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

Subm	ission Identification Number (SID)		-			
Taxpaye	er's name	Social secu	rity numb	er		
PAN	KAJ K SINGH	320-29	9-9794	1		
Spouse	's name	Spouse's so	cial secu	rity num	ber	
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	r year you	are aut	horizir	ng.)	
	whole dollars only on lines 1 through 5.				<u> </u>	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1 1	1	04,1	L25.
2	Total tax		2		15,7	718.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		18,0	92.
4	Amount you want refunded to you		4		2,3	374.
5	Amount you owe		5			
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a co	py of y	our re	turn)
to send for any Agent payme authori payme busine taxes t person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transfid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for revidely in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the lot initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account industry of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutization 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 recessed as a support to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) I applied Withdraws Conserved.	jection of the J.S. Treasury dicated in the ion to debit the the authoriquests must leeprocessing payment. I fu	transmis and its c tax prep e entry t zation. T be receiv of the ele inther ac	sion, (b) lesignat aration o this ac o revok yed no ectronic knowled	the red Fire softwood court in the court in	reason nancial are for it. This ncel) a than 2 nent of it the
	onic Funds Withdrawal Consent. Ayer's PIN: check one box only	Г				
Тахра		DINI C	9 9 7	9 4	1	
	ERO firm name	Ė	nter five on't ente		ut	as my
	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 if you are entering your own PIN and your return is filed using the Practitioner PIN met below.					
Yours	signature ▶ Date ▶					
Spous	se's PIN: check one box only				_	
	I authorize to enter or generate	_			_	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.		nter five on't ente			
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.					
Spous	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	v				
Part	III Certification and Authentication — Practitioner PIN Method Only					
FRO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9	6 6	1 9	8	9
LITO	2 1 1471 114. Effect your six digit Effict followed by your five digit self-solected fire.		iter all ze		L	
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subsements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	mitting this re	turn in a	ccordar	nce w	
ERO's	s signature ▶ 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 U.S. Individual Income Tax Return

2022

OMB No. 1545-0074

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

Filing Status Check only one box.	If yo	u checked the MFS box, enter the n	ame of y	ed filing separately (Nour spouse. If you cl					spou	se (QSS)		
		on is a child but not your dependent						1				
Your first name and middle initial Last name									cial security			
PANKAJ I			SING						320-29-9794			
If joint return, s	pouse's	first name and middle initial	Last na	me				Spo	use's	social sec	urity number	
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Apt. no.				n Campaign	
7880 W I	MAULI	E AVE					#1288		Check here if you, or you spouse if filing jointly, was			
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	paces below.	Stat	е	ZIP code				Checking a	
LAS VEG	AS				89113		_	w will not	_			
Foreign country	y name		F	Foreign province/state/o	county	/	Foreign postal co	de you	ır tax	or refund.		
										You	Spouse	
Digital Assets		ny time during 2022, did you: (a) reco ange, gift, or otherwise dispose of a								Yes	⊠ No	
Standard		eone can claim: You as a de					, ,					
Deduction		Spouse itemizes on a separate retur										
Age/Blindness	s You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before Januar	y 2, 19	158	☐ Is bli	nd	
Dependents	s (see	instructions):		(2) Social security	.	(3) Relationsh	ip (4) Check the	e box if	qualifi	es for (see i	instructions):	
If more	(1) Fi	rst name Last name		number		to you	Child ta	x credit	(Credit for oth	er dependents	
than four												
dependents, see instruction	s ——											
and check												
here]										<u> </u>	
Income	1a	Total amount from Form(s) W-2, b	,	,					1a	11	5,071.	
	b	Household employee wages not re	eported	on Form(s) W-2 .					1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)										
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)										
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26										
was withheld.	f	Employer-provided adoption bene							1f			
If you did not	g	Wages from Form 8919, line 6 .							1g			
get a Form W-2, see	h	Other earned income (see instruct	,						1h		0.	
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>li</u>				1.1	F 071	
		Add lines 1a through 1h	 		 L T-				1z	+ +++	5,071.	
Attach Sch. B if required.	2a	·	2a			xable interes			2b	+		
	3a		3a			dinary divide			3b			
Standard	4a 5a		4a 5a			xable amoun	ı t		4b 5b	+		
Standard Deduction for—	6a		6a			ixable amoun			6b			
Single or	C	If you elect to use the lump-sum e		method check here					OD			
Married filing separately,	7	Capital gain or (loss). Attach Schei			•	,		Н	7			
\$12,950 Married filing	8	Other income from Schedule 1, lin							8	1	0,946.	
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							9		14,125.	
Qualifying surviving spouse,	10	Adjustments to income from Sche		•					10	+ 10	11123.	
\$25,900 • Head of	11	Subtract line 10 from line 9. This is							11	10	4,125.	
household,	12	Standard deduction or itemized	•	-					12		2,950.	
\$19,400 If you checked	13	Qualified business income deduct		,	,	5-A			13	—	_,,,,,,,,	
any box under Standard	14	Add lines 12 and 13							14	1	2,950.	
Deduction,	15	Subtract line 14 from line 11. If zer							15		1,175.	
see instructions.				•								

Form 1040 (2022	2)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	15,	718.
Credits	17	Amount from Schedule 2, lin	ie 3					17		
	18	Add lines 16 and 17						18	15,	718.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	ie 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	15,	718.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .			23		0.
	24	Add lines 22 and 23. This is	your total tax					24	15,	718.
Payments	25	Federal income tax withheld								
•	а	Form(s) W-2				25 a 1	8,092.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	18,0	092.
If you have a	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return			26		
qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812	2		28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	ie 15			31				
	32	Add lines 27, 28, 29, and 31.	32							
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	18,0	092.
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amou	ınt you overpaid		34	2,3	374.
nerana	35a	Amount of line 34 you want i	refunded to you	ار. If Form 8888	is attached, che	ck here	🗆	35a	2,3	374.
Direct deposit?	b	Routing number X X X	XXXXX	XX	c Type:	Checking	Savings			
See instructions.	d	Account number X X X	X X X X	X X X 2	X X X X	XX				
	36	Amount of line 34 you want a	applied to your	2023 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe.						
You Owe		For details on how to pay, go	o to www.irs.gov	//Payments or	see instructions			37		
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party		you want to allow another	person to disc	cuss this retu	n with the IRS?					
Designee	ins	tructions				LYes. C	complete b	elow.	× No	
	De nai	signee's		Phone no.			sonal identit nber (PIN)	ication		$\neg \neg$
<u> </u>		der penalties of perjury, I declare t	hat I have evering		l accommonstant col		, ,	the bee	t of more lenguage	
Sign		ief, they are true, correct, and com			, , ,		,		,	0
Here	Yo	ur signature		Date	Your occupation		If the	IRS se	nt you an Ident	ity
		3					Prote	ection P	IN, enter it here	
Joint return?					SOFTWARE	ENGINEER	(see			
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, t	oth must sign.	Date	Spouse's occupa	tion			nt your spouse	
your records.						(see	-	ection PIN, ente	er it nere	
		one no. (469)956-746		Email address	DRGIICATIOC	MATT COM		- /		
		one no. (469)956-746 eparer's name	b Preparer's signat		PKCUSAT@G	MAIL.COM Date	PTIN		Check if:	
Paid			i reparer a aigilat	.u. o			P02470	าดวว	Self-emp	aloved
Preparer										
Use Only			XES LLC Y CT E BRU	ואוכוגוד מע אי	 J 08816				678)965-	
				TADMICK IN			Firm	s EIN	88-214	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/28/23 PRO			Form 10 4	+U (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

PANKAJ K SINGH

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.

nadon.		Sequence No. 01
	Your soc	ial security number
	320-29	-9794

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. Atta		5	-10,946.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u	.	
Z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NR, line 8	10	-10,946.

Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis governr			
	officials. Attach Form 2106	L	12	
13	Health savings account deduction. Attach Form 8889	[13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	[14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction	[17	
18	Penalty on early withdrawal of savings	[18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use	_	22	
23	Archer MSA deduction	L	23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
İ	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
_	1041)			
Z	Other adjustments. List type and amount:			
25			25	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here an Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	roini 1040 oi 1040-on, iiile 10, oi roini 1040-inn, iiile 10a		20	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

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

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

Attachment Sequence No. 13

Your social security number

OMB No. 1545-0074

PANE	KAJ K SINGH					3	320-29-9	9794	
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			e C. See	instru	ctions. If you are	an individu	al, repo	ort farm
Α	Did you make any payments in 2022 that would require you	to file	Form(s)	1099? S	See ins	structions		Yes	s 🛛 No
В	f "Yes," did you or will you file required Form(s) 1099? .							_ Yes	s 🗌 No
1a	Physical address of each property (street, city, state, ZII	P cod	e)						
Α	SE SDF IN								
В									
С									
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental	and		Fa	ir Rental I Days			
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	qualified joint venture. Ode institu	JOLIOIK	J.	С					
Type	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	ital	5 Land 6 Roya			Self-Rental Other (describ	e)		
						Properties	s:		
Incon	ne:			Α		В			С
3	Rents received	3		5	20.				
4	Royalties received	4							
Expe	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,3	00.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,0	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		3,3					
15	Supplies	15		2,9	40.				
16	Taxes	16		0 0	Г.С				
17	Utilities	17		2,8	56.				
18	Depreciation expense or depletion	18							
19 20	Other (list) Total expenses. Add lines 5 through 19	19		11 /	66				
		20		11,4	00.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21		-10,9	46.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		10,94		()()
23a	Total of all amounts reported on line 3 for all rental prope				23a		520.		
b	Total of all amounts reported on line 4 for all royalty prop				23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	11,	466.		
24	Income. Add positive amounts shown on line 21. Do no		ude any lo	osses			24		
25	Losses. Add royalty losses from line 21 and rental real esta		-		nter to	otal losses here	25 (1	0,946.)
26	Total rental real estate and royalty income or (loss).	Comb	ine lines	24 and	25. E	nter the result			
	here. If Parts II, III, IV, and line 40 on page 2 do not Schedule 1 (Form 1040), line 5. Otherwise, include this at	apply	to you,	also er	nter th	nis amount on	26	_	-10,946.

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

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

Identifying number

2022	
Attachment Sequence No. 858	

PANI	KAJ K SINGH				320	-29-	9794
Pa	rt I 2022 Passive Activity Los	SS			'		
	Caution: Complete Parts IV a	and V before comple	eting Part I.				
	al Real Estate Activities With Active lance for Rental Real Estate Activities			ive participation, see	Special		
1a b c	Activities with net income (enter the Activities with net loss (enter the am Prior years' unallowed losses (enter	ount from Part IV, co	olumn (b))	1b (1	0. 0,946.)		
d	Combine lines 1a, 1b, and 1c					1d	-10,946.
All O	ther Passive Activities						
2a b c d	Activities with net income (enter the Activities with net loss (enter the am Prior years' unallowed losses (enter Combine lines 2a, 2b, and 2c	ount from Part V, co	olumn (b)) rt V, column (c))	2b (2c ()	2d	
3	Combine lines 1d and 2d. If this line all losses are allowed, including any losses on the forms and schedules r	is zero or more, sto prior year unallowe	op here and includ	de this form with you		3	-10,946.
Part I	Line 2d is a ion: If your filing status is married filin I. Instead, go to line 10. THE Special Allowance for Research 1.		u lived with your	spouse at any time	during the	year,	do not comple
rai	Note: Enter all numbers in Pa						
4	Enter the smaller of the loss on line				l	4	10,946.
5	Enter \$150,000. If married filing sepa			 5 15	0,000.		
6	Enter modified adjusted gross incon				5,071.		
	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	al to line 5, skip line	s 7 and 8 and ent	er -0-			
7	Subtract line 6 from line 5			 7 3	4 0 2 0		
8	Multiply line 7 by 50% (0.50). Do not				4,929.		
		enter more than \$25	,000. If married filir			8	
9	Enter the smaller of line 4 or line 8	enter more than \$25			structions	8	
Par	t III Total Losses Allowed			ng separately, see ins	structions 	9	10,946.
Par 10	t III Total Losses Allowed Add the income, if any, on lines 1a a	nd 2a and enter the	total	ng separately, see ins	structions		10,946.
Par	Total Losses Allowed Add the income, if any, on lines 1a a Total losses allowed from all pass	and 2a and enter the	total	ng separately, see ins	structions	10	10,946.
Par 10 11	Add the income, if any, on lines 1a a Total losses allowed from all pass out how to report the losses on your	and 2a and enter the ive activities for 20 tax return	total	ng separately, see ins	structions	9	10,946.
Par 10 11	Add the income, if any, on lines 1a a Total losses allowed from all pass out how to report the losses on your t IV Complete This Part Before	and 2a and enter the ive activities for 20 tax return	total	ng separately, see ins	structions s to find	10	10,946.
Par 10 11	Add the income, if any, on lines 1a a Total losses allowed from all pass out how to report the losses on your	ind 2a and enter the ive activities for 20 tax return re Part I, Lines 1	total	ng separately, see ins	structions s to find	10	10,946. 0. 10,946.
Par 10 11	Add the income, if any, on lines 1a a Total losses allowed from all pass out how to report the losses on your t IV Complete This Part Before	ind 2a and enter the ive activities for 20 tax return re Part I, Lines 1a Curren (a) Net income	total	ng separately, see ins	structions	10	
Par 10 11 Par	Add the income, if any, on lines 1a a Total losses allowed from all pass out how to report the losses on your t IV Complete This Part Before	and 2a and enter the ive activities for 20 tax return	total	ng separately, see ins	structions	10	10,946. 0. 10,946. in or loss (e) Loss

10,946.

0.

BAA

Total. Enter on Part I, lines 1a, 1b, and 1c

Form 8582 (2022) Page **2**

Part V	Complete This Part Befor	e P	art I, Lines 2	a, 2b,	and 2c. S	ee instruc	tions.			•	
	Name of activity		Currer	nt year		Prior ye	ears Overall			all gain or loss	
	Number doublety		(a) Net income (line 2a)		(b) Net loss (line 2b)		owed e 2c)	(d) Gain		(e) Loss	
Total. Enter	on Part I, lines 2a, 2b, and 2c										
Part VI	Use This Part if an Amour	nt Is	Shown on F	Part II,	Line 9. S	ee instruc	tions.				
	Name of activity	For an to	rm or schedule ad line number be reported on ee instructions)) Loss	(c) Special				(d) Subtract column (c) from column (a).	
SE			E Ln 22		10,946.	1.0000	0000	10,94	6.	0.	
Total Part VII	Allocation of Unallowed L				10,946.	1.00)	10,94	6.	0.	
raitvii	Anocation of onanowed L	US			is.						
	Name of activity	Form or sche and line num to be reporte (see instructi		ımber ted on (a) l		Loss ((b) Ratio		(c) Unallowed loss	
Total								1.00			
Part VIII	Allowed Losses. See instru										
	Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	_oss	(b) Ur	nallowed loss	(c) Allowed loss	
			1								
Total											