Form <b>8879</b>
(Rev. January 2021)
Depertment of the Treesury

#### 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.

Submission Identification Number (SID)

Taxpay	er's name	Social s	ecurity nui	nber	
SRA	VAN KUMAR GURAJALA		106	-63-97	65
Spouse	's name		Spouse	's social se	curity number
Part	Tax Return Information – Tax Year Ending December 31, 20	20 (Ente	r year ye	ou are a	uthorizing.)
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	Adjusted gross income			. 1	108,259.
2	Total tax			. 2	17,090.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			. 3	18,993.
4	Amount you want refunded to you			. 4	1,903.
5	Amount you owe			. 5	

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

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

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

X lauthorize GLOBAL TAXES LLC to enter or generate my PIN

3	9	7	6	5	
			gits, all ze		as my

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date <a>08/17/2021</a>

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

ravan

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►	Date ►	
Practitioner PIN Method	Returns Only—continue below	
Part III Certification and Authentication – Practitic	ner PIN Method Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five	-digit self-selected PIN. 5 8 7 2 7 8 6 1 9 8 9 Don't enter all zeros	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >						
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So						
For Paperwork Reduction Act Notice, see your tax return	instructions. BAA	REV 07/28/21 PRO	Form <b>8879</b> (Rev. 01-2021)			

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

E <b>1040</b>		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) <b>urn</b>	202	20	OMB No. 1545	-0074	IRS Us	e Only	—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly unchecked the MFS box, enter the n son is a child but not your dependent	ame of	-	separately ouse. If you					,		, 0	
Your first name	and m	iddle initial	Last na	ame							Your so	cial securi	ty number
SRAVAN H	CUMA	R	GUR	AJALA							106-	63-976	5
lf joint return, s	oouse's	first name and middle initial	Last na	ame							Spouse	's social se	curity number
Home address 354 S RI		er and street). If you have a P.O. box, see E CV	instruct	ions.					Apt. no. 303		Check	here if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces be	low.	Sta	te	ZIP co	ode				ntly, want \$3
TEGA CAY	ζ					S	2	297	08			low will not	Checking a change
Foreign country	/ name			Foreign p	rovince/stat	e/coun	ty	Foreig	n postal	code		x or refund	•
At any time du	ring 20	020, did you receive, sell, send, excl	nange, o	or otherv	vise acqui	re any	financial intere	est in a	ıny virtı	ial cu	rrency?		X No
Standard Deduction Age/Blindness		eone can claim:	n or you		dual-statu			rn befo	ore Jani	uary 2	2, 1956	🗌 ls b	lind
Dependents	s (see	instructions):		(2)	Social secu	rity	(3) Relationsh	nip	(4)	/ if q	ualifies fo	or (see instru	ictions):
If more		irst name Last name			number	,	to you	.		tax c		1	her dependents
than four													
dependents,													
see instructions and check	5												
here 🕨 🗌													
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2 .							. 1	1	21,787.
Attach	2a	Tax-exempt interest	2a			bТ	axable interes	t.			. 2t	)	
Sch. B if required.	3a	Qualified dividends	3a			bC	Ordinary divide	nds .			. 3b	)	
	4a	IRA distributions	4a			bΤ	axable amoun	t			. 4t	<b>)</b>	
	5a	Pensions and annuities	5a			bΤ	axable amoun	t			. 5t	)	
Standard	6a	Social security benefits	6a			bТ	axable amoun	t			. 6k	>	
<ul> <li>Deduction for –</li> <li>Single or</li> </ul>	7	Capital gain or (loss). Attach Schee	dule D i	f require	d. If not re	quired	, check here				7		-1,598.
Married filing	8	Other income from Schedule 1, lin	e9.								. 8		11,630.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. <sup>-</sup>	This is yo	our <b>total ir</b>	icome					▶ 9	1	08,559.
Married filing	10	Adjustments to income:					1						
Jointly or Qualifying	а	From Schedule 1, line 22					10	а					
widow(er), \$24,800	b	Charitable contributions if you take	the sta	ndard de	duction. S	ee inst	ructions 10	b		30	0.		
<ul> <li>Head of</li> </ul>	С	Add lines 10a and 10b. These are	your <b>to</b>	tal adjus	stments to	o incol	me				► <u>10</u>		300.
household, \$18,650	11	Subtract line 10c from line 9. This	is your	adjusteo	d gross in	come					► <u>1</u> 1		08,259.
<ul> <li>If you checked any box under [</li> </ul>	12	Standard deduction or itemized		•		,						2	12,400.
Standard	13	Qualified business income deduction	on. Atta	ach Forn	n 8995 or l	Form 8	995-A				. 13	3	
Deduction, see instructions.	14	Add lines 12 and 13											12,400.
	15	Taxable income. Subtract line 14	from lir	ne 11. lf :	zero or les	s, ente	er-0				. 15	5	95,859.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2020)

Form 1040 (2020	))								Page
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		. 10	<b>6</b> 17,090.
	17	Amount from Schedule 2, lin	ne3					. 1	7
	18	Add lines 16 and 17						. 18	8 17,090.
	19	Child tax credit or credit for	other dependen	ts				. 19	9
	20	Amount from Schedule 3, lin	ne7					. 2	.0
	21	Add lines 19 and 20						. 2	.1
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. 2	17,090.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .			. 23	<b>3</b> 0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					▶ 24	4 17,090.
	25	Federal income tax withheld							
	а	Form(s) W-2				25a	18,9	93.	
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						. 25	5d 18,993.
• If you have a	26	2020 estimated tax payment						. 20	6
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27			
If you have	28	Additional child tax credit. A	ttach Schedule	8812		28			
nontaxable combat pay,	29	American opportunity credit	from Form 8863	8, line 8		29			
see instructions.	30	Recovery rebate credit. See	instructions .			30			
	31	Amount from Schedule 3, lin	ne 13			31			
	32	Add lines 27 through 31. The	ese are your <b>tot</b> a	al other paym	ents and refund	able credits		► 3	2
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				▶ 3	<b>3</b> 18,993.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	int you <b>overp</b>	aid.	. 34	4 1,903.
	35a	Amount of line 34 you want			is attached, che	ck here .	🕨	· 🗌 🛛 35	5a 1,903.
Direct deposit?	►b	Routing number 1 1 1			► c Type: 🛛	Checking	Sav	vings	
See instructions.	►d	Account number 5 8 6	0 3 5 1	7 5 2 7	7 5				
	36	Amount of line 34 you want a	applied to your	2021 estimate	ed tax 🕨	36			
Amount	37	Subtract line 33 from line 24	. This is the <b>amo</b>	ount you owe	now			▶ 3	7
You Owe		Note: Schedule H and Sch	edule SE filers,	line 37 may n	ot represent all	of the taxes	you owe	e for	
For details on how to pay, see		2020. See Schedule 3, line 1	2e, and its instr	uctions for det	ails.				
instructions.	38	Estimated tax penalty (see in	nstructions) .		🕨	38			
Third Party		you want to allow another					-		
Designee		structions				. ► 🗌 Ye			
		signee's me ►		Phone no.			Personal number (	identificati	on
Ciana		der penalties of perjury, I declare t	hat I have examine			nedules and st	,	( <i>)</i>	best of my knowledge ar
Sign		lief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation			If the IRS	sent you an Identity
		·							n PIN, enter it here
Joint return?					SECURITY			(see inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupa	tion			sent your spouse an Protection PIN, enter it her
your records.								(see inst.)	
	Ph	one no. (936)213-144	4	Email address	SRAVANKUMAI	RG05@GMAT			
		eparer's name	Preparer's signat		CIGINI MICOUM	Date		ΓΙΝ	Check if:
Paid	RV	SSMANIKUMARAPPANA	RVSSMANIK		JA	08/17/2	)21 PO	209033	
Preparer		m's name ► GLOBAL TA							o. (646)727-7157
Use Only		m's address ► 2530 Pebb		n Cummina	a GA 30041			Firm's EI	
Go to www.irs.or		n1040 for instructions and the late			BAA	REV 07/28/2		1 · 0 En	Form <b>1040</b> (202
			st mornation.		DAA	ILL V U1/28/2	LI FILU		10111 10-10 (202

BAA

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
SRAVAN KUMAR GURAJALA	106-63-9765
Part I Additional Income	

	Additional moomo		
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	-11,645.
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 15.	8	15.
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	-11,630.
Par		•	
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 <b>adjustments to income.</b> Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 07/28/21 PRO	Schedul	e 1 (Form 1040) 2020

# SCHEDULE D

(Form 1040)

## **Capital Gains and Losses**

OMB No. 1545-0074

20

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.

Attachment Sequence No. **12** 

20

Internal Revenue Service (99) Name(s) shown on return

Department of the Treasury

SRAVAN KUMAR GURAJALA

Your social security number

106-63-9765

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.	

### Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, I line 2, column	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result 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 <b>Box A</b> checked	7,367.	8,965.			-1,598.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1		5			
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	Carryover	6	( )		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	7	-1,598.			

### Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions)

lines This	e instructions for how to figure the amounts to enter on the as below. s form may be easier to complete if you round off cents to ole dollars. (d) (e) (c) (c) Adjustment to gain or loss (sales price) (or other basis) (or other basis)		from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and 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 <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
<b>11</b> Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824						
<ul> <li>12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1</li> <li>13 Capital gain distributions. See the instructions</li> </ul>						
<ul> <li>14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions</li> </ul>						( )
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	0	() ()		15	

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	<b>16</b> -1,598	· .
	• 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?		
	<b>No.</b> 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	<ul> <li>Are lines 18 and 19 both zero or blank and are you not filing Form 4952?</li> <li>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.</li> </ul>		
	□ 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 smaller of:		
	<ul> <li>The loss on line 16; or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	<b>21</b> ( 1,598.	. )
	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?		
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.		
	X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

REV 07/28/21 PRO

Schedule D (Form 1040) 2020

Form <b>8949</b>
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Department of the Treasury

Internal Revenue Service

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

OMB No. 1545-0074

20

(0)

► 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.

of Schedule D. Attachment Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number			
SRAVAN KUMAR GURAJALA	106-63-9765			

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

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

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

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis. See the <b>Note</b> 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.		If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		g), (h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	quired disposed of (sales price) and see Column (	in the separate	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)				
Robinhood Securities LLC	12/31/20	04/12/20	1,584.	1,569.			15.			
APEX CLEARING	12/31/20	08/17/20	5,783.	7,396.			-1,613.			
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	7,367.	8,965.			-1,598.			

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

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

	Revenue Service (99)	► Go to www.irs	s.gov/ScheduleE fo	or inst	ructions	and th	e latest	informatior	ı.	Attach Seque	nment ence No. <b>13</b>
Name(s)	shown on return								Your soc		y number
SRAV	AN KUMAR GURAJA	ALA							106-6	3-976	5
Part	Income or Loss	s From Rental Rea	al Estate and Ro	yaltie	s Note	e: If you	are in th	e business (	of renting pe	ersonal pr	operty, use
	Schedule C. See	instructions. If you a	e an individual, rep	ort farı	m rental	income	or loss f	rom Form 4	<b>835</b> on page	e 2, line 4	0.
A Dic	l you make any payme	ents in 2020 that wo	ould require you to	file F	orm(s) 1	099? 8	See insti	uctions .		. 🗆 ۱	ſes 🔀 No
<b>B</b> If "	Yes," did you or will yo	ou file required For	m(s) 1099?							. 🗆 ۱	ſes 🗌 No
1a	Physical address of										
Α	MADHAPUR HYDER	RABAD IN									
В											
С											
1b	Type of Property	2 For each ren	tal real estate prop	oerty l	isted		Fair	Rental	Persona	I Use	QJV
	(from list below)	above, repor	t the number of fa days. Check the	ir rent	al and			Days	Day	S	
Α	1	if you meet t	he requirements to	o file a	sa	Α		365		0	
В		qualified join	t venture. See inst	ructio	ns.	В					
С						С					
Гуре с	of Property:										
I Sing	le Family Residence	3 Vacation/Sh	ort-Term Rental	5 La	nd		7 Self-	Rental			
2 Mult	i-Family Residence	4 Commercial		6 Ro	yalties		8 Othe	r (describe	2)		
ncom	e:		Properties:			Α		I	3		С
3	Rents received			3			450.				
4	Royalties received .			4							
Expen											
5	Advertising			5							
6	Auto and travel (see i	nstructions)		6			860.				
7	Cleaning and mainter	nance		7		2,	,875.				
8	Commissions			8							
9	Insurance			9							
10	Legal and other profe			10							
11	Management fees .			11							
12	Mortgage interest pai			12							
13	Other interest			13							
14	Repairs			14		2	,775.				
15	Supplies			15			,460.				
16	Taxes			16							
17	Utilities			17		4	,125.				
18	Depreciation expense			18							
19	Other (list) ►	-		19							
20	Total expenses. Add	lines 5 through 19		20		12,	,095.				
21	Subtract line 20 from	-									
	result is a (loss), see	( )									
	file <b>Form 6198</b>			21		-11,	,645.				
22	Deductible rental real	l estate loss after l	imitation, if any.								
	on Form 8582 (see in			22	(	-11,	645.)	(	)	(	
23a	Total of all amounts r		or all rental prope	rties			23a		450.		
b	Total of all amounts r						23b				
с	Total of all amounts r	eported on line 12	for all properties				23c				
d	Total of all amounts r						23d				
е	Total of all amounts r						23e		12,095.		
24	Income. Add positiv								. 24		
25	Losses. Add royalty lo				-			al losses he		(	11,645.
26	Total rental real est										
	here. If Parts II, III, I										
	Schedule 1 (Form 104										-11,645.

**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.

For Paperwork Reduction Act Notice, see the separate instructions.

SCHEDULE E

Department of the Treasury

(Form 1040)

Schedule E (Form 1040) 2020

OMB No. 1545-0074

2

Attachment

S	2592	Passive Activity Loss Limitations	0	MB No. 1545-1008
Form <b>8582</b> Passive Activity Loss Limitations > See separate instructions.		-		20 <b>20</b>
Departm	ent of the Treasury	Δ		
Internal	S	equence No. 858		
Name(s	) shown on return		Identifying n	
	VAN KUMAR G		106-63-	9765
Part		ssive Activity Loss		
		Complete Worksheets 1, 2, and 3 before completing Part I.		
		Activities With Active Participation (For the definition of active participation, s	ee	
-		or Rental Real Estate Activities in the instructions.)		
-			0.	
b c		net loss (enter the amount from Worksheet 1, column (b)) <b>1b</b> ( 11,64 allowed losses (enter the amount from Worksheet 1, column (c)) <b>1c</b> (	)	
d	-		, 1d	-11,645.
		zation Deductions From Rental Real Estate Activities	. 10	-11,045.
2a		evitalization deductions from Worksheet 2, column (a)   <b>2a</b>  (		
b		Illowed commercial revitalization deductions from Worksheet 2,		
	column (b)		)	
с	Add lines 2a a		. 2c	( )
All Ot	her Passive Ac	tivities		<u> </u>
3a	Activities with	net income (enter the amount from Worksheet 3, column (a)) . <b>3a</b>		
b	Activities with	net loss (enter the amount from Worksheet 3, column (b)) 3b (	)	
С	Prior years' ur	allowed losses (enter the amount from Worksheet 3, column (c)) 3c (	)	
d	Combine lines	3a, 3b, and 3c	. <b>3d</b>	
4	Combine lines	a 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with yo	our	
		es are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3	3c.	
		ses on the forms and schedules normally used	. 4	-11,645.
	If line 4 is a los			
		• Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part I		
Oauti		Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and	-	
		status is married filing separately and you lived with your spouse at any time during ad, go to line 15.	j trie year,	do not complete
Part		Allowance for Rental Real Estate Activities With Active Participation		
i ai c		ter all numbers in Part II as positive amounts. See instructions for an example.		
5		Iler of the loss on line 1d or the loss on line 4	. 5	11,645.
6	Enter \$150,00	0. If married filing separately, see instructions	0.	
7		adjusted gross income, but not less than zero. See instructions 7 119,90		
		is greater than or equal to line 6, skip lines 8 and 9, enter -0- on		
	line 10. Other	vise, go to line 8.		
8	Subtract line 7	' from line 6	6.	
9	Multiply line 8	by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instruction	ons <b>9</b>	15,048.
10		<b>Iler</b> of line 5 or line 9	. 10	11,645.
		oss, go to Part III. Otherwise, go to line 15.		
Part		Allowance for Commercial Revitalization Deductions From Rental Real		tivities
		ter all numbers in Part III as positive amounts. See the example for Part II in the instru		
11		reduced by the amount, if any, on line 10. If married filing separately, see instructions		
12				
13 14		2 by the amount on line 10		
Part		Ilest of line 2c (treated as a positive amount), line 11, or line 13	. 14	
15		ne, if any, on lines 1a and 3a and enter the total	. 15	
15		allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instruction		0.
10		v to report the losses on your tax return		11,645.
For Pa				Form <b>8582</b> (2020)
		ION ACT NOTICE, see Instructions. BAA REV 07/28/21 PRO		()

#### Caution: The worksheets must be filed with your tax return. Keep a copy for your records. Worksheet 1-For Form 8582, Lines 1a, 1b, and 1c (see instructions)

	Current year		Prior years	Overall ga	ain or loss
Name of activity	(a) Net income (line 1a)	<b>(b)</b> Net loss (line 1b)	(c) Unallowed loss (line 1c)	<b>(d)</b> Gain	(e) Loss
MADHAPUR	0.	11,645.			11,645.
Total. Enter on Form 8582, lines 1a, 1b,					
and 1c	0.	11,645.			

Worksheet 2-For Form 8582, Lines 2a and 2b (see instructions)

Name of activity	(a) Current year deductions (line 2a)	<b>(b)</b> Prior year unallowed deductions (line 2b)	(c) Overall loss
<b>Total.</b> Enter on Form 8582, lines 2a and 2b			

Worksheet 3-For Form 8582, Lines 3a, 3b, and 3c (see instructions)

Name of activity	Currer	nt year	Prior years	Overall gain or loss	
	<b>(a)</b> Net income (line 3a)	<b>(b)</b> Net loss (line 3b)	(c) Unallowed loss (line 3c)	<b>(d)</b> Gain	(e) Loss
<b>Total.</b> Enter on Form 8582, lines 3a, 3b, and 3c					

#### Worksheet 4-Use This Worksheet if an Amount Is Shown on Form 8582, Line 10 or 14. See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a)   oss	<b>(b)</b> Ratio	<b>(c)</b> Special allowance	<b>(d)</b> Subtract column (c) from column (a)
MADHAPUR	E Ln 22	11,645.	1.00000000	11,645.	0.
Total		11,645.	1.00	11,645.	0.

### Worksheet 5-Allocation of Unallowed Losses (see instructions)

Name of activity	Form or schedule and line number to be reported on (see instructions)	<b>(a)</b> Loss	<b>(b)</b> Ratio	(c) Unallowed loss
Total			1.00	

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