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

Submiss	ion Identification Number (SID)	
Taxpayer's	name	Social security number
NARAS	IMHA REDDY KAMJULA	079-47-0488
Spouse's n	ame	Spouse's social security number
Part I	Tax Return Information — Tax Year Ending December 31, (Enter	year you are authorizing.)
	nole dollars only on lines 1 through 5.	year you are authorizing.)
	orm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
		94,972.
	djusted gross income	2 13,952.
	otal tax	
		15,251.
	mount you want refunded to you	4 1,500.
	mount you owe	
Part II	nalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)	
return (ori to send m for any de Agent to i payment authorizat payment, business taxes to personal i	ledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above ginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transminy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectary in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indictor 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 terminate I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation required days prior to the payment (settlement) date. I also authorize the financial institutions involved in the preceive confidential information necessary to answer inquiries and resolve issues related to the payment (FIN) below is my signature for the income tax return (original or amended) I and Funds Withdrawal Consent.	ter, or electronic return originator (ERO) ction of the transmission, (b) the reason S. Treasury and its designated Financial cated in the tax preparation software for to debit the entry to this account. This the authorization. To revoke (cancel) a ests must be received no later than 2 processing of the electronic payment of ayment. I further acknowledge that the
	er's PIN: check one box only	
	l authorize GLOBAL TAXES LLC to enter or generate r	ov PIN 7 0 4 8 8 3c my
	Signature on the income tax return (original or amended) I am now authorizing.	Enter five digits, but don't enter all zeros
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN method below.	
Your sign	nature ▶ Date ▶	
Spouse'	s PIN: check one box only	
	I authorize to enter or generate r	
	ERO firm name	Enter five digits, but don't enter all zeros
	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 no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.	
Spouse's	s signature ▶ Date ▶	
орошоо .	Practitioner PIN Method Returns Only—continue below	
Part III		
ERO's E	FIN/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
authorized	nat the above numeric entry is my PIN, which is my signature for the electronic individual income tard to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Incompany 1988.	tting this return in accordance with the
FRO's si	gnature ▶ Date ▶	
	ERO Must Retain This Form — See Instructions	

Don't Submit This Form to the IRS Unless Requested To Do So

E 1040 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 Check only one box.		Single Married filing jointly uchecked the MFS box, enter the r		d filing separately (Nour spouse. If you cl							
—————	pers	on is a child but not your dependen	t ►								
Your first name and middle initial Last				ne				Your so	Your social security number		
NARASIM	HA R	EDDY	KAMJ	ULA				079-	079-47-0488		
If joint return, s	pouse's	first name and middle initial	Last nar	ne				Spouse	Spouse's social security number		
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.			Apt. no.	Preside	ntial Election	on Campaign	
18418 B	RIDL	E CLUB DR							here if you,		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete sp	paces below.	State	ZIP	code	-	9.	ntly, want \$3	
TAMPA					FL	3.	3647		to go to this fund. Checking a box below will not change		
Foreign countr	y name		F	oreign province/state/c	county	For	reign postal cod	e your ta	x or refund.	. Spouse	
At any time du	ırina 20	20, did you receive, sell, send, exc	hange, o	r otherwise acquire	anv financial	interest in	n anv virtual (currency?		⊠ No	
		eone can claim: You as a de									
Standard Deduction	_	Spouse itemizes on a separate retur				AGIIL					
		Were born before January 2, 1				es horn h	efore Januar	, 2 1956	☐ Is bli	ind	
Dependent	-			(2) Social security		tionship			r (see instru		
•	•	First name Last name number to you Child tax credit						I	her dependents		
If more than four	(1)	Tat name					Orma tax	orcan	10 101 110010		
dependents,							-			=	
see instruction and check	s —										
here ▶										=	
	· 1	Wages, salaries, tips, etc. Attach I	Form(s) V	V-2				. 1	1 10	00,244.	
Attach		1	2a		b Taxable in	 tarast		2h		70 / 2 1 1 1	
Sch. B if	3a		3a	4.0	b Ordinary of			3b		43.	
required.	4a		4a		b Taxable ar			. 4b	,		
-	5a		5a		b Taxable ar			. 5b			
Standard	6a	Social security benefits	6a		b Taxable ar	mount .		. 6b	,		
Deduction for —	7	Capital gain or (loss). Attach Sche	dule D if	required. If not requ	ired, check h	ere .	•	□ 7		4,835.	
Single or Married filing	8	Other income from Schedule 1, lin	e9.					. 8	_	-9,850.	
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your total inco	me			▶ 9		95,272.	
Married filing	10	Adjustments to income:									
jointly or Qualifying	а	From Schedule 1, line 22				10a					
widow(er),	b	Charitable contributions if you take	the stan	dard deduction. See	instructions	10b	3	00.			
\$24,800 • Head of	С	Add lines 10a and 10b. These are						▶ 10	С	300.	
household, \$18,650	11	Subtract line 10c from line 9. This		•				▶ 11		94,972.	
If you checked	12	Standard deduction or itemized		-				. 12	: .	12,400.	
any box under Standard	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A							3		
Deduction, see instructions.	14	Add lines 12 and 13						. 14		12,400.	
Joe manuchons.	15	Taxable income. Subtract line 14	from line	e 11. If zero or less,	enter -0			. 15	5 8	82,572.	

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

Form **1040** (2020)

Form 1040 (2020)			Page 2
	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🔲 4972 3 🔲	16	13,952.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	13,952.
	19	Child tax credit or credit for other dependents	19	
	20	Amount from Schedule 3, line 7	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	13,952.
	23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	0.
	24	Add lines 22 and 23. This is your total tax	24	13,952.
	25	Federal income tax withheld from:		
	a	Form(s) W-2	- !	
	b	Form(s) 1099		
	С	Other forms (see instructions)	25.1	15 251
	d	Add lines 25a through 25c	25d	15,251.
 If you have a qualifying child, 	26	2020 estimated tax payments and amount applied from 2019 return	26	
attach Sch. EIC.	27	Earned income credit (EIC)		
If you have nontaxable	28	Additional child tax credit. Attach Schedule 8812	-	
combat pay,	29	American opportunity credit from Form 8863, line 8	4 1	
see instructions.	30	Amount from Schedule 3, line 13	-	
	31 32	Add lines 27 through 31. These are your total other payments and refundable credits	32	201.
	33	Add lines 27 through 31. These are your total other payments and refundable credits	33	15,452.
	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,500.
Refund	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	1,500.
Direct deposit?	⊳ b	Routing number X X X X X X X X X X X X X X X X X X X	55a	1,300.
See instructions.	►d	Account number X X X X X X X X X		
	36	Amount of line 34 you want applied to your 2021 estimated tax		
Amount	37	Subtract line 33 from line 24. This is the amount you owe now	37	
You Owe	•	Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for		
For details on		2020. See Schedule 3, line 12e, and its instructions for details.		
how to pay, see instructions.	38	Estimated tax penalty (see instructions)		
Third Party	Do	you want to allow another person to discuss this return with the IRS? See		
Designee	ins	tructions	selow.	X No
		signee's Phone Personal identi		
<u></u>		ne ► no. ► number (PIN) I		A = 6 === 1 == === == == == == == == == == ==
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		
Here	You	ur signature Date Your occupation If the	RS ser	nt you an Identity
	k.	Prote		N, enter it here
Joint return?	—	BOITWING BEVEROTER	inst.) ►	
See instructions. Keep a copy for	Spe			nt your spouse an ection PIN, enter it here
your records.			inst.) ▶	
	Pho	one no. Email address		
Doid	Pre	parer's name Preparer's signature Date PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/22/2021 P0208	2703	Self-employed
Preparer Use Only	Firr	n's name ► GLOBAL TAXES LLC Phor	ne no. (678)965-9522
Use Only	Firr	m's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Firm	's EIN ▶	30-1017196
Go to www.irs.go	v/Forn	n1040 for instructions and the latest information. BAA REV 02/15/21 PRO		Form 1040 (2020)

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

NARASIMHA REDDY

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

KAMJULA

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

Your social security number 079-47-0488

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2 a	Alimony received	2 a	
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	-9,850.
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	0 050
Par	t II Adjustments to Income	9	-9,850.
		40	
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)

Department of the Treasury

Internal Revenue Service (99)

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

2020

Attachment Sequence No. **12**

Name(s) shown on return Your social security number 079-47-0488 NARASIMHA REDDY KAMJULA 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) Form(s) 8949, Part I, combine the result (or other basis) 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 35,512. 40,347. 4,835. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked 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 4,835. 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 (loss) (g) Adjustments Subtract column (e) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 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 Totals for all transactions reported on Form(s) 8949 with Box E checked . 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15

BAA

Schedule D (Form 1040) 2020 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 4,835. • 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 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.

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 Attachment Sequence No. 12A

Department of the Treasury

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

Internal Revenue Service Social security number or taxpayer identification number 079-47-0488 NARASIMHA REDDY KAMJULA 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 broker and may even tell you which box to check. 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 Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (e) (h) Cost or other basis enter a code in column (f). Gain or (loss). (d) (c) (a) (b) See the separate instructions. Date sold or Proceeds See the **Note** below Subtract column (e) Description of property Date acquired disposed of and see Column (e) (sales price) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (see instructions) combine the result (Mo., day, yr.) in the separate (a) Code(s) from Amount of adjustment instructions with column (a) instructions 06/26/20 07/30/20 40,347 35,512. 4,835.

ROBINHOOD SECURITIES LLC 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) ▶ 40,347. 35,512. 4,835.

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.

REV 02/15/21 PRO

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

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

OMB No. 1545-0074

Attachment Sequence No. **13**

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

Your social security number

NARA	SIMHA REDDY KA	MJULA						07	9-47-04	88	
Part	Income or Loss	s From Rental Real Estate and Ro	yaltie	s Note	: If you	are in th	e business o	f renti	ng personal	property, us	se
	Schedule C. See	instructions. If you are an individual, rep	ort far	m rental i	ncome	or loss fi	rom Form 48	35 on	page 2, line	40.	
A Dic	d you make any payme	nts in 2020 that would require you to	o file F	orm(s) 1	099? S	ee instr	uctions .		🗆	Yes X I	No
B If "	f "Yes," did you or will you file required Form(s) 1099?									Yes 🗌 l	No
1a	Physical address of	each property (street, city, state, ZIF	P code	e)							
Α	HYD HYDERABAD	IN									
В										47	
С										7	
1b	Type of Property	2 For each rental real estate pro	pertv l	listed		Fair	Rental	Pers	sonal Use	QJV	,
	(from list below)	above, report the number of fa personal use days. Check the if you meet the requirements to	ir rent	al and			Days		Days	QJV	,
Α	3	if you meet the requirements to	o file a	oox only as a	Α		365		0		
В		qualified joint venture. See ins	tructio	ns.	В			, _			
С					С	_		7			
Туре	of Property:										
	gle Family Residence	3 Vacation/Short-Term Rental	5 La	ınd	•	7 Self-	Rental				
	ti-Family Residence	4 Commercial	6 Ro	oyalties		8 Othe	r (describe)				
Incom		Properties:		ĺ	A		В			С	
3	Rents received		3	1		450.					
4			4								
Expen	ses:						>				
5			5								
6		nstructions)	6			300.					
7	,	nance	7			800.					
8	•		8								
9			9								
10		essional fees	10								
11	-		11		1.	100.					
12	-	id to banks, etc. (see instructions)	12								
13			13	7	1.	500.					
14			14			600.					
15			15			000.					
16			16								
17			17		3,	000.					
18		e or depletion	18								
19	Other (list)	·	19								
20		lines 5 through 19	20		10,	300.					
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If									
		instructions to find out if you must									
	file Form 6198		21		-9,	850.					
22	Deductible rental rea	I estate loss after limitation, if any,									
	on Form 8582 (see in	structions)	22	(-9,8	350.)	()()
23a	Total of all amounts r	eported on line 3 for all rental prope	erties			23a		45	50.		
b	Total of all amounts r	eported on line 4 for all royalty prop	erties			23b					
С		eported on line 12 for all properties				23c					
d	Total of all amounts r	eported on line 18 for all properties				23d					
е		eported on line 20 for all properties				23e	1	0,30	00.		
24	Income. Add positiv	e amounts shown on line 21. Do no	t incl	ude any	losses				24		
25	Losses. Add royalty lo	sses from line 21 and rental real estate	e losse	s from li	ne 22. E	nter tota	al losses her	e . 「	25 (9,85	0.)
26	Total rental real est	ate and royalty income or (loss).	Comh	oine lines	s 24 an	d 25. F	nter the res	sult			
		V, and line 40 on page 2 do not									
		40), line 5. Otherwise, include this a		-					26	-9,8	50.

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

NARASIMHA REDDY KAMJULA Identifying number 079-47-0488

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		
Speci	ial Allowance for Rental Real Estate Activities in the instructions.)		
1a	Activities with net income (enter the amount from Worksheet 1, column (a)) . 1a 0.		
b	Activities with net loss (enter the amount from Worksheet 1, column (b)) 1b (9,850.)		
С	Prior years' unallowed losses (enter the amount from Worksheet 1, column (c))		
d	Combine lines 1a, 1b, and 1c	1d	-9,850.
Comr	mercial Revitalization Deductions From Rental Real Estate Activities		
2a	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 ()
All Ot	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)) 3b (
С	Prior years' unallowed losses (enter the amount from Worksheet 3, column (c)) 3c (
d	Combine lines 3a, 3b, and 3c	3d	
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	-9,850.
	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 	_	
	on: If your filing status is married filing separately and you lived with your spouse at any time during the	year,	do not complete
	l or Part III. Instead, go to line 15.		
Part			
	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	9,850.
6	Enter \$150,000. If married filing separately, see instructions		
7	Enter modified adjusted gross income, but not less than zero. See instructions 7 104,822.		
	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	22,589.
10	Enter the smaller of line 5 or line 9	10	9,850.
	If line 2c is a loss, go to Part III. Otherwise, go to line 15.		
Part			tivities
	Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instruction	is.	
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	Reduce line 12 by the amount on line 10	13	
14	Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14	
Part			
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		
	to find out how to report the losses on your tax return	16	9,850.

Caution: The worksheets must be filed v				for your	record	S.			
Worksheet 1—For Form 8582, Lines 1	a, 1b, and 1c (se	e instruction	ons)						
No. of a ski dk.	Currer	Prior years		Overall gain or loss					
Name of activity	(a) Net income (line 1a)		(b) Net loss (line 1b)		(c) Unallowed loss (line 1c)		Gain	(e) Loss	
HYD	0.	9,8	50.					9,850.	
Total. Enter on Form 8582, lines 1a, 1b, and 1c ▶	0.		50.						
Worksheet 2—For Form 8582, Lines 2	a and 2b (see ins	structions)							
Name of activity	(a) Current deductions (unall	(b) Prid owed dedu	or year actions (line 2b)	(c)	Overall loss	
Total. Enter on Form 8582, lines 2a and 2b ▶									
Worksheet 3—For Form 8582, Lines 3	a, 3b, and 3c (se	ee instructio	ns)						
Name of activity	Currer	nt year	Prio		ears		Overall ga	erall gain or loss	
Numb of douvity	(a) Net income (b) Net lo (line 3a)			(c) Unallowed loss (line 3c)		(d) Gain		(e) Loss	
Total. Enter on Form 8582, lines 3a, 3b, and 3c ▶									
Worksheet 4—Use This Worksheet if a	n Amount Is Sh	own on Fo	rm 8	582, Line	10 or	14. See	instruction	ons.	
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	6	(b) Ra	(c) Special allowance			(d) Subtract column (c) from column (a)	
HYD	E Ln 22	9,8	50.	1.0000	0000 9		9,850.	0.	
Total		9,8	350.	1.00		9,850.		0.	
Worksheet 5—Allocation of Unallowed	d Losses (see in	structions)				•			
Name of activity	Form or schedu and line numb to be reported (see instruction	er on	(a) Lo	ss (b) Ratio		(c)	Unallowed loss		
Total						1 00			