£1040

Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return

2020

OMB No. 1545-0074

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

Filing Status Check only one box.	If yo	Single Married filing jointly u checked the MFS box, enter the son is a child but not your dependent	name of									
Your first name and middle initial Last name								Your	Your social security number			
VENKATA	K.S	.VARMA	UPPA	ALAPATI					705	705-49-6845		
If joint return, s	pouse's	s first name and middle initial	Last na	me					Spous	Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box, se	e instructi	ons.				Apt. no.	- 1	dential Elec		
306 ZOL							_	H		k here if yo		
		ce. If you have a foreign address, also c	omplete s	paces below.	State ZIP code				spouse if filing jointly, want \$3 to go to this fund. Checking a			
WARRENS					M		+	4093		box below will not change your tax or refund. You Spouse		
Foreign country	/ name			Foreign province/stat	e/coun	ty	For	eign postal cod	e your t			
At any time du	ring 20	020, did you receive, sell, send, exc	change, c	or otherwise acquir	e any	financial inter	est ir	n any virtual	currency	?	s X	No
Standard Deduction		eone can claim:										
Age/Blindness	You:	Were born before January 2,	1956	Are blind S	pouse	: Was bo	orn be	efore Januar	, 2, 1956	i ☐ Is	blind	
Dependents	s (see	instructions):		(2) Social secur	itv	(3) Relations	hip	(4) 🗸 if	qualifies	for (see inst	tructions	 s):
If more		irst name Last name		number to you				Child tax		Credit for		
than four												
dependents,												
see instruction and check	s —											
here ►												
	1_	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1	81,8	831.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	st		. 2	2b		
Sch. B if required.	За	Qualified dividends	3a		b C	ordinary divide	ends		. 3	Bb		15.
required.	4a	IRA distributions	4a		b T	axable amou	nt .		. 4	lb		
	5a	Pensions and annuities	5a		b T	axable amou	nt .		. 5	5b		
Standard	6a	Social security benefits	6a		b T	axable amou	nt .		. 6	3b		
Deduction for—	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								7	19,6	625.
Single or Married filing	8								. :	8	-6,5	500.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8. T	his is your total in	come				> _ !	9	94,9	971.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22				10)a					
widow(er), \$24,800	b	Charitable contributions if you take the standard deduction. See instructions 10b										
Head of	С	Add lines 10a and 10b. These are	your to t	tal adjustments to	inco	me			▶ 10	0с		
household, \$18,650	11	Subtract line 10c from line 9. This	s is your a	adjusted gross in	come				▶ 1	11	94,9	971.
If you checked	12	Standard deduction or itemized	d deduct	ions (from Schedu	le A)				. 1	12	12,4	400.
any box under Standard	13	Qualified business income deduc	tion. Atta	ach Form 8995 or F	orm 8	995-A			. 1	13		
Deduction, see instructions.	14	Add lines 12 and 13							. 1	14		400.
	15	Taxable income. Subtract line 1	4 from lin	e 11. If zero or less	s, ente	r-0			. 1	15	82,5	571.

Form 1040 (2020))									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	13,957.
	17	Amount from Schedule 2, lin	e3				 .	[17	
	18	Add lines 16 and 17						[18	13,957.
	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	13,957.
	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 total tax					. ▶	24	13,957.
	25	Federal income tax withheld	from:							
	а	Form(s) W-2				25a	12,9	57.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c	•						25d	12,957.
	26	2020 estimated tax payment						-	26	,
 If you have a L qualifying child, 	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit. A				28		$\neg \neg$		
nontaxable	29	American opportunity credit				29		$\neg \neg$		
combat pay, see instructions.	30	Recovery rebate credit. See		•		30				
	31	Amount from Schedule 3, lin				31				
	32	Add lines 27 through 31. The							32	
	33	Add lines 25d, 26, and 32. T	,					- +	33	12,957.
	34	If line 33 is more than line 24	-						34	12,757.
Refund	35a								35a	
Direct deposit?	> b									
See instructions.	►d									
	36	Amount of line 34 you want a								
Amarint		•	• • • • • • • • • • • • • • • • • • • •						27	1,000.
Amount You Owe	37	Subtract line 33 from line 24		•					37	1,000.
For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for								
how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details. Estimated tax penalty (see instructions)								
instructions.	38					38				
Third Party		you want to allow another	•				s. Com	nlata ba	بدما	V No.
Designee				Phone		. ► <u> </u> Ye		•		X No
		signee's me ▶		no.			number	l identific (PIN) ►	ation	
Sign	Un	der penalties of perjury, I declare t	hat I have examine		d accompanying sch	nedules and sta	itements.	and to the	ne bes	t of my knowledge and
•		lief, they are true, correct, and com								
Here	Yo	ur signature		Date	Your occupation			If the II	RS ser	nt you an Identity
	k									N, enter it here
Joint return?				SOFTWARE ENGINEER					st.) ►	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat	tion		1		nt your spouse an ection PIN, enter it here
your records.								(see in	· .	Solion i int, cinter it nore
	Ph	one no. (312)608-588	 5	Email address	NANI6006@	GMATI, CC	M	1		
-		eparer's name	Preparer's signat	l .	11711110000	Date		TIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM	,		GIIDTA TAT.T.AM			02082	703	Self-employed
Preparer		m's name ► GLOBAL TAX		TOTAL DOOM	COLITY TABLAN	. 0 / 2 / 2 /	, <u> </u>	1		678)965-9522
Use Only		m's address > 2530 Pebb		n Cummin	a GA 30041			Firm's		
Co to warming and				Cammin		DE) / 00/57	4 DDC	1 1 11111 5		
GO TO WWW.Irs.go	JV/FOR	n1040 for instructions and the late	st iniormation.		BAA	REV 08/30/2	T PRO			Form 1040 (2020)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

VENE	KATA K.S.VARMA UPPALAPATI 7	705-49-	-6845	5
Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received	. 2	а	
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	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedu	le E	5	-6,500.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income. List type and amount ▶			
		<u> </u>	3	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-line 9		9	6 500
Par	t II Adjustments to Income		9	-6,500.
10	Educator expenses	4	0	
11	Certain business expenses of reservists, performing artists, and fee-basis government			
••	officials. Attach Form 2106	I	1	
12	Health savings account deduction. Attach Form 8889	. 1	2	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	. 1	3	
14	Deductible part of self-employment tax. Attach Schedule SE	. 1	4	
15	Self-employed SEP, SIMPLE, and qualified plans	. 1	5	
16	Self-employed health insurance deduction	. 1	6	
17	Penalty on early withdrawal of savings	. 1	7	
18a	Alimony paid	. 18	За	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions) ▶			
19	IRA deduction		9	
20	Student loan interest deduction	. 2	0	
21	Tuition and fees deduction. Attach Form 8917	. 2	1	
22	Add lines 10 through 21. These are your adjustments to income. Enter here a on Form 1040, 1040-SR, or 1040-NR, line 10a	I .	2	

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 705-49-6845 VENKATA K.S.VARMA UPPALAPATI

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 Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 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 198,282. 179,247. 590. 19,625. 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 19,625. 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) (d) (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

Schedule D (Form 1040) 2020 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 19,625. • 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. 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 gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ 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 Internal Revenue Service Name(s) shown on return

Social security number or taxpayer identification number

705-49-6845

VENKATA K.S. VARMA UPPALAPATI

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

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 Part I 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). (h) enter a code in column (f). Cost or other basis Gain or (loss). (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired disposed of (sales price) and see Column (e. from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions 01/01/20 Robinhood Securities LLC 09/08/20 191,335. 173,840. W 590 18,085. APEX CLEARING 04/21/20 04/27/20 498. 473. 25. Ameritrade 01/01/20 12/16/20 6,449. 4,934 1,515.

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) ▶ 198,282. 179,247. 590. 19,625.

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.

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

17ENTE	ATA K.S.VARMA U	יייי ארז						7/	05-49-68	215
Part		From Rental Real Estate and Roy	valtice	Noto	If you c	ro in the	husinoss o			-
ган		instructions. If you are an individual, repo								
A Dic		nts in 2020 that would require you to								
		ou file required Form(s) 1099?								
1a		each property (street, city, state, ZIP			· ·	· ·		•		163 140
A	-	PERABAD TELANGANA IN 5000		'						
	Kukacpaily Hil	EKABAD IELANGANA IN 5000	703							
C										
1b	Type of Property (from list below)							Per	sonal Use Days	QJV
Α	3	personal use days. Check the (if you meet the requirements to	QJV bo	only_	Α	365			0	
В		qualified joint venture. See insti	ruction	s.	В					
С					С					
Туре	of Property:									
1 Sing	gle Family Residence	3 Vacation/Short-Term Rental	5 Lan	d	7	7 Self-l	Rental			
2 Mul	ti-Family Residence	4 Commercial	6 Roy	alties	8	Othe	r (describe)			
Incom	ie:	Properties:			Α		В	3		С
3	Rents received		3		(550.				
4			4							
Expen										
5	Advertising		5							
6	Auto and travel (see in	nstructions)	6							
7		nance	7		1,5	500.				
8	Commissions		8							
9	Insurance		9							
10		ssional fees	10							
11	Management fees .		11							
12	Mortgage interest pai	d to banks, etc. (see instructions)	12							
13	Other interest		13							
14			14			350.				
15	Supplies		15		1,8	300.				
16			16							
17			17		2,0	000.				
18		e or depletion	18							
19	Other (list)		19							
20	•	lines 5 through 19	20		7,1	150.				
21		line 3 (rents) and/or 4 (royalties). If								
	* **	instructions to find out if you must				- 0 0				
			21		-6,5	500.				
22	on Form 8582 (see in		22 (-6,5	00.)	()()
23a		eported on line 3 for all rental proper				23a		6	50.	
b		eported on line 4 for all royalty prope				23b				
C		eported on line 12 for all properties				23c				
d		eported on line 18 for all properties				23d				
e		eported on line 20 for all properties				23e		7,1		
24	•	e amounts shown on line 21. Do not		-					24	6 · ·
25		sses from line 21 and rental real estate							25 (6,500.)
26		ate and royalty income or (loss).								
		V, and line 40 on page 2 do not a 40), line 5. Otherwise, include this an							26	-6,500.

Passive Activity Loss Limitations

► See separate instructions.

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

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

Identifying number

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

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

VENI	KATA K.S.VARMA UPPALAPATI	7	05-49-	6845
Par	2020 Passive Activity Loss	'		
	Caution: Complete Worksheets 1, 2, and 3 before completing Part I.			
Renta	A Real Estate Activities With Active Participation (For the definition of act	ive participation, see		
	al 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 (6,500.)	
С	Prior years' unallowed losses (enter the amount from Worksheet 1, column (c))	1c ()	
d	Combine lines 1a, 1b, and 1c		1d	-6,500.
Comr	nercial 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)	2b ()	
С	Add lines 2a and 2b		2c	()
All Ot	her 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	le this form with you		
	return; all losses are allowed, including any prior year unallowed losses entered			
	4	-6,500.		
	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 Par 	t II and go to Part III.		
	 Line 3d is a loss (and lines 1d and 2c are zero or more 	e), skip Parts II and III	and go	to line 15.
	on: If your filing status is married filing separately and you lived with your spouse	at any time during the	ne year,	do not complete
	or Part III. Instead, go to line 15.			
Part	II Special Allowance for Rental Real Estate Activities With Active I	Participation		
	Note: Enter all numbers in Part II as positive amounts. See instructions for a	an example.		
5	Enter the smaller of the loss on line 1d or the loss on line 4		5	6,500.
6	Enter \$150,000. If married filing separately, see instructions	6 150,000.		
7	Enter modified adjusted gross income, but not less than zero. See instructions	7 101,471.		
	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	8 48,529.		
9	Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing sepa	rately, see instructions	9	24,265.
10	Enter the smaller of line 5 or line 9		10	6,500.
	If line 2c is a loss, go to Part III. Otherwise, go to line 15.			
Part	III Special Allowance for Commercial Revitalization Deductions Front Programme 1	om Rental Real Es	tate Ac	tivities
	Note: Enter all numbers in Part III as positive amounts. See the example for	Part II in the instructi	ons.	
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separate	ely, 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 .	<u></u> .	14	
Part	IV Total Losses Allowed			
15	Add the income if any on lines 1a and 3a and enter the total		15	Λ

16

16

Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions

Caution: The worksheets must be filed to				/ for your	record	S.				
Worksheet 1—For Form 8582, Lines 1	a, 1b, and 1c (se	e instruction	ns)							
Name of activity	Currer	t year	year Prior		years		Overall gain or loss			
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)		(c) Unallowed loss (line 1c)		(d)	Gain Gain	(e) Loss		
Kukatpally	0.	6,5	00.	-				6,500.		
Total. Enter on Form 8582, lines 1a, 1b,	0	6 5	00.							
and 1c	a and 2b (see ins	structions)	00.							
Name of activity	(a) Current deductions (year		(b) Prior year llowed deductions (line 2b			(c)	Overall loss		
Total. Enter on Form 8582, lines 2a and 2b ▶										
2b	a, 3b, and 3c (se	e instruction	ns)							
Name of a divide	Current year Prior years O				Overall g	verall gain or loss				
Name of activity	(a) Net income (line 3a)				llowed ne 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	e 10 or	14. See	instructi	ons.		
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Los	6	(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a)		
Kukatpally	E Ln 22	6,5	00.	1.000	00000		6,500.	0.		
Total	>		500.	1.00		6,500.		0.		
Worksheet 5—Anocation of Orlanowet	Form or schedu									
Name of activity	and line number to be reported (see instruction	er on	(a) Loss		(b) Ratio		(c)	Unallowed loss		
Total						1 00				