if any, shown on Schedule D, line 7 .....	
11	Subtract line 5 from line 4. If -0- or less, enter -0- .....	2,955.
12	Add lines 10 and 11 .....	2,955.
13	<b>Long-term capital loss carryover.</b> Subtract line 12 from line 9. If -0- or less, enter -0- .....	2,005.

**Sale of Your Home**

1 Date main home was sold: \_\_\_\_\_ Acquisition date: \_\_\_\_\_

2 If Form 8828 is also needed for this sale, check here ☐

3 If any part of the main home was ever rented out or used for business, see instructions.

If part of the sale is a sale of business property, report the business portion using a depreciation wkst, and report personal portion below and skip line 9.

4 Selling price of home .....

5 Selling expenses .....

6 Amount realized .....

7 Adjusted basis of home sold .....

8 **Gain on the sale.** If -0- or less, enter -0- .....

9 Depreciation claimed on property after 05/06/1997 .....

10 Subtract line 9 from line 8. If -0- or less, enter -0- .....

11 Aggregate number of days of nonqualified use after 12/31/2008. ....

12 Number of days the taxpayer owned the property .....

13 Divide the amount on line 11 by the amount on line 12 .....

14 Gain allocated to nonqualified use .....

15 **Gain eligible for exclusion** .....

16a Did you (and your spouse if filing a joint return) own and occupy the property as your main home for a total of at least 2 years of the 5 year period before the sale? ☐ Yes ☐ No

b If "No", did you sell the home due to a change in place of employment, health or other unforeseen circumstances? ☐ Yes ☐ No

c If you are an unmarried surviving spouse, the sale occurred no later than 2 years after the date of the other spouse's death, the ownership and use requirements for joint filers were met immediately before the date of such death, and there was no sale or exchange of a main home by either spouse which qualified for the exclusion during the 2-year period ending on the date of the other spouse's death, check here ☐ Yes

17 Maximum exclusion .....

18 Smaller of line 15 or line 17. If you are reporting the sale on the installment method, enter this amount on Form 6252, line 15 .....

19 **Taxable gain.** .....

a You must enter this amount on Schedule D or Form 6252. ....  
This gain is to be considered: ☐ short-term ☐ long-term.

b Transferred to Form 4797, Part III .....

**Information for Separate State Returns - Default is to the Taxpayer.**

	Federal	Taxpayer	Spouse
1 Short term .....	(45.)	(45.)	
2 Short term loss based on joint return .....	45.	45.	
3 Long term .....	(4,960.)	(4,960.)	
4 Long term loss based on joint return .....	2,955.	2,955.	
5 Schedule D result (line 16 or line 21) .....	(3,000.)	(3,000.)	
6 Short term loss carryover .....			
7 Long term loss carryover .....	2,005.	2,005.	

**SCHEDULE E  
(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Supplemental Income and Loss**(From rental real estate, royalties, partnerships, S corporations, estates, trusts,  
REMICs, etc.) **► Attach to Form 1040, 1040NR, or Form 1041.**

OMB No. 1545-0074

**2012**Attachment  
Sequence No. **13**

Name(s) shown on return

AKSHAI K &amp; CHANCHAL RUNCHAL

Your social security no.

553-39-5912

**Part I Income or Loss From Rental Real Estate and Royalties** Note. If you are in the business of renting personal property, use **Schedule C** or **C-EZ** (see instructions). If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.**A** Did you make any payments in 2012 that would require you to file Form(s) 1099? (see instructions) Yes ☐ No ☒  
**B** If "Yes," did you or will you file all required Forms 1099? Yes ☐ No ☐

<b>1a</b>	Physical address of each property (street, city, state, Zip code)				
<b>A</b>	3106 INGLEWOOD BLVD LOS ANGELES CA 90066-				
<b>B</b>	4416 KATHERINE AVE SHERMAN OAKS CA 91423-				
<b>C</b>	3817 MINERVA LOS ANGELES CA 90066-				
<b>1b</b>	Type of Property (from list below)	<b>2</b> For each rental real estate property listed above, report the number of fair rental and personal use days. Check the <b>QJV</b> box only if you meet the requirements to file as a qualified joint venture. See instructions.	<b>Fair Rental Days</b>	<b>Personal Use Days</b>	<b>QJV</b>
<b>A</b>	1		<b>A</b> 365		
<b>B</b>	1		<b>B</b> 365		
<b>C</b>	1		<b>C</b> 365		

**Type of Property:**

- |                           |                              |             |                    |
|---------------------------|------------------------------|-------------|--------------------|
| 1 Single Family Residence | 3 Vacation/Short-Term Rental | 5 Land      | 7 Self-Rental      |
| 2 Multi-Family Residence  | 4 Commercial                 | 6 Royalties | 8 Other (describe) |

Income:		Properties:	A	B	C
<b>3</b>	Rents received	<b>3</b>	61,200.	31,200.	24,854.
<b>4</b>	Royalties received	<b>4</b>			
<b>Expenses:</b>					
<b>5</b>	Advertising	<b>5</b>			
<b>6</b>	Auto and travel (see instructions)	<b>6</b>			
<b>7</b>	Cleaning and maintenance	<b>7</b>	1,900.	1,200.	960.
<b>8</b>	Commissions	<b>8</b>			
<b>9</b>	Insurance	<b>9</b>	717.	772.	577.
<b>10</b>	Legal and other professional fees	<b>10</b>			
<b>11</b>	Management fees	<b>11</b>			
<b>12</b>	Mortgage interest paid to banks, etc. (see instructions)	<b>12</b>	4,903.	31,239.	
<b>13</b>	Other interest	<b>13</b>			
<b>14</b>	Repairs	<b>14</b>	1,700.		651.
<b>15</b>	Supplies	<b>15</b>	200.		
<b>16</b>	Taxes	<b>16</b>	5,141.	5,549.	5,678.
<b>17</b>	Utilities	<b>17</b>			
<b>18</b>	Depreciation expense or depletion	<b>18</b>	6,900.	11,479.	4,022.
<b>19</b>	Other (list) ►	<b>19</b>			
<b>20</b>	Total expenses. Add lines 5 through 19	<b>20</b>	21,461.	50,239.	11,888.
<b>21</b>	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b>	<b>21</b>	39,739.	(19,039.)	12,966.
<b>22</b>	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	<b>22</b>	( )	( 19,039. )	( )
<b>23a</b>	Total of all amounts reported on line 3 for all rental properties	<b>23a</b>		277,852.	
<b>b</b>	Total of all amounts reported on line 4 for all royalty properties	<b>23b</b>			
<b>c</b>	Total of all amounts reported on line 12 for all properties	<b>23c</b>		67,174.	
<b>d</b>	Total of all amounts reported on line 18 for all properties	<b>23d</b>		22,401.	
<b>e</b>	Total of all amounts reported on line 20 for all properties	<b>23e</b>		198,504.	
<b>24</b>	<b>Income.</b> Add positive amounts shown on line 21. Do not include any losses	<b>24</b>			98,387.
<b>25</b>	<b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	<b>25</b>		( 19,039. )	
<b>26</b>	<b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	<b>26</b>			79,348.

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

Schedule E (Form 1040) 2012

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

AKSHAI K &amp; CHANCHAL RUNCHAL

Your social security no.

553-39-5912

**Caution.** The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.**Part II Income or Loss From Partnerships and S Corporations****Note.** If you report a loss from an at-risk activity for which **any** amount is **not** at risk, you **must** check the box in column (e) on line 28 and attach **Form 6198**. See instructions.**27** Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section.☐ Yes ☒ No

28	(a) Name	(b) Enter P for partnership; S for S corp.	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	MD LIVE OAK PROPERTIES LLC	P		26-0429153	
B	MD LIVE OAK PROPERTIES LLC	P		26-0429153	
C					
D					

Passive Income and Loss		Nonpassive Income and Loss	
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562
A		13,657.	
B		13,657.	
C			
D			
29a Totals			
b Totals		27,314.	
30 Add columns (g) and (i) of line 29a			30
31 Add columns (f), (h), and (i) of line 29b			31 ( 27,314. )
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below			32 (27,314.)

**Part III Income or Loss From Estates and Trusts**

33	(a) Name	(b) Employer identification number
A		
B		
Passive Income and Loss		Nonpassive Income and Loss
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1
A		
B		
34a Totals		
b Totals		
35 Add columns (d) and (f) of line 34a		35
36 Add columns (c) and (e) of line 34b		36 ( )
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below		37

**Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder**

38	(a) Name	(b) Employer identification no.	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below					39

**Part V Summary**

40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below		40
41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18		41 52,034.
42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), box 14, code F (see instructions)	42	
43 Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	5,262.

## 2012 K-1 DETAIL REPORT

Entity	Current Gain/ P/S Loss	Loss Carry Forward	Allowed Gain/ Loss	Sch. B Interest	Short Term Capital Gains	Long Term Capital Gains	Sect. 1231 Gain	Sect. 179 Gain	Rental Carryover Sch E	Passive Carryover Sch E	PTP Carryover Sch E
MD LIVE OAK PRO P	-13657		-13657								
MD LIVE OAK PRO P	-13657		-13657								
	-27314		-27314								



**SCHEDULE E  
(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Supplemental Income and Loss**(From rental real estate, royalties, partnerships, S corporations, estates, trusts,  
REMICs, etc.) **► Attach to Form 1040, 1040NR, or Form 1041.**

OMB No. 1545-0074

**2012**Attachment  
Sequence No. **13**

Name(s) shown on return

AKSHAI K &amp; CHANCHAL RUNCHAL

Your social security no.

553-39-5912

**Part I** **Income or Loss From Rental Real Estate and Royalties** **Note.** If you are in the business of renting personal property, use **Schedule C** or **C-EZ** (see instructions). If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.**A** Did you make any payments in 2012 that would require you to file Form(s) 1099? (see instructions)

Yes No

**B** If "Yes," did you or will you file all required Forms 1099?

Yes No

**1a** Physical address of each property (street, city, state, Zip code)**A** 12029 CLOVER AVE LOS ANGELES CA 90066-**B** 2408 OCEAN PARK SANTA MONICA CA 90405-**C**

<b>1b</b>	Type of Property (from list below)	<b>2</b> For each rental real estate property listed above, report the number of fair rental and personal use days. Check the <b>QJV</b> box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
<b>A</b>	1	<b>A</b>	365		
<b>B</b>	2	<b>B</b>	355		
<b>C</b>		<b>C</b>			

**Type of Property:**

- |                           |                              |             |                    |
|---------------------------|------------------------------|-------------|--------------------|
| 1 Single Family Residence | 3 Vacation/Short-Term Rental | 5 Land      | 7 Self-Rental      |
| 2 Multi-Family Residence  | 4 Commercial                 | 6 Royalties | 8 Other (describe) |

Income:	Properties:	A	B	C
<b>3</b> Rents received	<b>3</b>	35,400.	125,198.	
<b>4</b> Royalties received	<b>4</b>			
<b>Expenses:</b>				
<b>5</b> Advertising	<b>5</b>		192.	
<b>6</b> Auto and travel (see instructions)	<b>6</b>		143.	
<b>7</b> Cleaning and maintenance	<b>7</b>	600.	1,020.	
<b>8</b> Commissions	<b>8</b>			
<b>9</b> Insurance	<b>9</b>	722.	5,321.	
<b>10</b> Legal and other professional fees	<b>10</b>		19,601.	
<b>11</b> Management fees	<b>11</b>		10,000.	
<b>12</b> Mortgage interest paid to banks, etc. (see instructions)	<b>12</b>		31,032.	
<b>13</b> Other interest	<b>13</b>			
<b>14</b> Repairs	<b>14</b>		19,441.	
<b>15</b> Supplies	<b>15</b>			
<b>16</b> Taxes	<b>16</b>	1,876.	9,896.	
<b>17</b> Utilities	<b>17</b>		7,512.	
<b>18</b> Depreciation expense or depletion	<b>18</b>			
<b>19</b> Other (list) ► SEE STMT	<b>19</b>		7,560.	
<b>20</b> Total expenses. Add lines 5 through 19	<b>20</b>	3,198.	111,718.	
<b>21</b> Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b>	<b>21</b>	32,202.	13,480.	
<b>22</b> Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	<b>22</b>	( )	( )	( )
<b>23a</b> Total of all amounts reported on line 3 for all rental properties	<b>23a</b>			
<b>b</b> Total of all amounts reported on line 4 for all royalty properties	<b>23b</b>			
<b>c</b> Total of all amounts reported on line 12 for all properties	<b>23c</b>			
<b>d</b> Total of all amounts reported on line 18 for all properties	<b>23d</b>			
<b>e</b> Total of all amounts reported on line 20 for all properties	<b>23e</b>			
<b>24</b> <b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include any losses	<b>24</b>			
<b>25</b> <b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	<b>25</b>	( )		
<b>26</b> <b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	<b>26</b>			

**For Paperwork Reduction Act Notice, see your tax return instructions.****Schedule E (Form 1040) 2012**

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

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

**2012**Attachment  
Sequence No. **179**

Name(s) shown on return

AKSHAI K &amp; CHANCHAL RUNCHAL

Business or activity to which this form relates

RENTAL REALESTATE

Identifying number

553-39-5912

**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
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	2,000,000.
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) 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 2011 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12. ▶	13	

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

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

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2012	17	22,401.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B-Assets Placed in Service During 2012 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

**Section C-Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System**

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

**Part IV Summary (See instructions)**

21	Listed property. Enter amount from line 28	21	
22	<b>Total.</b> 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	22,401.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs. ▶	23	

**For Paperwork Reduction Act Notice, see separate instructions.**Form **4562** (2012)

## 2012 ASSET DETAIL REPORT

Description	Date	Acqd	Cost	Use	Spec.	Basis	Method	Rec.	Per.	Cv	Prior	Current	Next	Prior	Current	Gain/	Sales	Date
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
<b>Form: RENTAL REALESTATE</b>																		
<b>Rental Property: (A) 1 3106 INGLEWOOD BLVD</b>																		
<b>Depreciation Class: Real property residential rental</b>																		
<b>In Service Year: 1992</b>																		
3106 INGLEWO	10/92		260000	100		169000	SL		27.5	MM	116508	6147	6145	116508	4225			
<b>In Service Year: 2011</b>																		
3106 INGLEWO	02/11		20710	100		20710	SL		27.5	MM	659	753	753	659	753			
<b>Rental Property: (B) 1 4416 KATHERINE AVE</b>																		
<b>Depreciation Class: Real property residential rental</b>																		
<b>In Service Year: 2009</b>																		
4416 KATHERI	01/09		315700	100		315700	MACRS		27.5	MM	33960	11479	11479	33960	11479			
<b>Rental Property: (C) 1 3817 MINERVA</b>																		
<b>Depreciation Class: Real property residential rental</b>																		
<b>In Service Year: 1980</b>																		
3817 MINERVA	09/80		147560	100		104766	MACRS		27.5	MM								
<b>In Service Year: 2004</b>																		
3817 MINERVA	03/04		55000	100		55000	SL		27.5	MM	13000	2000	2000	13000	2000			
<b>In Service Year: 2007</b>																		
3817 MINERVA	07/07		55604	100		55604	SL		27.5	MM	9015	2022	2022	9015	2022			
<b>Form Totals:</b>																		
												854574	22401	173142	22399	173142	20479	

Declaration Control Number (DCN)

00 - 9626072015071C002223 - 3

IRS Use Only - Do not write or staple in this space.

Form **8453****U.S. Individual Income Tax Transmittal  
for an IRS e-file Return**

OMB No. 1545-0074

Department of the Treasury  
Internal Revenue Service

For the year January 1-December 31, 2012

**2012**

▶ See instructions.

Please  
print or  
type.

<b>PRINT CLEARLY</b>	Your first name and initial AKSHAI K		Last name RUNCHAL		Your social security number 553-39-5912	
	If a joint return, spouse's first name and initial CHANCHAL		Last name RUNCHAL		Spouse's social security no. 573-41-5200	
	Home address (number and street). If you have a P.O. box, see instructions.				Apt. no.	
	City, town or post office, state, and ZIP code (If a foreign address also complete spaces below.) LOS ANGELES CA 90077-2320					
	Foreign country name		Foreign province/county		Foreign postal code	

▲ **Important!** ▲  
You **must** enter  
your SSN(s) above.

**FILE THIS FORM ONLY IF YOU ARE ATTACHING ONE OR MORE  
OF THE FOLLOWING FORMS OR SUPPORTING DOCUMENTS.**

Check the applicable box(es) to identify the attachments.

- ☐ Appendix A, Statement by Taxpayer Using the Procedures in Rev. Proc. 2009-20 to Determine a Theft Loss Deduction Related to a Fraudulent Investment Arrangement
- ☐ Form 1098-C, Contributions of Motor Vehicles, Boats, and Airplanes (or equivalent contemporaneous written acknowledgment)
- ☒ Form 2848, Power of Attorney and Declaration of Representative (or POA that states the agent is granted authority to sign the return)
- ☐ Form 3115, Application for Change in Accounting Method
- ☐ Form 3468 - attach a copy of the first page of NPS Form 10-168a, Historic Preservation Certification Application (Part 2 - Description of Rehabilitation), with an indication that it was received by the Department of the Interior or the State Historic Preservation Officer, together with proof that the building is a certified historic structure (or that such status has been requested)
- ☐ Form 4136 - attach the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller or a certificate from the provider identifying the product as renewable diesel and, if applicable, a statement from the reseller
- ☐ Form 5713, International Boycott Report
- ☐ Form 8283, Noncash Charitable Contributions, Section A, (if any statement or qualified appraisal is required) or Section B, Donated Property, and any related attachments (including any qualified appraisal or partnership Form 8283)
- ☐ Form 8332, Release / Revocation of Release of Claim to Exemption for Child by Custodial Parent (or certain pages from a divorce decree or separation agreement, that went into effect after 1984 and before 2009) (see instructions)
- ☐ Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities
- ☐ Form 8864 - attach the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller or a certificate from the provider identifying the product as renewable diesel and, if applicable, a statement from the reseller
- ☐ Form 8885, Health Coverage Tax Credit, and all required attachments
- ☐ Form 8949, Sales and Other Dispositions of Capital Assets, (or a statement with the same information), if you elect not to report your transactions electronically on Form 8949

**DO NOT SIGN THIS FORM.**

For Paperwork Reduction Act Notice, see the instructions.

Form **8453** (2012)

**Sales and Other Dispositions of Capital Assets**

OMB No. 1545-0074

► Information about Form 8949 and its separate instructions is at [www.irs.gov/form8949](http://www.irs.gov/form8949).**2012**Department of the Treasury  
Internal Revenue Service (99)► File with your Schedule D to list your transactions for  
lines 1, 2, 3, 8, 9, and 10 of Schedule D.Attachment  
Sequence No. **12A**

Name(s) shown on return

AKSHAI K &amp; CHANCHAL RUNCHAL

Your social security number or taxpayer identification number

553-39-5912

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

**Part I**

**Short-Term.** Transactions involving capital assets you held one year or less are short term. For long-term transactions, see page 2.

**You must check Box A, B, or C below. Check only one box.** If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐  
☒  
☐
(A) Short-term transactions reported on Form 1099-B showing basis **was** reported to the IRS(B) Short-term transactions reported on Form 1099-B showing basis **was not** reported to the IRS

(C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see Column (e) in the separate instructions	Adjustments if any to gain or loss If you enter an amount in col (g), enter a code in col (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instr.	(g) Amount of adjustment	
	US GLOBAL	12/09/2011	12/05/2012	71.	116.			-45.
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 1</b> (if <b>Box A</b> above is checked), <b>line 2</b> (if <b>Box B</b> above is checked), or <b>line 3</b> (if <b>Box C</b> above is checked). ►				71.	116.			-45.

**Note.** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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

Form **8949** (2012)

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

**Social security number or taxpayer identification number**

AKSHAI K &amp; CHANCHAL RUNCHAL

553-39-5912

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

**Part II**

**Long-Term.** Transactions involving capital assets you held one year or less are long term. For short-term transactions, see page 2.

**You must check Box A, B, or C below. Check only one box.** If more than one box applies for your long-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐  
☒  
☐
(A) Long-term transactions reported on Form 1099-B showing basis **was** reported to the IRS(B) Long-term transactions reported on Form 1099-B showing basis **was not** reported to the IRS

(C) Long-term transactions not reported to you on Form 1099-B

3	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see Column (e) in the separate instructions	Adjustments if any to gain or loss If you enter an amount in col (g), enter a code in col (f). See the separate instructions.		(h) <b>Gain or (loss).</b> Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instr.	(g) Amount of adjustment	
	US GLOBAL	VA/RI/OUS	12/05/2012	2055.	3351.			-1296.
<b>4 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 8</b> (if <b>Box A</b> above is checked), <b>line 9</b> (if <b>Box B</b> above is checked), or <b>line 10</b> (if <b>Box C</b> above is checked) ▶				2055.	3351.			-1296.

**Note.** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Department of the Treasury  
Internal Revenue Service

► **Do not send to the IRS. This is not a tax return.**  
 ► **Keep this form for your records.**

**2012**

Declaration Control Number (DCN) ► 9626072015071C002223

Taxpayer's name  
AKSHAI K RUNCHALSocial security number  
553-39-5912Spouse's name  
CHANCHAL RUNCHALSpouse's social security number  
573-41-5200**Part I Tax Return Information-Tax Year Ending December 31, 2012** (Whole Dollars Only)

1	Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4).....	1	71,247.
2	Total tax (Form 1040, line 61; Form 1040A, line 35; Form 1040EZ, line 10) .....	2	2,614.
3	Federal income tax withheld (Form 1040, line 62; Form 1040A, line 36; Form 1040EZ, line 7).....	3	
4	Refund (Form 1040, line 74a; Form 1040A, line 43a; Form 1040EZ, line 11a; Form 1040-SS, Part I, line 12a) ..	4	
5	Amount you owe (Form 1040, line 76; Form 1040A, line 45; Form 1040EZ, line 12) .....	5	2,614.

**Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2012, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable my Electronic Funds Withdrawal Consent.

**Taxpayer's PIN: check one box only**

☒ I authorize J ARORA INC to enter or generate my PIN

95912

Enter five numbers, but  
do not enter all zeros

ERO firm name  
as my signature on my tax year 2012 electronically filed income tax return.

☐ I will enter my PIN as my signature on my tax year 2012 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ► Date ► 03/11/2015

**Spouse's PIN: check one box only**

☒ I authorize J ARORA INC to enter or generate my PIN

15200

Enter five numbers, but  
do not enter all zeros

ERO firm name  
as my signature on my tax year 2012 electronically filed income tax return.

☐ I will enter my PIN as my signature on my tax year 2012 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ► Date ► 03/11/2015

**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.

96260750346

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2012 electronically filed 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 **Publication 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► Date ► 03/11/2015

**ERO Must Retain This Form - See Instructions****Do Not Submit This Form to the IRS Unless Requested To Do So**

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

Form **8879** (2012)

# Power of Attorney and Declaration of Representative

► Type or print. ► See the separate instructions.

OMB No. 1545-0150

## For IRS Use Only

Received by:

Name \_\_\_\_\_

Telephone \_\_\_\_\_

Function \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### Part I Power of Attorney

**Caution:** A separate Form 2848 should be completed for each taxpayer. Form 2848 will not be honored for any purpose other than representation before the IRS.

#### 1 Taxpayer information. Taxpayer(s) must sign and date this form on page 2, line 7.

Taxpayer name(s) and address

AKSHAI K RUNCHAL

1931 STRADELLA RD

LOS ANGELES CA 90077-2320

Taxpayer identification number(s)

553-39-5912

Daytime telephone number

310-471-5013

Plan number (if applicable)

hereby appoint(s) the following representative(s) as attorney(s)-in-fact:

#### 2 Representative(s) must sign and date this form on page 2, Part II.

Name and address

JAGJIT SINGH ARORA

17037 CHATSWORTH ST SUITE 202

GRANADA HILLS CA 91344

Check if to be sent notices and communications ☐

CAF No. 9005-39935R

PTIN P00186900

Telephone No. 818-923-5038

Fax No. 818-923-5053

Check if new: Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

CAF No. \_\_\_\_\_

PTIN \_\_\_\_\_

Telephone No. \_\_\_\_\_

Fax No. \_\_\_\_\_

Check if to be sent notices and communications ☐

Check if new: Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

CAF No. \_\_\_\_\_

PTIN \_\_\_\_\_

Telephone No. \_\_\_\_\_

Fax No. \_\_\_\_\_

Check if to be sent notices and communications ☐

Check if new: Address ☐ Telephone No. ☐ Fax No. ☐

to represent the taxpayer(s) before the Internal Revenue Service for the following tax matters:

#### 3 Matters

Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift, Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, etc.) (see instructions for line 3)	Tax Form Number (1040, 941, 720, etc.) (if applicable)	Year(s) or Period(s) (if applicable) (see the instructions for line 3)
INCOME	1040	2011, 2012, 2013

#### 4 Specific use not recorded on Centralized Authorization File (CAF). If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for Line 4. **Specific Uses Not Recorded on CAF.** ☐

**5 Acts authorized.** Unless otherwise provided below, the representatives generally are authorized to receive and inspect confidential tax information and to perform any and all acts that I can perform with respect to the tax matters described on line 3, for example, the authority to sign any agreements, consents, or other documents. The representative(s), however, is (are) not authorized to receive or negotiate any amounts paid to the client in connection with this representation (including refunds by either electronic means or paper checks). Additionally, unless the appropriate box(es) below are checked, the representative(s) is (are) not authorized to execute a request for disclosure of tax returns or return information to a third party, substitute another representative or add additional representatives, or sign certain tax returns.

☐ Disclosure to third parties; ☐ Substitute or add representatives; ☐ Signing a return; \_\_\_\_\_

☐ Other acts authorized \_\_\_\_\_ (see instructions for more information)

**Exceptions.** An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. An enrolled actuary may only represent taxpayers to the extent provided in section 10.3(d) of Treasury Department Circular No. 230 (Circular 230). An enrolled retirement plan agent may only represent taxpayers to the extent provided in section 10.3(e) of Circular 230. A registered tax return preparer may only represent taxpayers to the extent provided in section 10.3(f) of Circular 230. See the line 5 instructions for restrictions on tax matters partners. In most cases, the student practitioner's (level k) authority is limited (for example, they may only practice under the supervision of another practitioner).

List any specific additions or deletions to the acts otherwise authorized in this power of attorney: \_\_\_\_\_



**6 Retention/revocation of prior power(s) of attorney.** The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you **do not** want to revoke a prior power of attorney, check here ..... ☐ **YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.**

**7 Signature of taxpayer(s).** If a tax matter concerns a year in which a joint return was filed, the husband and wife must each file a separate power of attorney even if the same representative(s) is (are) being appointed. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.

► **IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED TO THE TAXPAYER.**

_____ Signature	_____ Date	_____ Title (if applicable)
AKSHAI K RUNCHAL Print Name	95912 PIN Number	_____ Print name of taxpayer from line 1 if other than individual

## Part II Declaration of Representative

Under penalties of perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Circular 230 (31 CFR, Part 10), as amended, concerning practice before the Internal Revenue Service;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and
- I am one of the following:
  - a Attorney - a member in good standing of the bar of the highest court of the jurisdiction shown below.
  - b Certified Public Accountant - duly qualified to practice as a certified public accountant in the jurisdiction shown below.
  - c Enrolled Agent - enrolled as an agent under the requirements of Circular 230.
  - d Officer - a bona fide officer of the taxpayer's organization.
  - e Full-Time Employee - a full-time employee of the taxpayer.
  - f Family Member - a member of the taxpayer's immediate family (for example, spouse, parent, child, grandparent, step-parent, step-child, brother, or sister).
  - g Enrolled Actuary - enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).
  - h Unenrolled Return Preparer - Your authority to practice before the Internal Revenue Service is limited. You must have been eligible to sign the return under examination and have signed the return. **See Notice 2011-6 and Special rules for registered tax return preparers and unenrolled return preparers in the instructions.**
  - i Registered Tax Return Preparer - registered as a tax return preparer under the requirements of section 10.4 of Circular 230. Your authority to practice before the Internal Revenue Service is limited. You must have been eligible to sign the return under examination and have signed the return. **See Notice 2011-6 and Special rules for registered tax return preparers and unenrolled return preparers in the instructions.**
  - k Student Attorney or CPA - receives permission to practice before the IRS by virtue of his/her status as a law, business, or accounting student working in LITC or STCP under section 10.7(d) of Circular 230. See instructions for Part II for additional information and requirements.
  - r Enrolled Retirement Plan Agent - enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

► **IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED. REPRESENTATIVES MUST SIGN IN THE ORDER LISTED IN LINE 2 ABOVE.** See the instructions for Part II.

**Note:** For designations d-f, enter your title, position, or relationship to the taxpayer in the "Licensing jurisdiction" column. See the instructions for Part II for more information.

Designation - Insert above letter (a-r)	Licensing jurisdiction (state) or other licensing authority (if applicable)	Bar, license, certification, registration, or enrollment number (if applicable). See instructions for Part II for more information.	Signature	Date
C	IRS	00046617-EA		04/01/2014

# Power of Attorney and Declaration of Representative

► Type or print. ► See the separate instructions.

OMB No. 1545-0150

## For IRS Use Only

Received by:

Name \_\_\_\_\_

Telephone \_\_\_\_\_

Function \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### Part I Power of Attorney

**Caution:** A separate Form 2848 should be completed for each taxpayer. Form 2848 will not be honored for any purpose other than representation before the IRS.

#### 1 Taxpayer information. Taxpayer(s) must sign and date this form on page 2, line 7.

Taxpayer name(s) and address CHANCHAL RUNCHAL  1931 STRADELLA RD LOS ANGELES CA 90077-2320		Taxpayer identification number(s)  573-41-5200	
		Daytime telephone number 310-991-1157	Plan number (if applicable)

hereby appoint(s) the following representative(s) as attorney(s)-in-fact:

#### 2 Representative(s) must sign and date this form on page 2, Part II.

Name and address JAGJIT SINGH ARORA 17037 CHATSWORTH ST SUITE 202 GRANADA HILLS CA 91344	CAF No. 17037 PTIN P00186900 Telephone No. 818-923-5038 Fax No. 818-923-5053
Check if to be sent notices and communications <input type="checkbox"/>	Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
Name and address	CAF No. _____ PTIN _____ Telephone No. _____ Fax No. _____
Check if to be sent notices and communications <input type="checkbox"/>	Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
Name and address	CAF No. _____ PTIN _____ Telephone No. _____ Fax No. _____
Check if to be sent notices and communications <input type="checkbox"/>	Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>

to represent the taxpayer(s) before the Internal Revenue Service for the following tax matters:

#### 3 Matters

Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift, Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, etc.) (see instructions for line 3)	Tax Form Number (1040, 941, 720, etc.) (if applicable)	Year(s) or Period(s) (if applicable) (see the instructions for line 3)
INCOME	1040	2011, 2012, 2013

#### 4 Specific use not recorded on Centralized Authorization File (CAF). If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for Line 4. **Specific Uses Not Recorded on CAF.** ☐

**5 Acts authorized.** Unless otherwise provided below, the representatives generally are authorized to receive and inspect confidential tax information and to perform any and all acts that I can perform with respect to the tax matters described on line 3, for example, the authority to sign any agreements, consents, or other documents. The representative(s), however, is (are) not authorized to receive or negotiate any amounts paid to the client in connection with this representation (including refunds by either electronic means or paper checks). Additionally, unless the appropriate box(es) below are checked, the representative(s) is (are) not authorized to execute a request for disclosure of tax returns or return information to a third party, substitute another representative or add additional representatives, or sign certain tax returns.

☐ Disclosure to third parties; ☐ Substitute or add representatives; ☐ Signing a return; \_\_\_\_\_

☐ Other acts authorized \_\_\_\_\_ (see instructions for more information)

**Exceptions.** An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. An enrolled actuary may only represent taxpayers to the extent provided in section 10.3(d) of Treasury Department Circular No. 230 (Circular 230). An enrolled retirement plan agent may only represent taxpayers to the extent provided in section 10.3(e) of Circular 230. A registered tax return preparer may only represent taxpayers to the extent provided in section 10.3(f) of Circular 230. See the line 5 instructions for restrictions on tax matters partners. In most cases, the student practitioner's (level k) authority is limited (for example, they may only practice under the supervision of another practitioner).

List any specific additions or deletions to the acts otherwise authorized in this power of attorney: \_\_\_\_\_

**6 Retention/revocation of prior power(s) of attorney.** The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you **do not** want to revoke a prior power of attorney, check here ..... ☐

**YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.**

**7 Signature of taxpayer(s).** If a tax matter concerns a year in which a joint return was filed, the husband and wife must each file a separate power of attorney even if the same representative(s) is (are) being appointed. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.

► **IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED TO THE TAXPAYER.**

_____ Signature	_____ Date	_____ Title (if applicable)
CHANCHAL RUNCHAL Print Name	15200 PIN Number	_____ Print name of taxpayer from line 1 if other than individual

## Part II Declaration of Representative

Under penalties of perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Circular 230 (31 CFR, Part 10), as amended, concerning practice before the Internal Revenue Service;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and
- I am one of the following:
  - a Attorney - a member in good standing of the bar of the highest court of the jurisdiction shown below.
  - b Certified Public Accountant - duly qualified to practice as a certified public accountant in the jurisdiction shown below.
  - c Enrolled Agent - enrolled as an agent under the requirements of Circular 230.
  - d Officer - a bona fide officer of the taxpayer's organization.
  - e Full-Time Employee - a full-time employee of the taxpayer.
  - f Family Member - a member of the taxpayer's immediate family (for example, spouse, parent, child, grandparent, step-parent, step-child, brother, or sister).
  - g Enrolled Actuary - enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).
  - h Unenrolled Return Preparer - Your authority to practice before the Internal Revenue Service is limited. You must have been eligible to sign the return under examination and have signed the return. **See Notice 2011-6 and Special rules for registered tax return preparers and unenrolled return preparers in the instructions.**
  - i Registered Tax Return Preparer - registered as a tax return preparer under the requirements of section 10.4 of Circular 230. Your authority to practice before the Internal Revenue Service is limited. You must have been eligible to sign the return under examination and have signed the return. **See Notice 2011-6 and Special rules for registered tax return preparers and unenrolled return preparers in the instructions.**
  - k Student Attorney or CPA - receives permission to practice before the IRS by virtue of his/her status as a law, business, or accounting student working in LITC or STCP under section 10.7(d) of Circular 230. See instructions for Part II for additional information and requirements.
  - r Enrolled Retirement Plan Agent - enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

► **IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED. REPRESENTATIVES MUST SIGN IN THE ORDER LISTED IN LINE 2 ABOVE.** See the instructions for Part II.

**Note:** For designations d-f, enter your title, position, or relationship to the taxpayer in the "Licensing jurisdiction" column. See the instructions for Part II for more information.

Designation - Insert above letter (a-r)	Licensing jurisdiction (state) or other licensing authority (if applicable)	Bar, license, certification, registration, or enrollment number (if applicable). See instructions for Part II for more information.	Signature	Date
C	IRS	00046617-EA		04/01/2014

## Detail Sheet

2012

**Name:** AKSHAI K & CHANCHAL RUNCHAL

**ID:** 553-39-5912

**Description:** INCOME ALLOCATION[illegible]

**California Resident  
Income Tax Return 2012****540** C 1 Side 1

APE

ATTACH FED RETURN

P  
AC  
A  
R  
RP553-39-5912 RUNC 573-41-5200  
AKSHAI K RUNCHAL  
CHANCHAL RUNCHAL

12

1931 STRADELLA RD  
LOS ANGELES

CA 90077-2320

10-16-1943

07-16-1951

01	2	45	0	404	0	APE	0
06	0	46	0	405	0	FS	0
09	01 104	47	0	406	0	3800	0
10	00 0	48	0	407	0	3803	0
11	312	61	0	408	0	SCHG1	0
12	0	62	0	410	0	5870A	0
13	71247	63	0	412	0	5805 5805F	0
14	21805	64	0	413	0	DESIGNEE	1
16	0	71	0	414	0	TPIDP 00186900	
17	49442	72	0	419	0	FN 320225393	
18	38870	73	0	420	0	CCF	0
19	10572	74	0	421	0	3805P	0
31	106	75	0	422	0	NQDC	0
32	312	91	0	423	0	3540	0
33	0	92	0	110	0	3805Z	0
34	0	93	0	111	0	3807	0
35	0	94	0	112	0	3808	0
40	0	95	0	113	0	3809	0
41	0	400	0	115	0	3549A	0
42	0	401	0	116	0	IRC1341	0
43	0	402	0	117	0		
44	0	403	0				

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

**Sign  
Here**

Your signature \_\_\_\_\_ Spouse's/RDP's signature (if a joint return, both must sign) \_\_\_\_\_  
 Daytime phone number (optional) \_\_\_\_\_ Date \_\_\_\_\_  
 Your email address (optional). Enter only one. \_\_\_\_\_

It is unlawful  
to forge a  
spouse's/RDP's  
signature.

Paid preparer's signature (declaration of preparer is based on all information of which preparer has any knowledge)

● PTIN  
P00186900

Firm's name (or yours, if self-employed)

Firm's address GRANADA HIL 91344  
J ARORA INC 17037 CHATSWORTH ST SUIT 32-0225393Joint tax  
return?  
(see  
instructions)Do you want to allow another person to discuss this return with us (see instructions)? ..... ● ☒ Yes ☐ No

JAGJIT ARORA

818-923-5038

Print Third Party Designee's Name

Telephone Number

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

Filing Status	1	<input type="checkbox"/>	Single		
	2	<input checked="" type="checkbox"/>	Married/RDP filing jointly (see instructions).		
	3	<input type="checkbox"/>	Married/RDP filing separately. Enter spouse's/RDP's SSN or ITIN above and full name here		
	4	<input type="checkbox"/>	Head of household (with qualifying person) (see instructions)		
	5	<input type="checkbox"/>	Qualifying widow(er) with dependent child. Enter year spouse/RDP died.		
If your California filing status is different from your federal filing status, check the box here				<input type="checkbox"/>	
6 If someone can claim you (or your spouse/RDP) as a dependent, check the box here (see instructions)				6 <input type="checkbox"/>	
7 <b>Personal:</b> If you checked 1, 3, or 4 above, enter 1 in the box. If you checked 2 or 5, enter 2 in the box. If you checked the box on line 6, see instructions				7 <input type="checkbox"/> X \$104= \$ 208	
8 <b>Blind:</b> If you (or your spouse/RDP) are visually impaired, enter 1; if both are visually impaired, enter 2				8 <input type="checkbox"/> X \$104= \$	
9 <b>Senior:</b> If you (or your spouse/RDP) are 65 or older, enter 1; if both are 65 or older, enter 2				9 <input type="checkbox"/> X \$104= \$ 104	
Exemptions	10 <b>Dependents: Do not include yourself or your spouse/RDP.</b>				
	First name		Last name	Dependent's relationship to you	
Total dependent exemptions				10 <input type="checkbox"/> X \$321= \$	
11 <b>Exemption amount:</b> Add line 7 through line 10. Transfer this amount to line 32				11 \$ 312	
Taxable Income	12 State wages from your Form(s) W-2, box 16				12
	13 Enter federal adjusted gross income from Form 1040, line 37; Form 1040A, line 21; Form 1040EZ, line 4				13 71,247
	14 California adjustments - subtractions. Enter the amount from Schedule CA (540), line 37, column B				14 21,805
	15 Subtract line 14 from line 13. If less than zero, enter the result in parentheses (see instructions)				15 49,442
	16 California adjustments - additions. Enter the amount from Schedule CA (540), line 37, column C				16
Tax	17 California adjusted gross income. Combine line 15 and line 16				17 49,442
	18 Enter the larger of your CA <b>standard deduction</b> OR your CA <b>itemized deductions</b>				18 38,870
	19 Subtract line 18 from line 17. This is your <b>taxable income</b> . If less than zero, enter -0-				19 10,572
	31 Tax. Check box if from: <input checked="" type="checkbox"/> Tax Table <input type="checkbox"/> Tax Rate Sch. <input type="checkbox"/> FTB 3800 <input type="checkbox"/> FTB 3803				31 106
	32 Exemption credits. Enter the amount from line 11. If your federal AGI is more than \$169,730 (see instructions)				32 312
Special Credits	33 Subtract line 32 from line 31. If less than zero, enter -0-				33 0
	34 Tax (see instructions). Check box if from: <input type="checkbox"/> Schedule G-1 <input type="checkbox"/> Form FTB 5870A				34
	35 Add line 33 and line 34				35
	40 Nonrefundable Child and Dependent Care Expenses Credit (see instructions). Attach form FTB 3506				40
	41 New jobs credit, amount generated (see instructions)				41
Other Taxes	42 New jobs credit, amount claimed (see instructions)				42
	43 Credit <input type="checkbox"/> Code <input type="checkbox"/> amount				43
	44 Credit <input type="checkbox"/> Code <input type="checkbox"/> amount				44
	45 To claim more than two credits (see instructions)				45
	46 Nonrefundable renter's credit (see instructions)				46
Payments	47 Add line 40 and line 42 through line 46. These are your total credits				47
	48 Subtract line 47 from line 35. If less than zero, enter -0-				48
	61 Alternative minimum tax. Attach Schedule P (540)				61
	62 Mental Health Services Tax (see instructions)				62
	63 Other taxes and credit recapture (see instructions)				63
64 Add line 48, line 61, line 62, and line 63. This is your total tax.				64	
71 California income tax withheld (see instructions)				71	
72 2012 CA estimated tax and other payments (see instructions)				72	
73 Real estate and other withholding (see instructions)				73	
74 Excess SDI (or VPD) withheld (see instructions)				74	
75 Add line 71, line 72, line 73, and line 74. These are your total payments (see instructions)				75	

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

Overpaid Tax/Tax Due	91	Overpaid tax. If line 75 is more than line 64, subtract line 64 from line 75 .....	91	_____
	92	Amount of line 91 you want applied to <b>2013</b> estimated tax .....	92	_____
	93	Overpaid tax available this year. Subtract line 92 from line 91 .....	93	_____
	94	Tax due. If line 75 is less than line 64, subtract line 75 from line 64.....	94	_____

Use Tax	95	Use Tax. <b>This is not a total line</b> (see instructions) .....	95	_____	00
------------	----	---	----	-------	----

		Code	Amount
Contributions	California Seniors Special Fund (see instructions) .....	400	00
	Alzheimer's Disease/Related Disorders Fund .....	401	00
	California Fund for Senior Citizens .....	402	00
	Rare and Endangered Species Preservation Program .....	403	00
	State Children's Trust Fund for the Prevention of Child Abuse .....	404	00
	California Breast Cancer Research Fund .....	405	00
	California Firefighters' Memorial Fund .....	406	00
	Emergency Food for Families Fund .....	407	00
	California Peace Officer Memorial Foundation Fund .....	408	00
	California Sea Otter Fund .....	410	00
	Municipal Shelter Spay-Neuter Fund .....	412	00
	California Cancer Research Fund .....	413	00
	ALS/Lou Gehrig's Disease Research Fund .....	414	00
	Child victims of Human Trafficking Fund .....	419	00
	California YMCA Youth and Government Fund .....	420	00
	California Youth Leadership Fund .....	421	00
	School Supplies for Homeless Children Fund .....	422	00
	State Parks Protection Fund/Parks Pass Purchase .....	423	00
	110	Add code 400 through code 423. These are your total contribution .....	110

Amount You Owe	111	<b>AMOUNT YOU OWE.</b> Add line 94, line 95, and line 110 (see instructions). <b>Do Not Send Cash.</b>	
		Mail to: <b>FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0009</b> .. • 111 _____	
		Pay online - Go to <b>ftb.ca.gov</b> and search for more information.	

Interest and Penalties	112	Interest, late return penalties, and late payment penalties .....	112	_____
	113	Underpayment of estimated tax. Check box: <input type="checkbox"/> <b>FTB 5805 attached</b> <input type="checkbox"/> <b>FTB 5805F attached</b> .....	113	_____
	114	Total amount due (see instructions). Enclose, but <b>do not</b> staple, any payment.....	114	_____

Refund and Direct Deposit	115	<b>REFUND OR NO AMOUNT DUE.</b> Subtract line 95 and line 110 from line 93 (see instructions). Mail to:	
		<b>FRANCHISE TAX BOARD, PO BOX 942840, SACRAMENTO CA 94240-0009</b> .....	

Fill in the information to authorize direct deposit of your refund into one or two accounts. **Do not** attach a voided check or a deposit slip (see instr.)

**Have you verified the routing and account numbers?** Use whole dollars only.

All or the following amount of my refund (line 115) is authorized for direct deposit into the account shown below:

_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	_____	_____
• Routing number	• Type	• Account number	• 116 Direct deposit amount

The remaining amount of my refund (line 115) is authorized for direct deposit into the account shown below:

_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	_____	_____
• Routing number	• Type	• Account number	• 117 Direct deposit amount

TAXABLE YEAR

FORM

2012

## California e-file Signature Authorization for Individuals

8879

9626072015071C002224

Your name AKSHAI K RUNCHAL	Your SSN or ITIN 553-39-5912
Spouse's/RDP's name CHANCHAL RUNCHAL	Spouse's/RDP's SSN or ITIN 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; or Short Form 540NR, line 32) .....	1	49,442.
2 Amount You Owe (Form 540, line 111; Form 540 2EZ, line 27; 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 28; Long Form 540NR, line 125; or Short Form 540NR, line 125) .....	3	

**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, 2012, 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, 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**

☒ I authorize J ARORA INC to enter my PIN 95912  
**ERO firm name** **Do not enter all zeros**  
 as my signature on my 2012 e-filed California individual income tax return.

☐ I will enter my PIN as my signature on my 2012 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.

Your signature ► \_\_\_\_\_ Date ► 03/11/2015

**Spouse's/RDP's PIN: check one box only**

☒ I authorize J ARORA INC to enter my PIN 15200  
**ERO firm name** **Do not enter all zeros**  
 as my signature on my 2012 e-filed California individual income tax return.

☐ I will enter my PIN as my signature on my 2012 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.

Spouse's/RDP's signature ► \_\_\_\_\_ Date ► 03/11/2015

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. 96260750346  
**Do not enter all zeros**

I certify that the above numeric entry is my PIN, which is my signature for the 2012 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, 2012 e-file Handbook for Authorized e-file Providers.

ERO's signature ► \_\_\_\_\_ Date ► 03/11/2015



**2012****California Adjustments - Residents****CA (540)****Important:** Attach this schedule behind Form 540, Side 3 as a supporting California schedule.

Name(s) as shown on return

AKSHAI K &amp; CHANCHAL RUNCHAL

SSN or ITIN

553-39-5912

**Part I Income Adjustment Schedule****Section A - Income****A Federal Amounts**  
(taxable amounts from  
your federal tax return)**B Subtractions**  
See instructions**C Additions**  
See instructions

7	Wages, salaries, tips, etc. See instructions before making an entry in column B or C	7			
8	Taxable interest (b)	8 (a)	155.		
9	Ordinary dividends. See instructions. (b) 253.	9 (a)	253.		
10	Taxable refunds, credits, offsets of state and local income taxes	10			
11	Alimony received	11			
12	Business income or (loss)	12			
13	Capital gain or (loss). See instructions	13	(3,000.)		
14	Other gains or (losses)	14			
15	IRA distributions. See instructions. (a)	15(b)			
16	Pensions and annuities. See instructions. (a)	16(b)			
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc.	17	52,034.		
18	Farm income or (loss)	18			
19	Unemployment compensation	19			
20	Social security benefits (a) 26,303.	20(b)	21,805.	21,805.	
21	Other income.				
	a California lottery winnings e NOL from FTB 3805D, 3805Z,			a	
	b Disaster loss carryover from FTB 3805V 3806, 3807, or 3809			b	
	c Federal NOL (Form 1040, line 21) f Other (describe):			c	
	d NOL carryover from FTB 3805V			d	
				e	
				f	
22	<b>Total.</b> 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	22	71,247.	21,805.	

**Section B - Adjustments to Income**

23	Educator expenses	23			
24	Certain business expenses of reservists, performing artists, and fee-basis government officials	24			
25	Health savings account deduction	25			
26	Moving expenses	26			
27	Deductible part 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 (b) Recipient's SSN paid. Last name	31a			
32	IRA deduction	32			
33	Student loan interest deduction	33			
34	Tuition and fees	34			
35	Domestic production activities deduction	35			
36	Add line 23 through line 31a and line 32 through line 35 in columns A, B, and C. See instructions	36			
37	<b>Total.</b> Subtract line 36 from line 22 in columns A, B, and C. See instr.	37	71,247.	21,805.	

**Part II Adjustments to Federal Itemized Deductions**

<b>38</b>	Federal itemized deductions. Enter the amount from federal Schedule A (Form 1040), lines 4, 9, 15, 19, 20, 27, and 28	<b>38</b>	40,192.
<b>39</b>	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	<b>39</b>	1,322.
<b>40</b>	Subtract line 39 from line 38	<b>40</b>	38,870.
<b>41</b>	Other adjustments including California lottery losses. See instructions. Specify	<b>41</b>	
<b>42</b>	Combine line 40 and line 41	<b>42</b>	38,870.
<b>43</b>	<b>Is your federal AGI (Form 540, line 13) more than the amount shown below for your filing status?</b>		
	Single or married/RDP filing separately		\$169,730
	Head of household		\$254,599
	Married/RDP filing jointly or qualifying widow(er)		\$339,464
	<b>No.</b> Transfer the amount on line 42 to line 43.		
	<b>Yes.</b> Complete the Itemized Deductions Worksheet in the instructions for Schedule CA (540), line 43	<b>43</b>	38,870.
<b>44</b>	<b>Enter the larger of the amount on line 43 or your standard deduction listed below</b>		
	Single or married/RDP filing separately		\$3,841
	Married/RDP filing jointly, head of household, or qualifying widow(er)		\$7,682
	<b>Transfer the amount on line 44 to Form 540, line 18</b>	<b>44</b>	38,870.

**SCHEDULE E  
(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Supplemental Income and Loss**(From rental real estate, royalties, partnerships, S corporations, estates, trusts,  
REMICs, etc.) **► Attach to Form 1040, 1040NR, or Form 1041.**

OMB No. 1545-0074

**2012**Attachment  
Sequence No. **13**

Name(s) shown on return

AKSHAI K &amp; CHANCHAL RUNCHAL

Your social security no.

553-39-5912

**Part I Income or Loss From Rental Real Estate and Royalties** Note. If you are in the business of renting personal property, use **Schedule C** or **C-EZ** (see instructions). If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.**A** Did you make any payments in 2012 that would require you to file Form(s) 1099? (see instructions)

Yes No

**B** If "Yes," did you or will you file all required Forms 1099?

Yes No

**1a** Physical address of each property (street, city, state, Zip code)**A** 3106 INGLEWOOD BLVD LOS ANGELES CA 90066-**B** 4416 KATHERINE AVE SHERMAN OAKS CA 91423-**C** 3817 MINERVA LOS ANGELES CA 90066-

<b>1b</b>	Type of Property (from list below)	<b>2</b> For each rental real estate property listed above, report the number of fair rental and personal use days. Check the <b>QJV</b> box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
<b>A</b>	1	<b>A</b>	365		
<b>B</b>	1	<b>B</b>	365		
<b>C</b>	1	<b>C</b>	365		

**Type of Property:**

- 1 Single Family Residence    3 Vacation/Short-Term Rental    5 Land    7 Self-Rental  
2 Multi-Family Residence    4 Commercial    6 Royalties    8 Other (describe)

Income:		Properties:		A		B		C	
<b>3</b>	Rents received .....	<b>3</b>		61,200.		31,200.		24,854.	
<b>4</b>	Royalties received .....	<b>4</b>							
<b>Expenses:</b>									
<b>5</b>	Advertising .....	<b>5</b>							
<b>6</b>	Auto and travel (see instructions) .....	<b>6</b>							
<b>7</b>	Cleaning and maintenance .....	<b>7</b>							
<b>8</b>	Commissions .....	<b>8</b>							
<b>9</b>	Insurance .....	<b>9</b>							
<b>10</b>	Legal and other professional fees .....	<b>10</b>							
<b>11</b>	Management fees .....	<b>11</b>							
<b>12</b>	Mortgage interest paid to banks, etc. (see instructions) .....	<b>12</b>							
<b>13</b>	Other interest .....	<b>13</b>							
<b>14</b>	Repairs .....	<b>14</b>							
<b>15</b>	Supplies .....	<b>15</b>							
<b>16</b>	Taxes .....	<b>16</b>							
<b>17</b>	Utilities .....	<b>17</b>							
<b>18</b>	Depreciation expense or depletion .....	<b>18</b>		6,900.		11,479.		4,022.	
<b>19</b>	Other (list) ► .....	<b>19</b>							
<b>20</b>	Total expenses. Add lines 5 through 19 .....	<b>20</b>		21,461.		50,239.		11,888.	
<b>21</b>	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b> .....	<b>21</b>		39,739.		(19,039.)		12,966.	
<b>22</b>	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions) .....	<b>22</b>	(			19,039.)			
<b>23a</b>	Total of all amounts reported on line 3 for all rental properties .....	<b>23a</b>							
<b>b</b>	Total of all amounts reported on line 4 for all royalty properties .....	<b>23b</b>							
<b>c</b>	Total of all amounts reported on line 12 for all properties .....	<b>23c</b>							
<b>d</b>	Total of all amounts reported on line 18 for all properties .....	<b>23d</b>							
<b>e</b>	Total of all amounts reported on line 20 for all properties .....	<b>23e</b>							
<b>24</b>	<b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include any losses .....	<b>24</b>						98,387.	
<b>25</b>	<b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here ....	<b>25</b>	(			19,039.)			
<b>26</b>	<b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 .....	<b>26</b>						79,348.	

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

Schedule E (Form 1040) 2012

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

AKSHAI K &amp; CHANCHAL RUNCHAL

Your social security no.

553-39-5912

**Caution.** The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.**Part II Income or Loss From Partnerships and S Corporations****Note.** If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section.

☐ Yes ☒ No

28	(a) Name	(b) Enter P for partnership; S for S corp.	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	MD LIVE OAK PROPERTIES LLC	P		26-0429153	
B	MD LIVE OAK PROPERTIES LLC	P		26-0429153	
C					
D					

Passive Income and Loss		Nonpassive Income and Loss	
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562
A 13,470.		187.	
B 13,470.		187.	
C			
D			
29a Totals			
b Totals 26,940.		374.	
30 Add columns (g) and (i) of line 29a			30
31 Add columns (f), (h), and (i) of line 29b			31 ( 27,314. )
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below			32 (27,314. )

**Part III Income or Loss From Estates and Trusts**

33	(a) Name	(b) Employer identification number
A		
B		
Passive Income and Loss		Nonpassive Income and Loss
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1
A		
B		
34a Totals		
b Totals		
35 Add columns (d) and (f) of line 34a		35
36 Add columns (c) and (e) of line 34b		36 ( )
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below		37

**Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder**

38	(a) Name	(b) Employer identification no.	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below					39

**Part V Summary**

40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41	52,034.
42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), box 14, code F (see instructions)	42	
43 Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

## CA K-1

## Partner's and Shareholder's K-1 Worksheet

2012

Name of partnership or S corporation:

MD LIVE OAK PROPERTIES LLC

FEIN: 26-0429153

CA ID No:

\*All at risk

Yes ☒ No ☐

Amount from Federal Form 6198

Nondeductible loss due to at-risk limitation.

Lines 1 and 4

Line 2

Line 3

Line 10

Line 12

**Public Traded Partnership (PTP)**

Check if this K-1 is from a PTP

Check if this activity was sold this year

PTP carryover from last year from: Schedule E: Form 4797:

PTP carryforward to next year to: Schedule E: Form 4797:

**Passive Activity Information**

Check if line 1, ordinary income, is a passive activity to this partner or shareholder

Check if line 2, income from rental real estate, has active participation by this partner or shareholder

Check if there is an amount on line 10(9) and it pertains to active participation rental real estate:  
or a passive activity:

Check if 100% of the interest of this activity was sold in this tax year

Enter net gain or loss on sale Rental: Passive:

Overall gain or loss on sale Rental: Passive:

AMT overall gain or loss on sale Rental: Passive:

	Active Rental		Passive	
Carryover	Form 4797		Form 4797	
Carryforward	Form 4797		Form 4797	

P	S	Type	Federal amount	California adjustment	Total amount using CA law	California Source
1	1	Ordinary business income or loss	(187.)		(187.)	
2	2	Net rental real estate income or loss	(13,470.)		(13,470.)	
3	3	Other net rental income or loss				
4		Guaranteed payments to partners				
5	4	Interest income				
6	5	Dividends				
7	6	Royalties				
8	7	Net short term capital gain or loss				
9	8	Net long term capital gain or loss				
10	9	Net Section 1231 gain or loss				
11a	10a	Other portfolio income or loss				
12	11	Expense deduction for recovery property				
13a	12a	Charitable contributions				
b	b	Investment interest expense				
d	d	Deductions - portfolio income				
e	e	Other deductions				
15b	13a	Low-income housing credit				
c	b	Credits related to rental real estate activities other than above				
d	c	Credits related to other rental activities				
f	d	Other credits				
g	e	New jobs credit				
17a	15a	Depreciation adjustment on property placed in service after 1986			See Passive Activity Worksheet	
b	b	Adjusted gain or loss				
f	e	Accelerated depreciation pre-1987				

**Passive Activity Worksheet**

Split the Federal amount from your California K-1 between the categories listed here.		Ordinary nonpassive	Active rental	Passive activities
a	Depreciation adjustment post-86			
b	Adjusted gain or loss			
e	Accelerated depreciation, pre-87			
	Prior year AMT unallowed loss			
	AMT carryforward to 2013			

## CA K-1

## Partner's and Shareholder's K-1 Worksheet

2012

Name of partnership or S corporation:

MD LIVE OAK PROPERTIES LLC

FEIN: 26-0429153

CA ID No:

\*All at risk

Yes ☒ No ☐

Amount from Federal Form 6198

Nondeductible loss due to at-risk limitation.

Lines 1 and 4

Line 2

Line 3

Line 10

Line 12

## Public Traded Partnership (PTP)

Check if this K-1 is from a PTP

Check if this activity was sold this year

PTP carryover from last year from: Schedule E: Form 4797:

PTP carryforward to next year to: Schedule E: Form 4797:

## Passive Activity Information

Check if line 1, ordinary income, is a passive activity to this partner or shareholder

Check if line 2, income from rental real estate, has active participation by this partner or shareholder

Check if there is an amount on line 10(9) and it pertains to active participation rental real estate:  
or a passive activity:

Check if 100% of the interest of this activity was sold in this tax year

Enter net gain or loss on sale Rental: Passive:

Overall gain or loss on sale Rental: Passive:

AMT overall gain or loss on sale Rental: Passive:

	Active Rental		Passive			
Carryover		Form 4797		Form 4797		
Carryforward		Form 4797		Form 4797		

P	S	Type	Federal amount	California adjustment	Total amount using CA law	California Source
1	1	Ordinary business income or loss	(187.)		(187.)	
2	2	Net rental real estate income or loss	(13,470.)		(13,470.)	
3	3	Other net rental income or loss				
4		Guaranteed payments to partners				
5	4	Interest income				
6	5	Dividends				
7	6	Royalties				
8	7	Net short term capital gain or loss				
9	8	Net long term capital gain or loss				
10	9	Net Section 1231 gain or loss				
11a	10a	Other portfolio income or loss				
12	11	Expense deduction for recovery property				
13a	12a	Charitable contributions				
b	b	Investment interest expense				
d	d	Deductions - portfolio income				
e	e	Other deductions				
15b	13a	Low-income housing credit				
c	b	Credits related to rental real estate activities other than above				
d	c	Credits related to other rental activities				
f	d	Other credits				
g	e	New jobs credit				
17a	15a	Depreciation adjustment on property placed in service after 1986			See Passive Activity Worksheet	
b	b	Adjusted gain or loss				
f	e	Accelerated depreciation pre-1987				

## Passive Activity Worksheet

Split the Federal amount from your California K-1 between the categories listed here.		Ordinary nonpassive	Active rental	Passive activities
a	Depreciation adjustment post-86			
b	Adjusted gain or loss			
e	Accelerated depreciation, pre-87			
	Prior year AMT unallowed loss			
	AMT carryforward to 2013			

**SCHEDULE E  
(Form 1040)**Department of the Treasury  
Internal Revenue Service (99)**Supplemental Income and Loss**(From rental real estate, royalties, partnerships, S corporations, estates, trusts,  
REMICs, etc.) **► Attach to Form 1040, 1040NR, or Form 1041.**

OMB No. 1545-0074

**2012**Attachment  
Sequence No. **13**

Name(s) shown on return

AKSHAI K &amp; CHANCHAL RUNCHAL

Your social security no.

553-39-5912

**Part I Income or Loss From Rental Real Estate and Royalties** Note. If you are in the business of renting personal property, use **Schedule C** or **C-EZ** (see instructions). If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.**A** Did you make any payments in 2012 that would require you to file Form(s) 1099? (see instructions)

Yes No

**B** If "Yes," did you or will you file all required Forms 1099?

Yes No

**1a** Physical address of each property (street, city, state, Zip code)**A** 12029 CLOVER AVE LOS ANGELES CA 90066-**B** 2408 OCEAN PARK SANTA MONICA CA 90405-

<b>1b</b> Type of Property (from list below)		<b>2</b> For each rental real estate property listed above, report the number of fair rental and personal use days. Check the <b>QJV</b> box only if you meet the requirements to file as a qualified joint venture. See instructions.		Fair Rental Days	Personal Use Days	QJV
<b>A</b>	1	<b>A</b>		365		
<b>B</b>	2	<b>B</b>		355		
<b>C</b>		<b>C</b>				

**Type of Property:**

- 1 Single Family Residence      3 Vacation/Short-Term Rental      5 Land      7 Self-Rental  
2 Multi-Family Residence      4 Commercial      6 Royalties      8 Other (describe)

Income:	Properties:	A	B	C
<b>3</b> Rents received	<b>3</b>	35,400.	125,198.	
<b>4</b> Royalties received	<b>4</b>			
<b>Expenses:</b>				
<b>5</b> Advertising	<b>5</b>			
<b>6</b> Auto and travel (see instructions)	<b>6</b>			
<b>7</b> Cleaning and maintenance	<b>7</b>			
<b>8</b> Commissions	<b>8</b>			
<b>9</b> Insurance	<b>9</b>			
<b>10</b> Legal and other professional fees	<b>10</b>			
<b>11</b> Management fees	<b>11</b>			
<b>12</b> Mortgage interest paid to banks, etc. (see instructions)	<b>12</b>			
<b>13</b> Other interest	<b>13</b>			
<b>14</b> Repairs	<b>14</b>			
<b>15</b> Supplies	<b>15</b>			
<b>16</b> Taxes	<b>16</b>			
<b>17</b> Utilities	<b>17</b>			
<b>18</b> Depreciation expense or depletion	<b>18</b>			
<b>19</b> Other (list) ►	<b>19</b>		7,560.	
<b>20</b> Total expenses. Add lines 5 through 19	<b>20</b>	3,198.	111,718.	
<b>21</b> Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b>	<b>21</b>	32,202.	13,480.	
<b>22</b> Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	<b>22</b>	( )	( )	( )
<b>23a</b> Total of all amounts reported on line 3 for all rental properties	<b>23a</b>			
<b>b</b> Total of all amounts reported on line 4 for all royalty properties	<b>23b</b>			
<b>c</b> Total of all amounts reported on line 12 for all properties	<b>23c</b>			
<b>d</b> Total of all amounts reported on line 18 for all properties	<b>23d</b>			
<b>e</b> Total of all amounts reported on line 20 for all properties	<b>23e</b>			
<b>24</b> <b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include any losses	<b>24</b>			
<b>25</b> <b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	<b>25</b>	( )		
<b>26</b> <b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	<b>26</b>			

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

Schedule E (Form 1040) 2012

**2012 Passive Activity Loss Limitations****3801****Attach to Form 540, Long Form 540NR, Form 541, or Form 100S (S Corporations).**

Name(s) as shown on return

SSN, ITIN, FEIN, or CA. corporation no.

AKSHAI K &amp; CHANCHAL RUNCHAL

553-39-5912

**Part I 2012 Passive Activity Loss**See the instructions for Worksheet 1 and Worksheet 3 for federal Form 8582 before completing Part I. Be sure to use **California amounts**.**Rental Real Estate Activities with Active Participation**

<b>1a</b> Activities with net income from Worksheet 1, column (a) .....	<b>1a</b>	98,387	00	
<b>1b</b> Activities with net loss from Worksheet 1, column (b) .....	<b>1b</b>	19,039	00	
<b>1c</b> Prior year unallowed losses from Worksheet 1, column (c) .....	<b>1c</b>		00	
<b>1d</b> Combine line 1a, line 1b, and line 1c .....	<b>1d</b>		79,348	00

**All Other Passive Activities**

<b>2a</b> Activities with net income from Worksheet 2, column (a) .....	<b>2a</b>		00	
<b>2b</b> Activities with net loss from Worksheet 2, column (b) .....	<b>2b</b>	26,940	00	
<b>2c</b> Prior year unallowed losses from Worksheet 2, column (c) .....	<b>2c</b>		00	
<b>2d</b> Combine line 2a, line 2b, and line 2c .....	<b>2d</b>		-26,940	00
<b>3</b> 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 .....	<b>3</b>		52,408	00

**Part II Special Allowance for Rental Real Estate with Active Participation**

Enter all numbers in Part II as positive amounts. See instructions.

<b>4</b> Enter the <b>smaller</b> of losses from line 1d or line 3 .....	<b>4</b>		00
<b>5</b> Enter \$150,000. If married/RDP filing a separate return, see instructions .....	<b>5</b>		00
<b>6</b> 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 .....	<b>6</b>		00
<b>7</b> Subtract line 6 from line 5 .....	<b>7</b>		00
<b>8</b> Multiply line 7 by 50% (.50). <b>Do not</b> enter more than \$25,000 .....	<b>8</b>		00
<b>9</b> Enter the <b>smaller</b> of line 4 or line 8 .....	<b>9</b>		00

**Part III Total Losses Allowed**

<b>10</b> Add the income, if any, from line 1a and line 2a and enter the total .....	<b>10</b>	98,387	00
<b>11</b> <b>Total losses allowed from all passive activities for 2012.</b> Add line 9 and line 10 .....	<b>11</b>	45,979	00

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





## US Schedule A

## Sales Tax Worksheet

2012

Name: AKSHAI K &amp; CHANCHAL RUNCHAL

SSN: 553-39-5912

1	Federal AGI .....	71,247.	
2	Nontaxable income listed on tax return		
a	Nontaxable interest .....		
b	Social security .....	4,498.	
c	Combat pay .....		
d	Income on Forms 4970 and 4972 .....		
e	Nontaxable part of IRA, pension, or annuity distributions, not including rollovers .....	4,498.	
3	Other nontaxable income		
a	.....		
b	.....		
c	.....		
d	.....		
e	.....		
4	Income for sales tax chart .....	75,745.	
1	Enter the taxpayer's state of residency for 2012 .....	CA	
	If the taxpayer was a part-year resident, enter the dates resided in this state _____ to _____		
	State sales tax from the applicable table .....	955.	
2	Did you live Alaska, Arizona, Arkansas, California (Los Angeles County only), Colorado, Georgia, Illinois, Louisiana, Missouri, New York State, North Carolina, South Carolina, Tennessee, Utah or Virginia in 2012?		
<input checked="" type="checkbox"/> No.	Line 2 should be -0-.		
<input type="checkbox"/> Yes.	Enter the letter (A - D) for the optional local sales tax table you want to use .....		
	Local sales tax from the applicable table .....		
3	Did your locality impose a local general sales tax in 2012? Residents of California and Nevada, see the Schedule A instructions.		
<input type="checkbox"/> No.	Go to line 7.		
<input checked="" type="checkbox"/> Yes.	Enter the local general sales tax rate. If the rate is 2.5%, enter 2.5 .....	2.5000	
4	Did you enter -0- on line 2 above?		
<input type="checkbox"/> No.	Skip to line 6.		
<input checked="" type="checkbox"/> Yes.	Enter the state general sales tax rate from the table headed by the state in the Schedule A instructions. Enter 6.5% as 6.5 .....	6.5000	
5	Divide line 3 by line 4 .....	0.3846	
6	Did you enter -0- on line 2 above?		
<input type="checkbox"/> No.	Multiply line 2 by line 3.		
<input checked="" type="checkbox"/> Yes.	Multiply line 1 by line 5 .....	367.	
7	Total of lines 1 and 6 - prorated for part-year residents .....	1,322.	
8	General sales tax paid on specified items. Motor vehicles - If the tax rate is higher than the general sales tax rate, only include the amount of tax at the general sales tax rate. Aircraft, boats, homes, including mobile and prefabricated, or home building materials - Only deductible if the sales tax charged is at the federal sales tax rate .....		
9	Total sales tax using the sales tax chart .....	1,322.	
10	Sales tax using actual receipts .....		
11	Sales tax deduction for Schedule A, line 5 .....	1,322.	

**US Schedule D****Capital Gain or Loss Transactions Worksheet****2012**

\* Check if 28% rate gain or (loss)

(a) Description of property	1 0 9 9	T S J	*	(b) Date acquired	(c) Date sold	(d) Sales price	(e) Cost or other basis	(f) Code	(g) Adjustments to Gain or Loss	(h) Gain or loss	S / L
US GLOBAL US GLOBAL	B B			12/09/2011 VA/RI/OUS	12/05/2012 12/05/2012	71. 2,055. 2,126.	116. 3,351. 3,467.			(45.) (1,296.) (1,341.)	S L