Form **1040** Department of the Treasury—Internal Revenue Service **U.S. Individual Income Tax Return** **2022** OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box. ☐ Single ☒ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying surviving spouse (QSS)

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Your first name and middle initial	Last name	Your social security number
Randeep S	Dhillon	
If joint return, spouse's first name and middle initial	**Last name**	**Spouse's social security number**
Kamalpreet K	Sidhu	

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.

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. ☐ You ☐ Spouse

Foreign country name | Foreign province/state/county | Foreign postal code

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent

☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** ☐ Were born before January 2, 1958 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1958 ☐ Is blind

Dependents (see instructions):

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Child tax credit	(4) Credit for other dependents
			Daughter	☐	☒
			Daughter	☐	☒
				☐	☐
				☐	☐

If more than four dependents, see instruction and check here. . . ☐

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a Form W-2, see instructions.

1a	Total amount from Form(s) W-2, box 1 (see instructions)	1a	200,035
b	Household employee wages not reported on Form(s) W-2	1b	
c	Tip income not reported on line 1a (see instructions)	1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d	
e	Taxable dependent care benefits from Form 2441, line 26	1e	
f	Employer-provided adoption benefits from Form 8839, line 29	1f	
g	Wages from Form 8919, line 6	1g	
h	Other earned income (see instructions)	1h	0
i	Nontaxable combat pay election (see instructions) 1i		
z	Add lines 1a through 1h	1z	200,035

Attach Sch. B if required.

2a	Tax-exempt interest 2a 0		b Taxable interest	2b	0
3a	Qualified dividends 3a 0		b Ordinary dividends	3b	0
4a	IRA distributions 4a		b Taxable amount	4b	0
5a	Pensions and annuities 5a		b Taxable amount	5b	0
6a	Social security benefits 6a		b Taxable amount	6b	
c	If you elect to use the lump-sum election method, check here (see instructions) ☐				
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐			7	0
8	Other income from Schedule 1, line 10			8	642
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income**			9	200,677
10	Adjustments to income from Schedule 1, line 26			10	46
11	Subtract line 10 from line 9. This is your **adjusted gross income**			11	200,631
12	**Standard deduction or itemized deductions** (from Schedule A)			12	55,710
13	Qualified business income deduction from Form 8995 or Form 8995-A			13	0
14	Add lines 12 and 13			14	55,710
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your **taxable income**			15	144,921

Standard Deduction for-

- Single or Married filing separately, $12,950
- Married filing jointly or Qualifying surviving spouse, $25,900
- Head of household, $19,400
- If you checked any box under *Standard Deduction*, see instructions.

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐	16	23,117
	17	Amount from Schedule 2, line 3	17	0
	18	Add lines 16 and 17	18	23,117
	19	Child tax credit or credit for other dependents from Schedule 8812	19	1,000
	20	Amount from Schedule 3, line 8	20	0
	21	Add lines 19 and 20	21	1,000
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	22,117
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	91
	24	Add lines 22 and 23. This is your **total tax**	24	22,208
Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2 — 25a: 25,026		
	b	Form(s) 1099 — 25b: 0		
	c	Other forms (see instructions) — 25c: 0		
	d	Add lines 25a through 25c	25d	25,026
If you have a qualifying child, attach Sch. EIC.	26	2022 estimated tax payments and amount applied from 2021 return	26	0
	27	Earned income credit (EIC) — 27:		
	28	Additional child tax credit from Schedule 8812 — 28:		
	29	American opportunity credit from Form 8863, line 8 — 29:		
	30	Reserved for future use — 30:		
	31	Amount from Schedule 3, line 15 — 31: 2,925		
	32	Add lines 27, 28, 29, and 31. These are your **total other payments and refundable credits**	32	2,925
	33	Add lines 25d, 26, and 32. These are your **total payments**	33	27,951
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid**	34	5,743
	35a	Amount of line 34 you want **refunded to you.** If Form 8888 is attached, check here ☐	35a	5,743
Direct deposit? See instructions.	b	Routing number XXXXXXXXX c Type: ☒ Checking ☐ Savings		
	d	Account number XXXXXXXXXXXXXXXXX		
	36	Amount of line 34 you want **applied to your 2023 estimated tax** — 36: 0		
Amount You Owe	37	Subtract line 33 from line 24. This is the **amount you owe.** For details on how t .irs.gov/Payments or see instructions	37	
	38	Estimated tax penal — 38:		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ☐ **Yes.** Complete below. ☒ **No**

Designee's name | Phone no. | Personal identification number (PIN)

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my 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	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
	2/17/23	Self Employee Bsns	
Spouse's signature. If a joint return, both must sign.	**Date**	**Spouse's occupation**	**If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)**
	2-17-23	Director Human Resrcs	

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

Phone no. | Email address

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed

Firm's name | Phone no.

Firm's address | Firm's EIN

SCHEDULE 1
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to *www.irs.gov/Form1040* for instructions and the latest information.

OMB No. 1545-0074

2022

Attachment Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR: Randeep S Dhillon

Your social security number

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes			0
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	642
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		5	
6	Farm income or (loss). Attach Schedule F		6	0
7	Unemployment compensation		7	
8	Other income:			
a	Net operating loss	8a (0)		
b	Gambling	8b 0		
c	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (0)		
e	Income from Form 8853	8e 0		
f	Income from Form 8889	8f 0		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i 0		
j	Activity not engaged in for profit income	8j 0		
k	Stock options	8k		
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l 0		
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m 0		
n	Section 951(a) inclusion (see instructions)	8n		
o	Section 951A(a) inclusion (see instructions)	8o		
p	Section 461(l) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q 0		
r	Scholarship and fellowship grants not reported on Form W-2	8r 0		
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s 0		
t	Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan	8t 0		
u	Wages earned while incarcerated	8u 0		
z	Other income. List type and amount:	8z 0		
9	Total other income. Add lines 8a through 8z		9	0
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8		10	642

Part II Adjustments to Income

11	Educator expenses		11	0
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106		12	0
13	Health savings account deduction. Attach Form 8889		13	0
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	0
15	Deductible part of self-employment tax. Attach Schedule SE		15	46
16	Self-employed SEP, SIMPLE, and qualified plans		16	0
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	0
19a	Alimony paid		19a	
b	Recipient's SSN			
c	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	0
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	0
24	Other adjustments:			
a	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c	0	
d	Reforestation amortization and expenses	24d		
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f	0	
g	Contributions by certain chaplains to section 403(b) plans	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24j	0	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k	0	
z	Other adjustments. List type and amount:	24z	0	
25	Total other adjustments. Add lines 24a through 24z		25	0
26	Add lines 11 through 23 and 25. These are your **adjustments to income.** Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	46

Part II Other Payments and Refundable Credits

9	Net premium tax credit. Attach Form 8962			9	
10	Amount paid with request for extension to file (see instructions)			10	
11	Excess social security and tier 1 RRTA tax withheld			11	2,925
12	Credit for federal tax on fuels. Attach Form 4136			12	
13	Other payments or refundable credits:				
a	Form 2439	13a	0		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b	0		
c	Reserved for future use	13c			
d	Credit for repayment of amounts included in income from earlier years	13d			
e	Reserved for future use	13e			
f	Deferred amount of net 965 tax liability (see instructions)	13f			
g	Reserved for future use	13g			
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 2021	13h			
z	Other payments or refundable credits. List type and amount: _____	13z			
14	Total other payments or refundable credits. Add lines 13a through 13z			14	0
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31			15	2,925

SCHEDULE A (Form 1040)

Department of the Treasury
Internal Revenue Service

Itemized Deductions

Go to *www.irs.gov/ScheduleA* for instructions and the latest information.
Attach to Form 1040 or 1040-SR.
Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

2022

Attachment Sequence No. **07**

Name(s) shown on Form 1040 or 1040-SR: Randeep S Dhillon

Your social security number:

Medical and Dental Expenses		**Caution:** Do not include expenses reimbursed or paid by others.			
	1	Medical and dental expenses (see instructions)	1	0	
	2	Enter amount from Form 1040 or 1040-SR, line 11 (2 | 200,631)			
	3	Multiply line 2 by 7.5% (0.075)	3	15,047	
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4 0
Taxes You Paid	5	State and local taxes.			
	a	State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box ☐	5a	14,171	
	b	State and local real estate taxes (see instructions)	5b	7,451	
	c	State and local personal property taxes	5c	0	
	d	Add lines 5a through 5c	5d	21,622	
	e	Enter the smaller of line 5d or $10,000 ($5,000 if married filing separately)	5e	10,000	
	6	Other taxes. List type and amount:	6	0	
	7	Add lines 5e and 6			7 10,000
Interest You Paid Caution: Your mortgage interest deduction may be limited. See instructions.	8	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box ☐			
	a	Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a	36,541	
	b	Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	8b	0	
	c	Points not reported to you on Form 1098. See instructions for special rules	8c	0	
	d	Reserved for future use	8d		
	e	Add lines 8a through 8c	8e	36,541	
	9	Investment interest. Attach Form 4952 if required. See instructions.	9	0	
	10	Add lines 8e and 9			10 36,541
Gifts to Charity Caution: If you made a gift and got a benefit for it, see instructions.	11	Gifts by cash or check. If you made any gift of $250 or more, see instructions	11	6,718	
	12	Other than by cash or check. If you made any gift of $250 or more, see instructions. You **must** attach Form 8283 if over $500	12	2,451	
	13	Carryover from prior year	13	0	
	14	Add lines 11 through 13			14 9,169
Casualty and Theft Losses	15	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions			15 0
Other Itemized Deductions	16	Other – from list in instructions. List type and amount:			16 0
Total Itemized Deductions	17	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12			17 55,710
	18	If you elect to itemize deductions even though they are less than your standard deduction, check this box ☐			

SCHEDULE C (Form 1040)

Department of the Treasury
Internal Revenue Service

Profit or Loss From Business

(Sole Proprietorship)

Go to *www.irs.gov/ScheduleC* for instructions and the latest information.

Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.

OMB No. 1545-0074

2022

Attachment Sequence No. **09**

Name of proprietor: Randeep S Dhillon		Social security number (SSN)
A	Principal business or profession, including product or service (see instructions): Consulting	B Enter code from instructions: 115110
C	Business name. If no separate business name, leave blank.: Gogafarm Consulting	D Employer ID number (EIN) (see instr.)
E	Business address (including suite or room no.)	
	City, town or post office, state, and ZIP code: CA	
F	Accounting method: (1) [X] Cash (2) [ ] Accrual (3) [ ] Other (specify)	
G	Did you "materially participate" in the operation of this business during 2022? If "No," see instructions for limit on losses	[X] Yes [ ] No
H	If you started or acquired this business during 2022, check here	[ ]
I	Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions	[ ] Yes [X] No
J	If "Yes," did you or will you file required Form(s) 1099?	[ ] Yes [ ] No

Part I Income

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked [ ]	1	31,254
2	Returns and allowances	2	1,455
3	Subtract line 2 from line 1	3	29,799
4	Cost of goods sold (from line 42)	4	0
5	**Gross profit.** Subtract line 4 from line 3	5	29,799
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	0
7	**Gross income.** Add lines 5 and 6	7	29,799

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

8	Advertising	8	547	18	Office expense (see instructions)	18	1,544
9	Car and truck expenses (see instructions)	9	0	19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11	1,255	a	Vehicles, machinery, and equipment	20a	1,866
12	Depletion	12		b	Other business property	20b	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	0	21	Repairs and maintenance	21	6,520
				22	Supplies (not included in Part III)	22	2,510
				23	Taxes and licenses	23	
14	Employee benefit programs (other than on line 19)	14		24	Travel and meals:		
				a	Travel	24a	0
15	Insurance (other than health)	15	2,450	b	Deductible meals (see instructions)	24b	1,250
16	Interest (see instructions):			25	Utilities	25	3,655
a	Mortgage (paid to banks, etc.)	16a		26	Wages (less employment credits)	26	
b	Other	16b		27a	Other expenses (from line 48)	27a	0
17	Legal and professional services	17	7,560	b	**Reserved for future use**	27b	

28	**Total expenses** before expenses for business use of home. Add lines 8 through 27a	28	29,157
29	Tentative profit or (loss). Subtract line 28 from line 7	29	642
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. **Simplified method filers only:** Enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30	0
31	**Net profit or (loss).** Subtract line 30 from line 29. • If a profit, enter on both **Schedule 1 (Form 1040), line 3,** and on **Schedule SE, line 2.** (If you checked the box on line 1, see instructions.) Estates and trusts, enter on **Form 1041, line 3.** • If a loss, you **must** go to line 32.	31	642
32	If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both **Schedule 1 (Form 1040), line 3,** and on **Schedule SE, line 2.** (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on **Form 1041, line 3.** • If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.	32a [X] All investment is at risk. 32b [ ] Some investment is not at risk.	

SCHEDULE SE (Form 1040)

Department of the Treasury
Internal Revenue Service

Self-Employment Tax

Go to *www.irs.gov/ScheduleSE* for instructions and the latest information.
Attach to Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074

2022

Attachment Sequence No. **17**

Name of person with self-employment income (as shown on Form 1040, 1040-SR, or 1040-NR)

Randeep S Dhillon

Social security number of person with **self-employment** income

Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is **church employee income,** see instructions for how to report your income and the definition of church employee income.

A If you are a minister, member of a religious order, or Christian Science practitioner **and** you filed Form 4361, but you had $400 or more of **other** net earnings from self-employment, check here and continue with Part I . . . . . ☐

Skip lines 1a and 1b if you use the farm optional method in Part II. See instructions.

1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A		**1a** 0
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AH		**1b** (0)

Skip line 2 if you use the nonfarm optional method in Part II. See instructions.

2	Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order		**2** 642
3	Combine lines 1a, 1b, and 2		**3** 642
4a	If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3		**4a** 593
	Note: If line 4a is less than $400 due to Conservation Reserve Program payments on line 1b, see instructions.		
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here		**4b** 0
c	Combine lines 4a and 4b. If less than $400, **stop;** you don't owe self-employment tax. **Exception:** If less than $400 and you had **church employee income,** enter -0- and continue		**4c** 593
5a	Enter your **church employee income** from Form W-2. See instructions for definition of church employee income	**5a** 0	
b	Multiply line 5a by 92.35% (0.9235). If less than $100, enter -0-		**5b** 0
6	Add lines 4c and 5b		**6** 593
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2022		**7** 147,000
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If $147,000 or more, skip lines 8b through 10, and go to line 11	**8a** 0	
b	Unreported tips subject to social security tax from Form 4137, line 10	**8b** 0	
c	Wages subject to social security tax from Form 8919, line 10	**8c**	
d	Add lines 8a, 8b, and 8c		**8d** 0
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11		**9** 147,000
10	Multiply the **smaller** of line 6 or line 9 by 12.4% (0.124)		**10** 74
11	Multiply line 6 by 2.9% (0.029)		**11** 17
12	**Self-employment tax.** Add lines 10 and 11. Enter here and on **Schedule 2 (Form 1040), line 4**		**12** 91
13	**Deduction for one-half of self-employment tax.** Multiply line 12 by 50% (0.50). Enter here and on **Schedule 1 (Form 1040), line 15**	**13** 46	

Part II Optional Methods To Figure Net Earnings (see instructions)

Farm Optional Method. You may use this method **only** if **(a)** your gross farm income[1] wasn't more than $9,060, **or (b)** your net farm profits[2] were less than $6,540.

14	Maximum income for optional methods		**14** 6,040
15	Enter the **smaller** of: two-thirds (2/3) of gross farm income[1] (not less than zero) **or** $6,040. Also, include this amount on line 4b above		**15** 0

Nonfarm Optional Method. You may use this method **only** if **(a)** your net nonfarm profits[3] were less than $6,540 and also less than 72.189% of your gross nonfarm income[4], **and (b)** you had net earnings from self-employment of at least $400 in 2 of the prior 3 years. **Caution:** You may use this method no more than five times.

16	Subtract line 15 from line 14		**16** 6,040
17	Enter the **smaller** of: two-thirds (2/3) of gross nonfarm income[4] (not less than zero) **or** the amount on line 16. Also, include this amount on line 4b above		**17** 0

[1] From Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.

[2] From Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A— minus the amount you would have entered on line 1b had you not used the optional method.

[3] From Sch. C, line 31; and Sch. K-1 (Form 1065), box 14, code A.

[4] From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.

SCHEDULE 8812
(Form 1040)

Department of the Treasury
Internal Revenue Service

Credits for Qualifying Children and Other Dependents

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to *www.irs.gov/Schedule8812* for instructions and the latest information.

OMB No. 1545-0074

2022

Attachment Sequence No. **47**

Name(s) shown on return: Randeep S Dhillon

Your social security number

Part I Child Tax Credit and Credit for Other Dependents

1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR			1	200,631
2a	Enter income from Puerto Rico that you excluded	2a	0		
b	Enter the amounts from lines 45 and 50 of your Form 2555	2b	0		
c	Enter the amount from line 15 of your Form 4563	2c	0		
d	Add lines 2a through 2c			2d	0
3	Add lines 1 and 2d			3	200,631
4	Number of qualifying children under age 17 with the required social security number	4	0		
5	Multiply line 4 by $2,000			5	0
6	Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number	6	2		
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4.				
7	Multiply line 6 by $500			7	1,000
8	Add lines 5 and 7			8	1,000
9	Enter the amount shown below for your filing status. • Married filing jointly—$400,000 • All other filing statuses—$200,000			9	400,000
10	Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of $1,000, enter the next multiple of $1,000. For example, if the result is $425, enter $1,000; if the result is $1,025, enter $2,000, etc.			10	0
11	Multiply line 10 by 5% (0.05)			11	0
12	Is the amount on line 8 more than the amount on line 11?			12	1,000
	☐ **No. STOP.** You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.				
	☒ **Yes.** Subtract line 11 from line 8. Enter the result.				
13	Enter the amount from the **Credit Limit Worksheet A**			13	23,117
14	Enter the smaller of line 12 or 13. **This is your child tax credit and credit for other dependents. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.**			14	1,000

If the amount on line 12 is more than the amount on line 14, you may be able to take the **additional child tax credit** on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

Form **8283** (Rev. November 2022)
Department of the Treasury
Internal Revenue Service

Noncash Charitable Contributions

Attach one or more Forms 8283 to your tax return if you claimed a total deduction of over $500 for all contributed property.

Go to *www.irs.gov/Form8283* for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. **155**

Name(s) shown on your income tax return: Randeep S Dhillon

Identifying number

Note: Figure the amount of your contribution deduction before completing this form. See your tax return instructions.

Section A. Donated Property of $5,000 or Less and Publicly Traded Securities—List in this section **only** an item (or a group of similar items) for which you claimed a deduction of $5,000 or less. Also list publicly traded securities and certain other property even if the deduction is more than $5,000. See instructions.

Part I Information on Donated Property—If you need more space, attach a statement.

1	(a) Name and address of the donee organization	(b) If donated property is a vehicle (see instructions), check the box. Also enter the vehicle identification number (unless Form 1098-C is attached).	(c) Description and condition of donated property (For a vehicle, enter the year, make, model, and mileage. For securities and other property, see instructions.)
A	Goodwill Industries 15810 Indianola Dr. Rockville MD 20855	☐	Clothing
B		☐	
C		☐	
D		☐	
E		☐	

Note: If the amount you claimed as a deduction for an item is $500 or less, you do not have to complete columns (e), (f), and (g).

	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)	(f) How acquired by donor	(g) Donor's cost or adjusted basis	(h) Fair market value (see instructions)	(i) Method used to determine the fair market value
A	09/17/22	02/11/20	Purchase	5,677	2,451	Thrift shop value
B						
C						
D						
E						

Section B. Donated Property Over $5,000 (Except Publicly Traded Securities, Vehicles, Intellectual Property or Inventory Reportable in Section A)—Complete this section for one item (or a group of similar items) for which you claimed a deduction of more than $5,000 per item or group (except contributions reportable in Section A). Provide a separate form for each item donated unless it is part of a group of similar items. A qualified appraisal is generally required for items reportable in Section B. See instructions.

Part II Information on Donated Property

2 Check the box that describes the type of property donated.

- a ☐ Art* (contribution of $20,000 or more)
- b ☐ Qualified Conservation Contribution
- c ☐ Equipment
- d ☐ Art* (contribution of less than $20,000)
- e ☐ Other Real Estate
- f ☐ Securities
- g ☐ Collectibles**
- h ☐ Intellectual Property
- i ☐ Vehicles
- j ☐ Clothing and household items
- k ☐ Other

*Art includes paintings, sculptures, watercolors, prints, drawings, ceramics, antiques, decorative arts, textiles, carpets, silver, rare manuscripts, historical memorabilia, and other similar objects.

**Collectibles include coins, stamps, books, gems, jewelry, sports memorabilia, dolls, etc., but not art as defined above.

Note: In certain cases, you must attach a qualified appraisal of the property. See instructions.

3	(a) Description of donated property (if you need more space, attach a separate statement)	(b) If any tangible personal property or real property was donated, give a brief summary of the overall physical condition of the property at the time of the gift.	(c) Appraised fair market value
A			
B			
C			

	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) For bargain sales, enter amount received	(h) Amount claimed as a deduction (see instructions)	(i) Date of contribution (see instructions)
A						
B						
C						