IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

T.....

Taxpayer's name Social security number				
MOUNI GURRAM	276-31-5074			
Spouse's name	Spouse's social security number			
Part I Tax Return Information – Tax Year Ending December 31, (Ente	r year you are authorizing.)			
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 72,280.			
2 Total tax	2 8,963.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 9,538.			
4 Amount you want refunded to you	4 2,375.			
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
100	I ddthonzo		

1	5	0	7	4	00 mV
Ent don	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

Spouse's PIN: check one box only

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 sig	inature 🕨 🛛 🗖 Da	ate 🕨						 				
Practitioner PIN Method Returns Only—continue below												
Part III	Certification and Authentication – Practitioner PIN Method Only											
ERO's EFIN/	/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8	7			8 nter a		9	8	9	

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 🕨			
Don'	ERO Must Retain This F t Submit This Form to the I		
For Denerwork Deduction Act Nation			Earm 8879 (Bay 01 202

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/15/21 PRO

1040	· ·	artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) Jrn 20)2(OMB No. 1545	5-0074	IRS Use Only	r−Do not w	rite or staple	in this space.
Filing Statu Check only one box.	lf yo	Single D Married filing jointly but checked the MFS box, enter the n son is a child but not your dependent	ame of y	ed filing separa /our spouse. If		,		hold (HOH) box, enter th		, ,	. , . ,
Your first name	e and m	iddle initial	Last na	me					Your so	cial securi	ty number
MOUNI			GURR	AM					276-3	31-507	4
lf joint return, s	spouse's	s first name and middle initial	Last nai	me					Spouse'	s social se	curity number
		er and street). If you have a P.O. box, see STONE DRIVE	instructio	ons.				Apt. no. D	1	ntial Electi iere if you,	on Campaign
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete s	paces below.	:	State	ZIP co	ode			ntly, want \$3
TAMPA						FL	336	517	U U	ow will not	Checking a change
Foreign countr	y name		F	oreign province	/state/co	unty	Forei	gn postal code		or refund	0
At any time du	uring 20	020, did you receive, sell, send, excł	nange, o	r otherwise ac	quire ar	ny financial intere	est in a	any virtual cu	I Irrency?		X No
Standard Deduction	_	eone can claim:	•			as a dependent ien					
Age/Blindnes	s You:	: 🗌 Were born before January 2, 1	956	Are blind	Spou	se: 🗌 Was bo	rn bef	ore January	2, 1956	🗌 ls b	lind
Dependent		instructions): irst name Last name		(2) Social s numb		(3) Relations to you	hip	(4) ✔ if q Child tax c		(see instru Credit for ot	uctions): ther dependents
lf more than four											
dependents,											\square
see instruction and check	IS ——							<u> </u>			\square
here											
	1	Wages, salaries, tips, etc. Attach F	orm(s) \	N-2					. 1		74,648.
Attach	2a	Tax-exempt interest	2a		b	Taxable interes	st.		. 2b		
Sch. B if	3a	Qualified dividends	3a	1	• b	Ordinary divide	ends .		. 3b		1.
required.	- 4a	IRA distributions	4a			Taxable amour			. 4b		
	5a	Pensions and annuities	5a		b	Taxable amour	nt		. 5b		
Standard	6a	Social security benefits	6a		b	Taxable amour	nt		. 6b		
Deduction for-	7	Capital gain or (loss). Attach Sche	dule D if	required. If no	ot requir	ed, check here		> [7		3,310.
 Single or Married filing 	8	Other income from Schedule 1, lin	e9						. 8		-5,679.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your tot a	al incon	ne			▶ 9		72,280.
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 stan	dard deduction	n. See ir	structions 10	b				
• Head of	с	Add lines 10a and 10b. These are	your tot	al adjustment	ts to inc	ome			► 10c	;	
household, \$18,650	11	Subtract line 10c from line 9. This	-	-					▶ 11	-	72,280.
 If you checked 	12	Standard deduction or itemized	deducti	ons (from Sch	nedule A)			. 12		12,400.
any box under Standard	13	Qualified business income deducti									
Deduction,	14										12,400.
see instructions.	15	Taxable income. Subtract line 14	from lin	e 11. If zero or	· less, er						59,880.
						-				-	1040 (

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 🗌 881	4 2 🗌 497	2 3	3			. 16	8,963.
	17	Amount from Schedule 2, lir	ne3							. 17	0.
	18	Add lines 16 and 17								. 18	8,963.
	19	Child tax credit or credit for	other dependent	ts						. 19	
	20	Amount from Schedule 3, lir	ne7							. 20	
	21	Add lines 19 and 20								. 21	
	22	Subtract line 21 from line 18	8. If zero or less,	enter -0						. 22	8,963.
	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	8,963.
	25	Federal income tax withheld	l from:								
	а	Form(s) W-2					25a	9	,53	8.	
	b	Form(s) 1099					25b				
	с	Other forms (see instruction	s)				25c				
	d	Add lines 25a through 25c								. 25 d	9,538.
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20	19 return					. 26	
qualifying child,	27	Earned income credit (EIC)			^{No} .		27				
attach Sch. EIC.	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	1	,80	0.	
	31	Amount from Schedule 3, lir	ne 13				31				
	32	Add lines 27 through 31. The	ese are your tot a	al other paym	ents and refu	ndab	ole cr	edits		▶ 32	1,800.
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments						▶ 33	11,338.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the am	nount	t you	overpaid		. 34	2,375.
Horana	35a	Amount of line 34 you want			3 is attached, c	check	k here	ə	► [35a	2,375.
Direct deposit?	►b	Routing number 0 7 1			► c Type:	X (Checl	king 🗌	Savin	gs	
See instructions.	►d	Account number 8 0 5	7 2 8 0	6 5							
	36	Amount of line 34 you want	applied to your	2021 estimate	ed tax		36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe	now					▶ 37	
You Owe		Note: Schedule H and Sch	edule SE filers,	line 37 may r	ot represent a	all of	the	taxes you	owe t	for	
For details on how to pay, see		2020. See Schedule 3, line 1	12e, and its instru	uctions for det	ails.						
instructions.	38	Estimated tax penalty (see in	nstructions) .				38				
Third Party		you want to allow another	person to disc	cuss this retu	rn with the IF	RS? S	See	_			_
Designee	ins	structions				•		Yes. C	omple	te below.	X No
		signee's me ►		Phone no.					onal id ber (Pl	entification	
0.			hat I have averaine		l accompanying	aaba	ماريامم			/	
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com									
Here	Yo	ur signature		Date	Your occupatio	n			l i	f the IRS se	nt you an Identity
				Dato							IN, enter it here
Joint return?					SOFTWARE	E El	NGII	NEER	(see inst.) 🕨	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occu	ipatio	n				nt your spouse an ection PIN, enter it here
your records.	,									see inst.) 🕨	
	Ph	one no.		Email address					`	,,,	
		eparer's name	Preparer's signat				Date		PTIN		Check if:
Paid		SSMANIKUMARAPPANA	RVSSMANIK		JΔ			25/2021		090332	Self-employed
Preparer		m's name GLOBAL TA		UNALAFEAL	117		04/.				646)727-7157
Use Only		m's address > 2530 Pebb		n Cummin	r CD 2001	11					
					-					Firm's EIN Ⅰ	
GO TO WWW.Irs.go	ov/rorn	n1040 for instructions and the late	est information.		BAA		REV	02/15/21 PRO	J		Form 1040 (2020

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

SCHEDULE	1
(Form 1040)	

Additional Income and Adjustments to Income

OMB No. 1545-0074 2

(0)

20

► 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									
276-31	-5074								

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR

MOUNI GURRAM

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions)		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-5,679.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ►		
		8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	-5,679.
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	
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 02/15/21 PRO	Schedul	e 1 (Form 1040) 2020

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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.

2020 Attachment Sequence No. 12

Name(s) shown on return MOUNI GURRAM

Department of the Treasury

Internal Revenue Service (99)

Your social security number 276-31-5074

10.

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes 🗙 No 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)

See instructions for how to figure the amounts to enter on the lines below.		(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss fro	om	(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, Par line 2, column (g	rt I,	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 Box A checked	15,343.	12,093.	61	0.	3,310.
2	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					
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 Worksheet in the instructions	-	6	()		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise		7	3,310.		

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 lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)		(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 Box D checked						
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 13	Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions	. ,	12 13				
	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	Carryover	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a on the back .		15				

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 3,310.
	 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 	
	 line 22. 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.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 ()
	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.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 02/15/21 PRO

Schedule D (Form 1040) 2020

Form	8949	
Form	0949	

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

Attachment

20

Department of the Treasury Internal Revenue Service ► 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.

Social security number or taxpayer identification number

Name(s) shown on return	Social security number or tax			
MOUNI GURRAM	276-31-5074			

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

1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) (c) Date acquired (Mo., day, yr.) (Mo., day, yr.)		(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column</i> (e) in the separate	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). arate instructions. (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result		
				instructions	instructions	Amount of adjustment	with column (g)		
Robinhood Securities LLC	09/25/20	10/13/20	15,343.	12,093.	W	60.	3,310.		
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	15,343.	12,093.		60.	3,310.				

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

SCHEDULE E		Supplemental Income and Loss								1	OMB No. 1545-0074				
(Form 1	040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)								etc.)	2020				
Department of the Treasury		► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.								Attachment					
Internal Revenue Service (99) Go to www.irs.gov/ScheduleE for					or inst	ructions	and the						Sequence No. 13		
Name(s) shown on return												cial security number			
	I GURRAM		From Dontol	Deal Estate and De	voltio	o Note	. 16					507			
Part				Real Estate and Roy	-		-				- ·			use	
				would require you to										/] No	
				Form(s) 1099?		. ,									
1a				street, city, state, ZIF						•		· 🗀			
A	+ ·		JR IN 52200		0000	~)									
В															
С															
1b	Type of Prop	erty	2 For each	rental real estate prop	oerty li	isted		Fair	Rental	Per	sonal	Use	0	IV	
	(from list bel	ow)	above, re	port the number of fa	ir rental and			Days			Days		QJV		
Α	1		if you me	port the number of fa use days. Check the et the requirements to	o file a	s a	Α	365				0			
В			qualified	joint venture. See inst	ructio	ns.	В]	
С							С]	
•••	of Property:														
-	le Family Resid			/Short-Term Rental				7 Self-							
2 Mult Incom	i-Family Reside	nce	4 Commer	cial Properties:	6 Ro	yalties		8 Othe	r (describe						
	-			-	-		Α	215	E	5			С		
<u>3</u> 4					3			215.							
Expen		veu .													
5					5										
6					6										
7					7		2,	365.							
8					8										
9					9										
10					10										
11	-	-			11										
12	Mortgage intere	est pai	d to banks, etc	. (see instructions)	12										
13	Other interest.				13										
14	Repairs				14		1,	875.							
15	Supplies				15		1,	654.							
16	Taxes				16										
17	Utilities				17										
18	Depreciation ex	kpense	e or depletion		18										
19	Other (list) ►				19										
20	Total expenses	. Add I	lines 5 through	19	20		5,	894.							
21	Subtract line 20) from	line 3 (rents) ar	nd/or 4 (royalties). If											
	•			find out if you must			_								
					21		-5,	679.							
22				ter limitation, if any,	00	,	гс)	(`	
02-		-			22			79.)	(2)(15.)	
23a				3 for all rental prope		• •		23a		۷.	15.				
b				4 for all royalty prop 12 for all properties				23b 23c							
c d			•	18 for all properties		• •									
d			•	20 for all properties											
е 24			•	wn on line 21. Do no				236		5,8	^{94.} 24				
24 25				1 and rental real estate		-		· ·	 al losses her	·	24 25 (5 6	579.)	
										t	20 (5,0	,,,,)	
26				y income or (loss). (on page 2 do not											
				erwise, include this ar							26		-5,	679.	

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2020