# E 1040 Department of the Treasury—Internal Revenue Service (99) U.S. Individual Income Tax Return

2020

OMB No. 1545-007

IRS Use Only—Do not write or staple in this space

Filing Status Check only one box.	If yo	Single Married filing jointly [ ou checked the MFS box, enter the loson is a child but not your depender	name of	ed filing separately your spouse. If you								
Your first name	and m	iddle initial	Last na	me					You	ır soc	ial securi	ty number
SHA FAH	AD		SYEL	YED						273-23-0248		
If joint return, s	pouse's	s first name and middle initial	Last na	.ast name						Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box, se	e instructi	ons.				Apt. no.	Pre	siden	tial Election	on Campaign
6127 EV	ERGR	EEN RD						2	Che	eck h	ere if you,	or your
City, town, or p	ost offi	ce. If you have a foreign address, also c	omplete s	e spaces below. State ZI				code				ntly, want \$3
DEARBORI	N HE	IGHTS			M	I	48	3127			tnis tuna. w will not	Checking a change
Foreign country name				Foreign province/state	coun	ty	Fore	eign postal cod	_		or refund.	0
											You	_ Spouse
At any time du	ring 20	020, did you receive, sell, send, exc	change, c	or otherwise acquire	e any	financial intere	st in	any virtual o	curren	су?	Yes	⊠ No
Standard Deduction	_	<b>leone can claim:</b> You as a despouse itemizes on a separate retu	•			a dependent						
Age/Blindnes:	You:	: Were born before January 2,	1956	Are blind Sp	ouse	: Was bor	n be	efore January	y 2, 19	56	☐ Is bl	lind
Dependent:		<del>-</del>		(2) Social securi	tv	(3) Relationship					(see instru	ictions):
If more		irst name Last name		number	-)	to you	۲	Child tax		- 1	•	her dependents
than four												
dependents,												
see instruction and check	s —											
here ▶ 🗌									]			
	, 1	Wages, salaries, tips, etc. Attach	Form(s) \	W-2						1		79,128.
Attach	<b>2</b> a	Tax-exempt interest	2a		b T	axable interest			. [	2b		
Sch. B if required.	3a	Qualified dividends	3a		<b>b</b> 0	Ordinary divider	nds		. [	3b		
required.	4a	IRA distributions	4a		<b>b</b> T	axable amount	i .			4b		
	5a	Pensions and annuities	5a		<b>b</b> T	axable amount				5b		
Standard	6a	Social security benefits	6a		<b>b</b> T	axable amount				6b		
Deduction for —	7	Capital gain or (loss). Attach Sche	edule D it	frequired. If not red	quired	, check here		•		7		-3 <b>,</b> 000.
Single or Married filing	8	Other income from Schedule 1, lin	ne 9 .							8		-5 <b>,</b> 970.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your <b>total in</b>	come				•	9		70,158.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22				10a	a					
widow(er), \$24,800	b	Charitable contributions if you take	e the star	ndard deduction. Se	e inst	ructions 10k	)					
Head of	С	Add lines 10a and 10b. These are	your <b>to</b> t	tal adjustments to	inco	me			<b>•</b>	10c		
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted gross inc	ome				▶ [	11		70,158.
If you checked	12	Standard deduction or itemized	l deduct	ions (from Schedul	e A)				. [	12		12,400.
any box under Standard	13	Qualified business income deduc	tion. Atta	ach Form 8995 or F	orm 8	8995-A			. [	13		
Deduction, see instructions.	14	Add lines 12 and 13							. [	14		12,400.
	15	Taxable income. Subtract line 14	from lin	e 11. If zero or less	. ente	er-0			. [	15		57,758.

Form 1040 (2020	0)									Page <b>2</b>
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			16	8,501.
	17	Amount from Schedule 2, lin	e3						17	
	18	Add lines 16 and 17							18	8,501.
	19	Child tax credit or credit for	other dependen	ts					19	
	20	Amount from Schedule 3, lin	e7						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	8,501.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .				23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					. ▶	24	8,501.
	25	Federal income tax withheld	from:							
	а	Form(s) W-2				25a	12,	527.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c							25d	12,527.
If you have a	26	2020 estimated tax payment	s and amount a	pplied from 20	119 return				26	
qualifying child,	27	Earned income credit (EIC)			No	27				
attach Sch. EIC.  If you have	28	Additional child tax credit. A				28				
nontaxable	29	American opportunity credit	from Form 8863	8, line 8		29				
combat pay, see instructions.	30	Recovery rebate credit. See				30	1,	800.		
	31	Amount from Schedule 3, lin				31	·			
	32	Add lines 27 through 31. The	ese are your <b>tot</b> a	al other paym	ents and refunda	able cred	its	. ▶	32	1,800.
	33	Add lines 25d, 26, and 32. T							33	14,327.
Refund	34	If line 33 is more than line 24							34	5,826.
neiulia	35a	Amount of line 34 you want	refunded to you	<b>J.</b> If Form 8888	3 is attached, che	ck here			35a	5,826.
Direct deposit?	▶b	Routing number 0 7 1 0 0 0 0 1 3 ▶ c Type: ★ Checking Savings								
See instructions.	▶d	Account number 6 2 9					_	Ū		
	36	Amount of line 34 you want		2021 estimate	ed tax ►	36				
Amount	37	Subtract line 33 from line 24	This is the amo	ount vou owe	now			. •	37	
You Owe		Note: Schedule H and Sch		-						
For details on		2020. See Schedule 3, line 1				01 1110 147	ico you o	WC 101		
how to pay, see instructions.	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See				
Designee		structions	•				Yes. Cor	nplete b	elow.	<b>X</b> No
		signee's		Phone				al identifi		
		me ►		no.				r (PIN)		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com								
Here		ur signature	protor Boolaration	Date	Your occupation	aooa o a				t you an Identity
	, 10	ur signature		Date	Tour occupation					N, enter it here
Joint return?					SOFTWARE 1	ENGINE	ER	(see ir	nst.) ▶ [	
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	tion				t your spouse an
Keep a copy for your records.								I	ty Prote nst.) ▶ [	ction PIN, enter it here
,				- "				(300 11	151.)	
		one no. eparer's name	Droporor's signat	Email address		Doto		PTIN		Chook if:
Paid		'	Preparer's signat		מיידייי מחודה	Date			702	Check if:
Preparer		1 PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	02/25	/ Z U Z I   E	02082		Self-employed
Use Only		m's name ► GLOBAL TA		O'						678) 965-9522
,	Fir	m's address ▶ 2530 Pebb.	ie Creek li	ın Ciimmin	or (¬A .30041			I Firm's	s FIN ▶	30-1017196

#### SCHEDULE 1 (Form 1040)

**Additional Income and Adjustments to Income** 

OMB No. 1545-0074

2020
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
SHA FAHAD SYED

Your social security number
273-23-0248

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-5 <b>,</b> 970.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ▶		
		8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	-5 <b>,</b> 970.
Par	line 8	<b>J</b>	<u>-3,970.</u>
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government	10	
	officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your <b>adjustments to income.</b> Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

#### **SCHEDULE D** (Form 1040)

Department of the Treasury

# **Capital Gains and Losses**

► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/ScheduleD for instructions and the latest information. ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

Attachment Sequence No. 12

Internal Revenue Service (99) Name(s) shown on return Your social security number 273-23-0248 SHA FAHAD SYED Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Vee," attach Form 2040 and see its instructions for additional requirements for reporting

	- Com Capital Game and 200000	enerally Assets I	TIGIU ONE TEAT	DI <b>LC33</b> (SE		
lines below.	how to figure the amounts to enter on the asier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
				line 2, colum	ii (g)	with column (g)
1099-B for wh which you ha However, if yo	hort-term transactions reported on Form ich basis was reported to the IRS and for ave no adjustments (see instructions). u choose to report all these transactions leave this line blank and go to line 1b.					
1b Totals for all tra Box A checked	ansactions reported on Form(s) 8949 with	5,070.	5,399.			-329
2 Totals for all tra Box B checked	ansactions reported on Form(s) 8949 with					
Box C checked		3.	21.			-18
4 Short-term gai	n from Form 6252 and short-term gain or (	loss) from Forms 4	684, 6781, and 88	324	4	
	m gain or (loss) from partnerships, -1	S corporations,	estates, and tr	rusts from	5	
	oital loss carryover. Enter the amount, if all the instructions	ny, from line 8 of y	our <b>Capital Loss</b>	Carryover	6	(
	n capital gain or (loss). Combine lines 1: tins or losses, go to Part II below. Otherwis				7	-347
Part II Long-	Term Capital Gains and Losses—Ge	nerally Assets H	leld More Than	One Year	(see	instructions)
lines below.	how to figure the amounts to enter on the asier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I line 2, colum	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1099-B for wh which you ha However, if yo	ong-term transactions reported on Form ich basis was reported to the IRS and for ave no adjustments (see instructions). u choose to report all these transactions leave this line blank and go to line 8b.					
	ansactions reported on Form(s) 8949 with					-5,449
Box D checked		3,626.	9,075.			
Box D checked	d	3,626.	9,075.			3/117
9 Totals for all tra Box E checked	ansactions reported on Form(s) 8949 with d	3,626.	9,075.			3,113.
9 Totals for all tr. Box E checked 10 Totals for all tr. Box F checked 11 Gain from Ford	ansactions reported on Form(s) 8949 with d	s 2439 and 6252;	and long-term ga		11	3,113
<ul> <li>Box D checker</li> <li>Totals for all transport</li> <li>Totals for all transport</li> <li>Totals for all transport</li> <li>Box F checker</li> <li>Gain from Form from Forms 46</li> <li>Net long-term</li> </ul>	d	s 2439 and 6252; tions, estates, and	and long-term ga		11 12	3,113

BAA

Schedule D (Form 1040) 2020 Page **2** 

# Part III Summary

16	Combine lines 7 and 15 and enter the result	16		-5,796.
	• If line 16 is a <b>gain,</b> enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.			
	• 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.			
	• If line 16 is <b>zero</b> , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.			
17	Are lines 15 and 16 <b>both</b> gains?   Yes. Go to line 18.			
	No. Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	Are lines 18 and 19 both zero or blank and are you not filing Form 4952?  Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below.			
	■ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of:			
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21	(	3,000.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Forms 1040 and 1040-SR, line 16.			
	➤ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

# **Sales and Other Dispositions of Capital Assets**

► Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment Sequence N

2020 Attachment Sequence No. 12A

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Social security number or taxpayer identification number

Name(s) shown on return SHA FAHAD SYED

273-23-0248

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

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 (B) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	•		•	e)
(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	<b>(d)</b> Proceeds	(e) Adjustment, If you enter a enter a enter a		f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	(Mo., day, yr.)	(sales price) (see instructions)	in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD SECURIETIES LLC	01/01/20	12/31/20	5,070.	5,399.			-329.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	5,070.	5,399.			-329.

Form 8949 (2020) Attachment Sequence No. 12A

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

SHA FAHAD SYED

Social security number or taxpayer identification number
273-23-0248

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

#### Part II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, 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.

<ul><li>✗ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on	Form(s) 1099	-B showing bas				)	
1 (a)	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below	See the separate instructions.		(h) Gain or (loss). Subtract column (e)	
Description of property (Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
ROBINHOOD SECURIETIES LLC	01/01/19	12/31/20	3,626.	9,075.			-5,449.	
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	3,626.	9,075.			-5,449.	

# **Sales and Other Dispositions of Capital Assets**

► Go to www.irs.gov/Form8949 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

2020
Attachment Sequence No. 12A

Name(s)	shown	on	return
СПУ	ר א נו	$\Box$	CVED

Social security number or taxpayer identification number 273–23–0248

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Shor

**Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

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(s) 1099-B showing basis was reported to the IRS (see **Note** above)

	<ul><li>☐ (B) Short-term transactions</li><li>☒ (C) Short-term transactions</li></ul>				sis <b>wasn't</b> report	ed to the IF	RS		
1	(a)  Description of property	(a) (b) (c) Date sold or		(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column</i> (e)	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss). Subtract column (e) from column (d) and		
	(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	in the separate instructions	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	combine the result with column (g)	
ROI	BINHOOD SECURIETIES LLC	01/01/20	12/31/20	3.	21.			-18.	
	Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6)	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	3.	21.			-18.	

#### **SCHEDULE E**

(Form 1040)

#### **Supplemental Income and Loss**

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

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

OMB No. 1545-0074

2020

Attachment Sequence No. 13

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

► Go to www.irs.gov/ScheduleE for instructions and the latest information.

Your social security number

SHA	FAHAD SYED							273-2	23-024	3
Part		s From Rental Real Estate and Ro instructions. If you are an individual, rep	-					• .		
A Dic		nts in 2020 that would require you to								
	, , ,	ou file required Form(s) 1099?		٠,						es ☐ No
1a		each property (street, city, state, ZIF								
Α	<u> </u>	AR KURNOOL KURNOOL ANDI			SH I	N 518	3004			
В										
С										
1b	Type of Property	2 For each rental real estate pro	perty I	listed		Fai	r Rental	Persona	al Use	QJV
	(from list below)	For each rental real estate propabove, report the number of fapersonal use days. Check the	ir rent	al and			Days	Day	/S	Q01
Α	3	it you meet the requirements to	o tile a	as a	Α		365		0	
В		qualified joint venture. See inst	ructio	ns.	В					
С					С					
	of Property:									
•	gle Family Residence	3 Vacation/Short-Term Rental				7 Self				
	ti-Family Residence	4 Commercial	6 Ro	yalties		8 Othe	er (describe			
Incom		Properties:	-		Α	400	E	3		С
3			3			400.				
4 Evnor			4				-		+	
Expen 5			5							
6		nstructions)	6							
7	•	nance	7		1	,210.				
8	•		8			, 210.				
9			9							
10		ssional fees	10							
11	•		11		1.	360.				
12	•	d to banks, etc. (see instructions)	12			, 500.				
13			13							
14			14		1,	200.				
15			15			,000.				
16	• •		16							
17			17		1,	600.				
18	Depreciation expense	or depletion	18							
19	Other (list)		19							
20		lines 5 through 19	20		6,	370.				
21		line 3 (rents) and/or 4 (royalties). If								
	, ,	instructions to find out if you must			_	0.7.5				
			21		<b>-</b> 5,	,970.				
22		estate loss after limitation, if any,		,	_	070	,			,
00-	on Form 8582 (see in	•	22	(	-5,	970.	(	400	)(	)
23a		eported on line 3 for all rental prope				23a		400.	-	
b		eported on line 4 for all royalty prop				23b 23c				
c d		eported on line 12 for all properties eported on line 18 for all properties				23d			-	
e e		eported on line 20 for all properties				23a	-	6,370.		
24		e amounts shown on line 21. <b>Do no</b>						. 24		
25	•	sses from line 21 and rental real estate		•			 al losses he	-	(	5,970.)
		ate and royalty income or (loss).							1	
26		V, and line 40 on page 2 do not								
		10), line 5. Otherwise, include this ar								-5,970.

Schedule E

### **Schedule E Worksheet**

► Keep for your records

1	n	2	Λ
Z	U	Z	U

Name(s) shown on return Social Security No. SHA FAHAD SYED 273-23-0248 General Information: Property description . . . . . . . . 45–148 A NR NAGAR KURNOOL Property type. . 3 Vacation/Short-term If type is other, enter a description . . Location (street address) . . . . . 45-148 ANR NAGAR KURNOOL ZIP code . . . . City . . . . . . . . KURNOOL State . . . . If a foreign address: Foreign province or state . . ANDHRA PRADESH Foreign postal code . . . . 518004 Foreign country . . . . India **Complete For All Properties:** Did you make any payments that would require you to file Form(s) 1099? . . . . . . Yes No If **yes**, did you or will you file all required Form(s) 1099?..... Yes **Complete For All Rental Properties:** 0 **Check All That Apply:** Owned by spouse . . . . . . . . . . . . . . . . В С Active participation. . . . . . . . . . X D Qualified joint venture . . . . . . . . . . . F Some investment is not at risk . . . . . . . . Ε Other passive exceptions . . . . . . . . Н Complete taxable disposition — See Help . . ī Treat all MACRS assets for this activity as qualified Indian reservation property? . . Yes Treat all assets acquired after August 27, 2005 as qualified GO Zone property? . . . . . . . . . . . . Regular Extension Nο Κ Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property? . . . . . . . . . . . . . . . Yes No Was this activity located in a Qualified Disaster Area? . . . . . . . . . . . . Yes L М Ownership Percentage: Check to allocate income and expenses using ownership percentage . . . . . . . . . . . . . . . . . **Owner-Occupied Rentals:** Q **Vacation Home or Property with Personal Use Days:** Check to allocate interest and taxes using the Tax Court Method . . . . . . . . . . . . . . . . . . S 

Property Location Page 2

4	5-148 ANR NAGAR KURNOOL, KURNOOL , A	NDHRA PRADES	н , 518004 ,	India
Inco	me		% if Different	Total
3	Enter rental income (not reported elsewhere)	400.		
	Rental income from Form 1099-MISC			
	Rental income from Form 1099-K			
	Rental Income from Cancellation of Debt Wks			
	Total rents received	400.	100.000000	400.
4	Enter royalties received (not reported elsewhere)			_
	Royalty income from Form 1099-MISC			
	Royalty income from Form 1099-K			
	Royalty Income from Cancellation of Debt Wks			
	Royalty Income from Schedule K-1			
	Total royalties received			

Expenses	(a) Total	(b) Enter % if not	(c) Reported On Schedule E	(d) Vacation Home Loss Limitation	(e) Allocated to Personal use
5 Advertising					0.00
<b>6 a</b> Auto					
<b>b</b> Travel					
7 Cleaning and maint	1,210.		1,210.		
8 Commissions	·		·		
<b>9 a</b> Mort insur qualified					
From Form 1098 import					
Total mort insur qual					
<b>b</b> Other Insurance					
Legal & other prof fees					
1 Management fees	1,360.		1,360.		
2 a Mortgage int qualified .					
From Form 1098 import		-			
Total mort int qualified					
<b>b</b> Mort int other					
From Form 1098 import		-			
Total mort int other					
3 Other interest					
Repairs	1,200.		1,200.		
Supplies	1,000.		1,000.		
<b>a</b> Real estate taxes	1,000.		1,000.		
From Form 1098 import		-			
Total real estate taxes					
<b>b</b> Other taxes					
7 Utilities	1 (00		1 (00		
_	1,600.		1,600.		
B a Depreciation					
<b>b</b> Depletion					
c Depreciation carryover					
Other expenses					
a					
b					
c					
d					
e Indirect operating exp .					
f Operating exp carryover		-			
g Vehicle rental					
<b>h</b> Amortization					
Add lines 5 through 19	6,370.	-	6 <b>,</b> 370.		
I Income or (loss)			-5 <b>,</b> 970.		
2 Deductible rental real estat	e loss		-5 <b>,</b> 970.		

# 2020 MICHIGAN Individual Income Tax Return MI-1040

	<b>0 MICHIGAN INDIV</b> rn is due April 15, 2021. Ty					n MI-1	040				ended Return ude Schedule AMD)	
	r's First Name	M.I. Last Name							Social Sec	curity	No. (Example: 123-45-678	80)
SHA	A FAHAD		SYED				2.11					,5)
	int Return, Spouse's First Name	M.I.	Last Name					273		23	<u> </u>	
Home	Address (Number, Street, or P.O. Box)						3. S <sub>l</sub>	pouse's F	Full Social	Secur	ity No. (Example: 123-45-	6789)
	27 EVERGREEN RD,		. 2								<del></del>	
	Town			State	ZIP Code		4. Sc	chool Dis	trict Code	(5 dig	its – see page 60)	
DEA	ARBORN HEIGHTS			MI	48127	,	82040					
5.	STATE CAMPAIGN FUND					6. FARM	IERS, F	ISHER	MEN, OR	SEA	AFARERS	
1	Check if you (and/or your spouse, filing a joint return) want \$3 of your to go to this fund. This will not increyour tax or reduce your refund.	taxes	, —	iler Spouse				his box or seafa		our ir	ncome is from farming,	
7.	2020 FILING STATUS. Check one					8. <b>2020</b>	RESIDE	ENCY S	TATUS.	Chec	k all that apply.	
а. [	X Single	* If y	ou check box "c,"	comple	te	а. Х	Reside	nt				
b. [	Married filing jointly	line :	3 and enter spou w:	se's full ı	name	b. []	Nonres	eident *			* If you check box "b" c "c," you must complete	
ъ. <u>Г</u>	Married lilling jointly					D	Nones	siderit			and include Schedule NR.	,
c. [	Married filing separately*		c. P					ar Resi	dent *		NK.	
9.	EXEMPTIONS. NOTE: If someo	ne els	e can claim you	as a dep	endent, che	ck box 9e, e	nter 0 c	on line 9	a and en	ter \$	1,500 on line 9e (see in	ıstr.).
	Number of exemptions (see in	structi	ons)			9a.		1 x	\$4,750	9a.	4750	00
	b. Number of individuals who qua	lify for	one of the follow	ing speci	ial exemption	ns: deaf,						П
	blind, hemiplegic, paraplegic, o	-	_	-	-			X	\$2,800 \$400	9b. 9c.		00
	c. Number of qualified disabled veterans							X x	\$4,750	9d.		00
			(555		,			^	Ų 1,1 CC	0		
	e. Claimed as dependent, see lin	e 9 N	OTE above			9e.				9e.		00
	f. Add lines 9a, 9b, 9c, 9d and 9e	e. Ent	er here and on li	ne 15						9f.	4750	00
10.	Adjusted Gross Income from yo	our U.S	6. Forms 1040 or	1040NF	R (see instru	ctions)			10.		70158	00
11.	Additions from Schedule 1, line 9	. Inclu	de Schedule 1 .						11.			00
12.	Total. Add lines 10 and 11								ļ		70158	00
13.	Subtractions from Schedule 1, lin	e 29.	Include Schedu	le 1					13.			00
14.	Income subject to tax. Subtract	line 1	3 from line 12. If	line 13 i	s greater tha	n line 12, e	nter "0"		14.		70158	00
15.	Exemption allowance. Enter am	ount f	rom line 9f or Scl	nedule N	IR, line 19				15.		4750	00
16.	6. <b>Taxable income.</b> Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0".						"		-		65408	00
17.	<b>Tax.</b> Multiply line 16 by 4.25% (0.	0425)									2780	00
	REFUNDABLE CREDITS	,				AMOUN			_		CREDIT	
18.	Income Tax Imposed by governm Include a copy of the return (see				8a.			00	18b.			00
19.	Michigan Historic Preservation Tainstructions)	x Cre	dit carryforward (	see	a.			00	19b.			00
20.	Income Tax. Subtract the sum of If the sum of lines 18b and 19b is	lines	18b and 19b fron	n line 17							2780	

2020 MI	-1040, Page 2 of 2	E:I	er's Full Social S	ecurity Numba	273 -		23 — 0248		
				•					
	Enter amount of Income Tax from Iir					-	2	780	-
	Voluntary Contributions from Form 4					22.			00
	<b>USE TAX.</b> Use tax due on Internet, Worksheet 1 (see instructions)					23.		0	00
24	Total Tay Liability Add lines 21, 22	) and 22			24		2	780	
	Total Tax Liability. Add lines 21, 22 NDABLE CREDITS AND PAYM				24.[			700	
25.	Property Tax Credit. Include MI-10	040CR or MI-1040C	CR-2			25.			00
26.	Farmland Preservation Tax Credit	t. Include MI-10400	CR-5		DERAL	26.	MICHIGAN		00
	5 II	07 1 00/ /0.0	о Г		JERAL	Г	MICHIGAN		
	Earned Income Tax Credit. Multiply enter result on line 27b				00	27b.			00
28.	Michigan Historic Preservation Tax		28.			00			
29.	Michigan tax withheld from Schedul	29.	3.	363	00				
30.	Estimated tax, extension payments		30			00			
31.									
	31a. If you had a refund and/or credit forward on the original return, check box 31a and enter this amount as a negative number on line 31c.								
	31b. If you paid with the original return, check box 31b and enter the amount paid with the original return, plus any additional tax paid after filing, as a positive number on line 31c. Do not include interest or penalty.								00
32.	Total refundable credits and paymer	nts. Add lines 25, 26	6, 27b, 28, 29, 3	30 and 31c			3.	363	00
	ND OR TAX DUE				. г				
33.	If line 32 is less than line 24, subtraction	ct line 32 from line 2	24. If applicable	, see instruct	ions.				
	Include interest 00 a	ind penalty	00	······································	<b>/OU OWE</b> 33.				00
34.	Overpayment. If line 32 is greater t	han line 24, subtrac	t line 24 from li	ne 32				583	00
35.	Credit Forward. Amount of line 34	to be credited to you	ur 2021 estimat	ted tax for yo	ur 2021 tax return Ī	35.			00
36	Subtract line 35 from line 34				REFUND 36.			583	00
DIRE	CT DEPOSIT	a. Routing Tran			ccount Number		c. Type of Account		-
	t your refund directly to your financial on! See instructions and complete a, b	071000013		629629	9093	1.	X Checking 2.	Saving	gs
	<b>ased Taxpayer.</b> If Filer and/or Spous R <i>DATE OF DEATH ONLY</i> . Example:				this return is based on	all informa	declare under penalty of pation of which I have any kr		
Filer		Spouse			Preparer's PTIN, FEIN P02082703				
	ayer Certification. I declare under packments is true and complete to the bes		the information in	this return	Preparer's Name (print SYAM PRIYA	, ,	I SAGAR GUPT	A T	A
Filer's	Signature		Date		Preparer's Signature			7 m-	
Spous	e's Signature		Date				I SAGAR GUPTA ress and Telephone Number		<i>A</i>
Spouse	o o oignature		Date		GLOBAL TAX			UI .	
By checking this box, I authorize Treasury to discuss my return with my preparer.    2530 PEBBLE CREEK LN									

Refund, credit, or zero returns. Mail your return to:

Michigan Department of Treasury, Lansing, MI 48956

# 2020 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.

Attachment 13

**INSTRUCTIONS:** If you had Michigan income tax withheld in 2020, you must complete a *Withholding Tax Schedule* (Schedule W) to claim the withholding on your *Individual Income Tax Return* (MI-1040, line 29). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits (both Tier 1 and Tier 2) in Table 2 even if no Michigan tax was withheld. Include your completed Schedule W with Form MI-1040. See complete instructions on page 2 of this form. If you need additional space, include another Schedule W.

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
SHA FAHAD		SYED	273 — 23 — 0248
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)

### TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS

A B		В	C D			E			
	'X" for: <b>Spouse</b>	Employer's identification number (Example: 38-1234567)	Box c — Employer's name	Box 1 — Wages, tips, other compensation		Box 17 — Michigan income tax withheld			
Х		82-1518220	CIBER GLOBAL LLC	79128	00	3363	00		
					00		00		
					00		00		
					00		00		
					00		00		
Enter	Table	1 Subtotal from additional Sche			0				
4.	4. SUBTOTAL. Enter total of Table 1, column E								

# TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS (BOTH TIER 1 AND TIER 2) REPORTED ON 1099 FORMS

Α	В	C D		E
Enter "X" for: Filer or Spouse	Payer's federal identification number (Example: 38-1234567)	Payer's name	Taxable pension distribution, misc. income, etc. (see inst.)	Michigan income tax withheld
			00	0
			00	0
			00	0
			00	0
			00	0
Enter Table	2 Subtotal from additional Sche	dule W forms (if applicable)		0
5. <b>SUB</b>	TOTAL. Enter total of Table 2, co	5.	0	
6. <b>TOT</b>	<b>AL.</b> Add lines 4 and 5. Enter her	9 6.	3363 0	

REV 02/15/21 PRO

#### SCHEDULE 1 (Form 1040)

**Additional Income and Adjustments to Income** 

OMB No. 1545-0074

2020
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
SHA FAHAD SYED

Your social security number
273-23-0248

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-5 <b>,</b> 970.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ▶		
		8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	-5 <b>,</b> 970.
Par	line 8	<b>J</b>	<u>-3,970.</u>
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government	10	
	officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your <b>adjustments to income.</b> Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

#### **SCHEDULE D** (Form 1040)

Department of the Treasury

# **Capital Gains and Losses**

► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/ScheduleD for instructions and the latest information. ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

Attachment Sequence No. 12

Internal Revenue Service (99) Name(s) shown on return Your social security number 273-23-0248 SHA FAHAD SYED Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Vee," attach Form 2040 and see its instructions for additional requirements for reporting

	- Com Capital Game and 200000	enerally Assets I	TIGIU ONE TEAT	DI <b>LC33</b> (SE		
lines below.	how to figure the amounts to enter on the asier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
				line 2, colum	ii (g)	with column (g)
1099-B for wh which you ha However, if yo	hort-term transactions reported on Form ich basis was reported to the IRS and for ave no adjustments (see instructions). u choose to report all these transactions leave this line blank and go to line 1b.					
1b Totals for all tra Box A checked	ansactions reported on Form(s) 8949 with	5,070.	5,399.			-329
2 Totals for all tra Box B checked	ansactions reported on Form(s) 8949 with					
Box C checked		3.	21.			-18
4 Short-term gai	n from Form 6252 and short-term gain or (	loss) from Forms 4	684, 6781, and 88	324	4	
	m gain or (loss) from partnerships, -1	S corporations,	estates, and tr	rusts from	5	
	oital loss carryover. Enter the amount, if all the instructions	ny, from line 8 of y	our <b>Capital Loss</b>	Carryover	6	(
	n capital gain or (loss). Combine lines 1: tins or losses, go to Part II below. Otherwis				7	-347
Part II Long-	Term Capital Gains and Losses—Ge	nerally Assets H	leld More Than	One Year	(see	instructions)
lines below.	how to figure the amounts to enter on the asier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I line 2, colum	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1099-B for wh which you ha However, if yo	ong-term transactions reported on Form ich basis was reported to the IRS and for ave no adjustments (see instructions). u choose to report all these transactions leave this line blank and go to line 8b.					
	ansactions reported on Form(s) 8949 with					-5,449
Box D checked		3,626.	9,075.			
Box D checked	d	3,626.	9,075.			3/117
9 Totals for all tra Box E checked	ansactions reported on Form(s) 8949 with d	3,626.	9,075.			3,113.
9 Totals for all tr. Box E checked 10 Totals for all tr. Box F checked 11 Gain from Ford	ansactions reported on Form(s) 8949 with d	s 2439 and 6252;	and long-term ga		11	3,113
9 Totals for all tr. Box E checker  10 Totals for all tr. Box F checker  11 Gain from Form from Forms 46  12 Net long-term	d	s 2439 and 6252; tions, estates, and	and long-term ga		11 12	3,113

BAA

Schedule D (Form 1040) 2020 Page **2** 

# Part III Summary

16	Combine lines 7 and 15 and enter the result	16		-5,796.
	• If line 16 is a <b>gain,</b> enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.			
	• 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.			
	• If line 16 is <b>zero</b> , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.			
17	Are lines 15 and 16 <b>both</b> gains?   Yes. Go to line 18.			
	No. Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	Are lines 18 and 19 both zero or blank and are you not filing Form 4952?  Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below.			
	■ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of:			
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21	(	3,000.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Forms 1040 and 1040-SR, line 16.			
	➤ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

# **Sales and Other Dispositions of Capital Assets**

► Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment Sequence N

2020 Attachment Sequence No. 12A

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Social security number or taxpayer identification number

Name(s) shown on return SHA FAHAD SYED

273-23-0248

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

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 (B) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	•		•	e)
(a) Description of property	(b) Date acquired	(b) (c) (d) acquired day yr) disposed of (sales p	<b>(d)</b> Proceeds	(d) Cost or other basis. Proceeds See the Note below Adjustment, if any, to gain If you enter an amount in co enter a code in column See the separate instruc		amount in column (g), ode in column (f).	(h) Gain or (loss). Subtract column (e) from column (d) and
(Example: 100 sh. XYZ Ćo.)	XV7 Co \ (Mo day yr)			in the separate	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
ROBINHOOD SECURIETIES LLC	01/01/20	12/31/20	5,070.	5,399.			-329.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	5,070.	5,399.			-329.

Form 8949 (2020) Attachment Sequence No. 12A

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

SHA FAHAD SYED

Social security number or taxpayer identification number
273-23-0248

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

#### Part II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, 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.

<ul><li>✗ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on	Form(s) 1099	-B showing bas				)
1 (a)	(b)	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below			(h) Gain or (loss). Subtract column (e)
Description of property (Example: 100 sh. XYZ Co.)	Date acquired (Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD SECURIETIES LLC	01/01/19	12/31/20	3,626.	9,075.			-5,449.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	3,626.	9,075.			-5,449.

# **Sales and Other Dispositions of Capital Assets**

► Go to www.irs.gov/Form8949 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

2020
Attachment Sequence No. 12A

Name(s)	shown	on	return
СПУ	ר א נו	$\Box$	CVED

Social security number or taxpayer identification number 273–23–0248

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Shor

**Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

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(s) 1099-B showing basis was reported to the IRS (see **Note** above)

	☐ (B) Short-term transactions X (C) Short-term transactions				sis <b>wasn't</b> report	ed to the IF	RS	
1	(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column</i> (e) in the separate instructions	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss). Subtract column (e) from column (d) and	
	(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)		(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	combine the result with column (g)
ROI	BINHOOD SECURIETIES LLC	01/01/20	12/31/20	3.	21.			-18.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶				3.	21.			-18.

#### **SCHEDULE E**

(Form 1040)

#### **Supplemental Income and Loss**

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

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

OMB No. 1545-0074

2020

Attachment Sequence No. 13

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

► Go to www.irs.gov/ScheduleE for instructions and the latest information.

Your social security number

SHA	FAHAD SYED							273-2	23-0248	3
Part		From Rental Real Estate and Rog structions. If you are an individual, rep						• .		
A Dic		s in 2020 that would require you to								
				٠,						es 🗌 No
1a		Yes," did you or will you file required Form(s) 1099?								
Α	<del>  '</del>	R KURNOOL KURNOOL ANDI			SH I	N 518	3004			
В										
С										
1b	Type of Property	2 For each rental real estate prop	perty I	erty listed			Fair Rental		Personal Use	
	(from list below)	2 For each rental real estate propabove, report the number of fa personal use days. Check the	r rental and			Days		Days		QJV
Α	3	it you meet the requirements to	otile as a 📗 🗜		Α		365	0		
В		qualified joint venture. See inst								
С					С					
	of Property:									
•	gle Family Residence	3 Vacation/Short-Term Rental					-Rental			
	ti-Family Residence	4 Commercial	6 Ro	yalties		8 Oth	er (describe		_	
Incom		Properties:	-		Α	400	E	3		С
3			3			400.			-	
4			4						-	
Expen			_							
5			5 6							
6 7	Auto and travel (see instructions)				1	210.				
8	Cleaning and maintenance				<u> </u>	. 210.				
9			9							
10		sional fees	10							
11	•		11		1	360.				
12	Management fees					300.				
13			12							
14			14		1,	200.				
15			15			000.				
16	• •		16							
17			17		1,	600.				
18	Depreciation expense of	or depletion	18		•					
19	Other (list)	·	19							
20	Total expenses. Add lines 5 through 19		20		6,	370.				
21	Subtract line 20 from lin	ne 3 (rents) and/or 4 (royalties). If								
	result is a (loss), see in	structions to find out if you must								
			21		<b>-</b> 5,	970.				
22		estate loss after limitation, if any,		,	_					
	on Form 8582 (see inst	•	22	(	<b>-5</b> ,	970.	+		)(	)
23a	·	ported on line 3 for all rental prope				23a		400.	-	
b		ported on line 4 for all royalty prop				23b				
C	·	ported on line 12 for all properties				23c	-			
d	Total of all amounts reported on line 18 for all properties						6 270			
e 24										
24	•			•				. 24	(	5 070
25	<b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here .								(	5,970.)
26		e and royalty income or (loss).								
		, and line 40 on page 2 do not a l), line 5. Otherwise, include this ar								-5,970.
		7, mio oi o ilioi wiso, ilioiuut ilils al	. ioui il	ו חוו נווס	ioiai Ol		JII Payt 2	.   20	1	~, ~ , · · ·