Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

NAVESN 7ULA Spouse's name NAVESN 7ULA Spouse's name Part II Tax Return Information — Tax Year Ending December 31, 2020 (Enter year you are authorizing.) Enter whole dollars only on lines I through 5. Note: Form 104-05-\$ filter use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income 1 1 106, 961. 2 Total tax 2 16, 778. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 2, 12, 223. 4 Amount you want refunded to you 5 Amount you want refunded to you 6 Amount you want refunded to you 7 Amount you want refunded to you 7 Amount you want refunded to you 8 A 4, 450. 5 Amount you want refunded to you 9 A 4, 450. 5 Amount you want refunded to you 1 A 4, 450. 5 Amount you want refunded to you 1 A 4, 450. 5 Amount you want refunded to you 1 A 4, 450. 5 Amount you want refunded to you 2 A 4, 450. 5 Amount you want refunded to you 2 A 4, 450. 5 Amount you want refunded to you 8 A 4, 450. 8 A 4, 450. 8 A 4 Amount you want refunded to you 9 A 4, 450. 9 Amount you want refunded to you 9 A 4, 450. 9 A	Submissi	on Identification Number (SID)		•					
Part I Tax Return Information — Tax Year Ending December 31, 2020 (Enter year you are authorizing.) Enter whole dollars only on lines 1 through 5. Note: Form 104-05-Sf liters use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income	Taxpayer's	name	Social securi	Social security number					
Part ■ Tax Return Information — Tax Year Ending December 31, 2020 (Enter year you are authorizing.) Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS filter use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1	NAVEE	N TULA	888-32	-618	2				
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1	Spouse's na	ame	Spouse's soc	ial secu	ırity n	umber			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1	Part I	Tax Return Information — Tax Year Ending December 31, 2020 (En	nter year you a	re au	thori	zing.)			
1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 2 1, 228. 4 Amount you want refunded to you 4 4 4, 450. 5 Amount you own refunded to you 5 Amount you want refunded to you 6 Amount you want refunded to you 7 Amount you want refunded to you 8 Amount you want refunded to you 8 Amount you want refunded to you 9 Amount you want you 9 Amount you want refunded you 9 Amount you want refunded to you 9 Amount you refund to exit you 9 Amount you refund to exit you 9 Amount you refunded to exit you 9 Amount you refunded to exit you 9 Amount you refunded to exit you 9 Amount you 9 Am	Enter who	ole dollars only on lines 1 through 5.							
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Taxpayer's PIN: check one box only	for any de Agent to ir payment o authorizati payment, business o taxes to re personal id	lay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the nitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termin I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation of days prior to the payment (settlement) date. I also authorize the financial institutions involved in eceive confidential information necessary to answer inquiries and resolve issues related to the dentification number (PIN) below is my signature for the income tax return (original or amended)	e U.S. Treasury a indicated in the tradicated in the tradicated in the tradical trad	nd its of ax prepared in the second in the s	desigr paration to this o revived nectroic know	nated Fon software account of the control of the co	inancial ware for int. This ancel) a than 2 ment of that the		
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ERO Must Retain This Form — See Instructions	ERO's sig	gnature ▶ Date ▶	•						
		ERO Must Retain This Form — See Instructions							

E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

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

Filing Status	X :	Single Married filing jointly	Marrie	d filing separately (N	ЛFS)	☐ Head o	f hous	sehold (HC)H) [Qua	lifying wid	iow(er) (QW)
Check only one box.	•	ou checked the MFS box, enter the notion is a child but not your dependen	,	our spouse. If you o	heck	ed the HOH	or QV	V box, ent	er the	child's	name if th	ne qualifying
Your first name	and m	iddle initial	Last nar	ne					,	Your so	cial securi	ty number
NAVEEN			TULA							888-32-6182		
If joint return, s	pouse's	s first name and middle initial	Last nar	ne					:	Spouse's social security number		
	•	er and street). If you have a P.O. box, see	instructio	ns.				Apt. no.				on Campaign
		PORCH RD			1 -		1				here if you, if filing join	, or your ntly, want \$3
	ost offi	ce. If you have a foreign address, also co	mplete sp					code		•	0,	Checking a
PLANO			1-		T		+	024			ow will not	0
Foreign country	/ name			oreign province/state/	count	У	Fore	eign postal o	code	your tax	x or refund.	. Spouse
At any time du	ring 20	D20, did you receive, sell, send, excl	nange, o	r otherwise acquire	any 1	financial inter	rest in	any virtu	al curr	ency?	Yes	X No
Standard	Som	eone can claim: You as a de	pendent	☐ Your spous	e as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien							
Age/Blindness	You	: Were born before January 2, 1	956	Are blind Spo	ouse	: Was be	orn be	efore Janu	ıary 2,	1956	☐ Is bl	lind
Dependents	s (see	instructions):		(2) Social security	,	(3) Relations	ship	(4) 🕊	/ if qua	alifies for (see instructions):		
If more	(1) F	irst name Last name		number		to you	•	Child	tax cre	dit	Credit for ot	ther dependents
than four												
dependents, see instructions												
and check												
here ▶ □												
	1	Wages, salaries, tips, etc. Attach I	orm(s) V	V-2						1	1	13,259.
Attach	2a	Tax-exempt interest	2a		b Ta	axable intere	st			2b)	
Sch. B if required.	3a	Qualified dividends	3a	1.	b 0	rdinary divid	ends			3b)	1.
	4a	IRA distributions	4a		b Ta	axable amou	nt .			4b)	
	5a	Pensions and annuities	5a		b Ta	axable amou	nt .			5b)	
Standard	6a	Social security benefits	6a		b Ta	axable amou	nt .			6b)	
Deduction for—	7	Capital gain or (loss). Attach Sche	dule D if	required. If not requ	uired,	check here			▶ □	7		-7.
 Single or Married filing 	8	Other income from Schedule 1, lin	e9							8		-6 , 292.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. Th	nis is your total inc	ome				. ▶	9	1	06,961.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22				1	0a					
widow(er), \$24,800	b	Charitable contributions if you take	the stan	dard deduction. See	instr	ructions 1	0b					
• Head of	С	Add lines 10a and 10b. These are	your tot a	al adjustments to i	ncor	ne			. ▶	100	0	
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	djusted gross inco	me				. ▶	11	1	06,961.
If you checked	12	Standard deduction or itemized	•	-						12		12,400.
any box under Standard	13	Qualified business income deduct	ion. Atta	ch Form 8995 or Fo	rm 8	995-A				13		
Deduction, see instructions.	14	Add lines 12 and 13								14		12,400.
SSC INSTRUCTIONS.	15	Taxable income. Subtract line 14	from line	e 11. If zero or less,	ente	r-0				15	;	94,561.

16 17 18 19 20 21 22 23 24	Amount from Schedule 2, I Add lines 16 and 17 Child tax credit or credit fo Amount from Schedule 3, I Add lines 19 and 20 Subtract line 21 from line 1 Other taxes, including self- Add lines 22 and 23. This is	ne 3	ts	· · · · · · · · · · · · · · · · · · ·		 	. 17			778.
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21 22 23 24	Add lines 19 and 20 Subtract line 21 from line 1 Other taxes, including self-Add lines 22 and 23. This is	8. If zero or less, employment tax,					. 10			
22 23 24	Subtract line 21 from line 1 Other taxes, including self- Add lines 22 and 23. This is	8. If zero or less, employment tax,					. 20			
23 24	Other taxes, including self- Add lines 22 and 23. This is	employment tax,	enter -0				. 21			
24	Add lines 22 and 23. This is						. 22		16,7	778.
	Add lines 22 and 23. This is		from Schedule	2, line 10 .			. 23			0.
25	Federal income tax withhel	s your total tax					▶ 24		16,7	778.
		d from:								
6	a Form(s) W-2				25a	21,2	28.			
	b Form(s) 1099				25b					
(c Other forms (see instruction				25c					
	d Add lines 25a through 25c	•					. 25d	1 .	21.2	228.
26										
• If you have a qualifying child, 27					27					
attach Sch. EIC.					28					
• If you have nontaxable 29					29					
combat pay, see instructions. 30			•		30					
31	•				31					
32							▶ 32	1		
33	_	-						-	21,2	228
24							. 34	<u> </u>		150.
Retund										150.
35a Direct deposit? ▶ Ł	141414				Ck nere . Checking	_	35a		4,4	.50.
See instructions				C Type:	Checking	Savi	rigs			
36				d tax	36					
							▶ 37	-		
Amount 37 You Owe			-							
For details on	Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.									
how to pay, see					00					
instructions. 38					38					
	Do you want to allow another instructions	•				e Comp	lete below.	× No	_	
	Designee's		Phone		10		identification		,	
	name >		no.			number (
Sign	Under penalties of perjury, I declare	that I have examine	ed this return and	accompanying sch	edules and sta	tements,	and to the be	st of my l	knowle	dge and
	belief, they are true, correct, and co	mplete. Declaration	of preparer (other	than taxpayer) is ba	ased on all info	rmation of	which prepa	rer has ar	ıy knov	√ledge.
Here	Your signature		Date	Your occupation			If the IRS se	,		,
L				000000000			Protection F (see inst.) ▶		it here	
Joint return? See instructions.				SOFTWARE I			, ,	\Box		
Keep a copy for	Spouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat	ion		If the IRS se Identity Pro			
your records.							(see inst.) ▶		1	
	Phone no. (469) 618-44	 5.5	Email address	TULANAVEEN1	413@GMAT	L. COM				
F	Preparer's name	Preparer's signat	1	_	Date	PT	IN	Check	if:	
Paid								Se	lf-empl	loyed
Preparer -	Firm's name ► GLOBAL TA	XES LLC					Phone no.		<u> </u>	
I Ica ()nlv —							Firm's EIN	>		
	orm1040 for instructions and the lat			BAA	REV 05/29/2	1 DDC	5 En 1	-		IO (2020)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

NAVEEN TULA

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

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form1040 for instructions and the latest information. Attachment Sequence No. **01**

Your social security number

888-32-6182

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	-6,306.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ► Other Income from box 3 of 1099-Misc 14.	8	14.
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	-6,292.
Par	t II Adjustments to Income		
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government 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 adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99)

► 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.

Name(s) shown on return Your social security number

888-32-6182 NAVEEN TULA Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (g) with column (g) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 with Box A checked 199. 9,307. 9,514. -8. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -8. Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loce)

See instructions for now to figure the amounts to enter on the lines below.		(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	88.	209.	1	22.	1.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824			, ,	11	
12	Net long-term gain or (loss) from partnerships, S corporate	tions, estates, and	trusts from Sched	dule(s) K-1	12	
13	Capital gain distributions. See the instructions		13			
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	14	()			
15	Net long-term capital gain or (loss). Combine lines 88 on the back	•	. ,		15	1.

BAA

Schedule D (Form 1040) 2020 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 -7. • If line 16 is a gain, 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 loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, 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 both 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 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (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. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 7.) 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

Sales and Other Dispositions of Capital Assets

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

► 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

Internal Revenue Service

Name(s) shown on return

NAVEEN TULA

Department of the Treasury

Social security number or taxpayer identification number

888-32-6182

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.

X (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	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a c	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 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 Securities LLC	01/01/20	12/31/20	7,948.	7 , 925.	W	172.	195.
APEX CLEARING	01/01/20	12/31/20	1,359.	1,589.	W	27.	-203.
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 (al here and inc is checked), lir	lude on your ne 2 (if Box B	9,307.	9,514.		199.	-8.

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.

Form 8949 (2020) Attachment Sequence No. 12A Page 2

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 888 - 32 - 6182

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.

X (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

	☐ (E) Long-term transactions☐ (F) Long-term transactions				is wasn't report	ed to the IF	RS	,
1	(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e)
	(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)
Rol	pinhood Securities LLC	01/01/19	12/31/20	88.	209.	W	122.	1.
	Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 8b (if Box D above	al here and inc	lude on your					

Note: If you checked Box D 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.

above is checked), or line 10 (if Box F above is checked) ▶

88.

209.

SCHEDULE E

Name(s) shown on return

(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

Department of the Treasury ▶ Go to www.irs.gov/ScheduleE for instructions and the latest information. Internal Revenue Service (99)

Attachment Sequence No. **13** Your social security number

NAVE	EN TULA						88	38-32-	6182	2	
Part	Income or Loss	s From Rental Real Estate and Ro	yaltie	s Note: If yo	ou are in	the business of	of renti	ng perso	nal pr	operty,	use
	Schedule C. See	instructions. If you are an individual, rep	ort farı	m rental incom	e or loss	from Form 48	835 or	page 2,	line 40).	
A Dic	d you make any payme	nts in 2020 that would require you to	file F	orm(s) 1099?	See in:	structions .			□ Y	es 🗵	No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?							□ Y	es 🗌	No
1a		each property (street, city, state, ZIF									
Α	F.NO-204, SRI C	CHARAN HOMES BAGHAMEER, H	ZDERZ	ABAD TELA	NGAN	IN 5000	72				
В											
С											
1b	Type of Property	2 For each rental real estate prop	perty I	isted .	Fa	ir Rental	Per	sonal U	se	Q	JV
	(from list below)	above, report the number of fair rental and personal use days. Check the QJV box only						Days			
Α	3	above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a				365		0			
В	<u> </u>	qualified joint venture. See inst	ructio								
С				С						L	
	of Property:										
	gle Family Residence	3 Vacation/Short-Term Rental				lf-Rental					
2 Mul Incom	ti-Family Residence	4 Commercial Properties:	6 Ro	yalties	8 Ot	ner (describe					
			_	Α	650	E	3			С	
3 4			3		650	•					
			4								
Expen 5			5								
6		structions)	6								
7	•	nance	7	1	1,380						
8			8	1	, 300	•					
9			9								
10		essional fees	10								
11	_		11	1	250						
12	-	d to banks, etc. (see instructions)	12	_	, 200	•					
13			13	2	2,466						
14			14		,						
15			15	1	L , 000						
16			16								
17	Utilities		17		860						
18	Depreciation expense	e or depletion	18								
19	Other (list)		19								
20	Total expenses. Add	lines 5 through 19	20	6	5 , 956						
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If									
	• •	instructions to find out if you must									
	file Form 6198		21	-6	3,306	•					
22	Deductible rental rea on Form 8582 (see in	l estate loss after limitation, if any, structions)	22	_6	,306.)()()
23a	·	eported on line 3 for all rental prope		, , ,	23		6	50.			,
b		eported on line 4 for all royalty prop			23	_					
C		eported on line 12 for all properties			23						
d		eported on line 18 for all properties			23	_					
е		eported on line 20 for all properties			23		6,9	56.			
24		e amounts shown on line 21. Do no						24			
25	•	sses from line 21 and rental real estate		•		otal losses her	re.	25 (6,3	06.)
26	Total rental real est	ate and royalty income or (loss).	Comb	ine lines 24 a	and 25.	Enter the re	sult				
		V, and line 40 on page 2 do not									
		40), line 5. Otherwise, include this ar		•				26		-6,	306.

Passive Activity Loss Limitations

► See separate instructions.

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

▶ Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 Attachment Sequence No. **858**

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

Identifying number 888-32-6182

Par	t I 2020 Passive Activity Loss		
	Caution: Complete Worksheets 1, 2, and 3 before completing Part I.		
	al Real Estate Activities With Active Participation (For the definition of active participation, see		
Spec	ial Allowance for Rental Real Estate Activities in the instructions.)		
1a			
b	Activities with net loss (enter the amount from Worksheet 1, column (b)) 1b (6,306.)		
С	Prior years' unallowed losses (enter the amount from Worksheet 1, column (c)) 1c (
d	Combine lines 1a, 1b, and 1c	1d	-6 , 306.
Com	mercial Revitalization Deductions From Rental Real Estate Activities		
2 a	Commercial revitalization deductions from Worksheet 2, column (a) 2a ()	-	
b	Prior year unallowed commercial revitalization deductions from Worksheet 2,		
	column (b)		,
C	Add lines 2a and 2b	2c	()
	ther Passive Activities		
3a	Activities with net income (enter the amount from Worksheet 3, column (a)) . 3a	-	
b	Activities with net loss (enter the amount from Worksheet 3, column (b)) Brior years' unallowed losses (enter the amount from Worksheet 3, column (c)) 3c ()	-	
c d		3d	
	Combine lines 3a, 3b, and 3c	Su	
4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your		
	return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used	4	-6,306.
	If line 4 is a loss and: • Line 1d is a loss, go to Part II.		
	Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.		
	• Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III ar	nd ao i	to line 15.
Caut	ion: If your filing status is married filing separately and you lived with your spouse at any time during the	•	
	I or Part III. Instead, go to line 15.		·
Par	II Special Allowance for Rental Real Estate Activities With Active Participation		
	Note: Enter all numbers in Part II as positive amounts. See instructions for an example.		
5	Enter the smaller of the loss on line 1d or the loss on line 4	5	6 , 306.
6	Enter \$150,000. If married filing separately, see instructions		
7	Enter modified adjusted gross income, but not less than zero. See instructions 7 113,267.		
	Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on		
	line 10. Otherwise, go to line 8.		
8	Subtract line 7 from line 6		
9	Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions	9	18,367.
10	Enter the smaller of line 5 or line 9	10	6,306.
D	If line 2c is a loss, go to Part III. Otherwise, go to line 15.		
Part			ctivities
-44	Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instruction		
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions .	11	
12	Enter the loss from line 4	12	
13 14	Reduce line 12 by the amount on line 10	13 14	
Part		14	
15	Add the income, if any, on lines 1a and 3a and enter the total	15	0.
16	Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions	.5	· ·
10	to find out how to report the losses on your tax return	16	6,306.
			-,

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Caution: The worksheets must be filed Worksheet 1—For Form 8582, Lines 1				y for you	r record	S.		,
A1	Currer	nt year		Prior	years	Overal		ain or loss
Name of activity	(a) Net income (line 1a)	(b) Net			allowed ine 1c)	(d)) Gain	(e) Loss
F.NO-204, SRI CHARAN HOMES	0.		,306.					6,306.
Total. Enter on Form 8582, lines 1a, 1b, and 1c	0.		, 306.					
Name of activity	(a) Current deductions (year	_	(b) Pr lowed dec	ior year ductions (line 2b)	(c)	Overall loss
Total. Enter on Form 8582, lines 2a and 2b								
Worksheet 3—For Form 8582, Lines 3	,	e instruc nt year	tions)	Drior	years		Overall a	ain or loss
Name of activity	(a) Net income (line 3a)	(b) Net		(c) Una	allowed		Gain	(e) Loss
Total. Enter on Form 8582, lines 3a, 3b, and 3c ▶								
Worksheet 4—Use This Worksheet if a	an Amount Is Sh	own on I	Form 8	582, Lin	e 10 or	14. See	instructi	ons.
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Lo	oss	(b) F	Ratio	1 1	Special wance	(d) Subtract column (c) from column (a)
F.NO-204, SRI CHARAN HOMES	E Ln 22	6	,306.	1.000	00000		6,306.	0.
Total	>	6	,306.	1.	00		6,306.	0.
Name of activity	Form or schediand line numb to be reported (see instruction	ule er on	(a) Loss		(b) Ratio		(c)	Unallowed loss
Total						1 00		