

1328 Fulton

APPLICATION FOR RENTAL

Notice: All adult applicants (18 years or older) must complete a separate application for rental.

The undersigned hereby makes application to rent an Apartment at 1328 Fulton.

APPLICANT INFORMATION									
LAST NAME Naran		FIRST NAME Judy		M.I.	SSN ***_**_****	DRIVER'S LICENSE #			
BIRTH DATE 12/13/1967		PHONE #1 (919) 219-8343		ALTERNATE PHONE		EMAIL jwisemom@gmail.com			
RELATIONSHIP TO TENANT									
CURRENT ADDRESS									
STREET ADDRESS 125 Ethans Glen Court				CITY Cary		STATE NC		ZIP 27513	
DATE IN 3/1/2021		DATE OUT current		LANDLORD NAME Self			LANDLORD PHONE (919) 219-8343		
REASON FOR LEAVING homeowner				OWN OR RENT Own		APARTMENT #		MONTHLY RENT \$0.00 / Mo.	
EMPLOYMENT & INCOME INFORMATION									
OCCUPATION Retired				EMPLOYER/COMPANY Retired			SALARY \$180,000.00/Yr.		
SUPERVISOR Self				SUPERVISOR PHONE		START DATE 3/1/2022		END DATE current	
EMPLOYER ADDRESS 125 Ethans Glen Ct				CITY Cary		STATE NC		ZIP Cary	
EMERGENCY CONTACT									
NAME Paresh Naran				ADDRESS 125 Ethans Glen Court, Cary, 33 27513					
PHONE (919) 210-9216		RELATIONSHIP spouse				E-MAIL jwisemom@gmail.com			
BUSINESS/PROFESSIONAL REFERENCE									
NAME				ADDRESS					
PHONE		RELATIONSHIP				E-MAIL			
IN THE EVENT OF DEATH - CONTACT									
NAME Paresh Naran			RELATIONSHIP spouse			PHONE 9192109216			
BACKGROUND INFORMATION									
Have you ever filed for bankruptcy? NO									
Have you ever willfully or intentionally refused to pay rent when due? NO									
Have you ever been evicted from a tenancy or left owing money? If yes, please provide Property Name, City, State, and Landlord Name. NO									
ADDITIONAL INFORMATION									
AQUARIUM? NO		WATERBED? NO		BOAT? NO		MOTORHOME? NO		MOTORCYCLE? NO	OTHER? NO
OTHER INFORMATION									
HOW DID YOU HEAR ABOUT THIS PROPERTY? Other									
IF THE APARTMENT YOU'RE APPLYING FOR IS NO LONGER AVAILABLE, ARE THERE ANY OTHER APARTMENTS IN THE BUILDING OR OTHER BUILDINGS THAT YOU'RE INTERESTED IN? no									
UNIT APPLYING FOR: 805		PLEASE INCLUDE ANY OTHER INFORMATION YOU BELIEVE WOULD HELP TO EVALUATE THIS APPLICATION							
DESIRED MOVE IN DATE: 3/6/2025									
I (WE) HAVE SEEN THE ACTUAL APARTMENT FOR WHICH I (WE) ARE APPLYING?: YES									

I hereby apply to lease an Apartment and agree that the rental is to be payable the 1st day of each month in advance. I warrant that all statements above set forth are true.

I hereby give my permission to communicate with my current and former landlord or property manager for the purpose of discussing any and all of the facts and circumstances of my current or former tenancy, as well as the other information listed above. I also give my permission to communicate with my current employer(s) and /or supervisor(s) for the purpose of verifying the employment information listed above. I understand there are no limitations or restrictions regarding what may be discussed or revealed. I am aware that a credit history, eviction search and criminal background check will be done in conjunction with my application. I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

By submitting this application, I hereby consent to the delivery of all notices or disclosures required by law via any medium so chosen by the community or On-Site Manager, Inc. DBA On-Site, including but not limited to email or other electronic transmission. Notices shall be deemed received upon being sent.

New York City Tenant Fair Chance Act

Pursuant to the laws of the federal government, New York State, and NYC Admin. Code § 20-807 et seq., we are required to provide you with the following disclosure:

1) The application information you provide will be used by this community's owner or designated agent (the "Owner") to obtain a tenant screening report on you, and the Owner may use this report to determine your suitability for housing.

2) If your application is denied or other adverse action is taken against you on the basis of information contained in the tenant screening report, the Owner must tell you that such action was taken and provide you with the contact information of the screening company that provided the tenant screening report.

3) You may obtain a free copy of the report and dispute inaccurate or incorrect information on the report directly with the screening company at: Attn: On-Site c/o RealPage, 2201 Lakeside Boulevard, Richardson, TX 75082; 1-877-222-0384; www.on-site.com/renter-relations/.

4) You are entitled to one free tenant screening report from each national consumer reporting agency annually, in addition to a credit report which can be obtained from www.annualcreditreport.com.

APPLICATION FOR JUDY NARAN SUBMITTED ONLINE on March 5, 2025



Signed by Judy Naran

Wed Mar 5 2025 12:26:39 PM EST

Key: 224A2EA3; IP Address: 10.33.14.18

Judy Naran (Applicant)Date

The following charge(s) will appear on your card statement as "1328 Fulton"

Application Fee for Judy Naran - Charge Details			
Name on Card	Account Number	Reference Number	Authorized
Judy Naran	XXXXXXXXXXXX9946	15601648	\$20.70
This card has been authorized for the amount above and will be charged when the application is processed.			



NYC Fair Chance Housing Notice: Criminal Records

As of January 1, 2025, in NYC, it is illegal for most housing providers to discriminate on the basis of a conviction history in rentals or sales, including co-ops and condos.

The protections of the NYC Fair Chance Housing Law apply to current tenants as well as applicants.

It is a violation of the Law for covered housing providers to:	
Make statements about criminal background checks or criminal records or express limitations on this basis in ads and applications	Treat applicants or tenants differently because of a conviction history except as allowed by the Fair Chance Housing Law.

Covered housing providers **may NEVER** change the terms of a sale or lease because of a conviction history. Covered housing providers **may** revoke a housing offer or decline to renew a lease **ONLY** based on limited kinds of convictions and **ONLY** when they follow the requirements of the Fair Chance Housing Law.

The NYC Fair Chance Housing Law does not require housing providers to run criminal background checks. Any housing provider can accept a renter or buyer without following the steps below. The steps below are only for covered housing providers that choose to run a background check.



If a Covered Housing Provider Chooses to Run a Criminal Background Check: You Have Rights.

Covered housing providers **must first** consider your general housing eligibility (ability to meet lease terms) AND make a conditional offer of housing. **Only after** this conditional offer is it lawful for a covered housing provider to run a criminal background check.

Before conducting a criminal background check, covered housing providers must:

- Make you a conditional offer of housing AND
- Give you a copy of this notice explaining your rights

Housing providers are also responsible for compliance with laws governing the collection and use of personal information, such as Federal and State Fair Credit Reporting Acts.

Conditional Offer of Housing

A conditional offer of housing is a **written lease, rental agreement, or agreement for a sale** that conditionally commits a unit(s) to a renter or buyer and can only be revoked in limited circumstances. Next a covered housing provider chooses either:

NOT to conduct a criminal background check	TO conduct a criminal background check
At this time, the housing provider can either finalize the offer or revoke it for a lawful, non-discriminatory purpose that is unrelated to conviction history.	It is illegal for the housing provider to seek or review your conviction history before you have a conditional offer.



Criminal Background Check

If a covered housing provider chooses to run a criminal background check after making you a conditional offer, they may only consider **very limited** categories of convictions:

- convictions that require registration on a sex offense registry at the time of the background check
- felony convictions from the last 5 years, except those below
- misdemeanor convictions from the last 3 years, except those below

The 3 or 5 years are measured from the **actual date of release OR the sentencing date** (if the sentence does not include jail or prison time), regardless of probation or parole status.

A covered housing provider can **NEVER** consider arrests or pending cases, or:

- convictions that were sealed, expunged, are under an executive pardon or certificate of relief from disabilities, or legally nullified or vacated
- convictions for violations, which are non-criminal offenses such as disorderly conduct
- convictions under federal law or another state's law for conduct related to reproductive or gender affirming care that is lawful in New York State
- convictions under federal law or another state's law for cannabis possession that does not constitute a felony in New York State
- Adjudgments in Contemplation of Dismissal (ACDs)
- adjudications as a youthful offender or for juvenile delinquency
- terminations in favor of an individual, including but not limited to, acquittals, reversals upon appeal, and exonerations)
- Dispositions of criminal matters under federal law or another state's law that are comparable to those listed here.

It is illegal for a covered housing provider to consider information in these categories. In addition, tenant screening companies may be held liable under federal fair housing laws for discriminatory decisions by housing providers.



Right to Provide Support for Your Application

After considering only reviewable convictions, a covered housing provider that wants to revoke a housing offer must **FOLLOW THE FAIR CHANCE HOUSING PROCESS** while holding a unit open. They must:

1. Give you a copy of all criminal history information they received and/or reviewed
2. Allow you 5 business days to respond by:
 - pointing out errors in the conviction history
 - identifying any information that should not have been considered (any information outside the lawfully reviewable convictions)
 - sharing information on your background, personal and professional references, and/or any information that supports your application.

You are not required to provide information to support your application at this stage. A housing provider must complete an individualized assessment even if you do not provide supporting information.



Right to an Individualized Assessment of Your Application

A covered housing provider must conduct an individualized assessment of the reviewable convictions, together with any other information that you have timely submitted.



A covered housing provider CANNOT revoke a conditional offer of housing after running a criminal background check except in two limited circumstances :	
After conducting an individualized assessment if they show in writing BOTH: • a legitimate business interest AND • how the legitimate business interest is linked to your individual history.	If they show <i>new information, unrelated to criminal history</i> , that impacts your qualifications for tenancy and that they did not know at the time of your conditional offer.

Legitimate Business Interest

A covered housing provider's legitimate business interest must be specific and objective. Compliance with a particular lease term is a permissible legitimate business interest. Purely discriminatory motives, stigma, stereotypes, or assumptions never constitute a legitimate business interest.

A covered housing provider that shows a legitimate business interest must also **explain** the link between that interest and your particular individual history in light of the individual information you shared to justify a decision to revoke your conditional offer of housing. **The existence of a conviction alone never creates that link.**

The following are not legitimate business interests and do not establish a sufficient link to justify a housing provider's decision to revoke an offer:

- | | |
|---|---|
| • "I don't want a hot spot for law enforcement" | • "We don't want bad guys hanging around" |
| • "The applicant seems likely to commit another crime and I want tenant safety" | • "My tenants don't want criminals" |
| • "This is a family building" | • "My insurance rates will go up" |
| | • "This will impact my property value" |

Revoking a Conditional Offer of Housing

Before a covered housing provider can revoke a conditional offer because of your criminal history, the housing provider **MUST** take the following steps:

1. Do an individualized assessment of your reviewable convictions **AND** the information you provided
2. Give you copies of all documents that it received and/or reviewed
3. Give you a written statement that explains:
 - the decision to revoke based on your conviction history **AND** the link to a legitimate business interest
 - how your individual information and circumstances were taken into account

Exemptions for Housing Providers

- Housing provider-occupied properties with 2 or fewer rooms or units are not covered by the NYC Fair Chance Housing Law .
- State or federally funded housing providers, including public housing authorities that are required or authorized to take specific actions related to criminal history **CAN** take such specific actions without violating the NYC Fair Chance Housing Law .

For additional information about tenants' and buyers' rights & housing providers' responsibilities under the NYC Fair Chance Housing Law , and to see this notice in multiple languages, visit [NYC.gov/FairChanceHousing](https://www.nyc.gov/FairChanceHousing).

REMINDER: All New Yorkers have a right to be free from retaliation in housing. It is illegal for housing providers in NYC to punish you or treat you negatively for telling them about your rights or for reporting discrimination or harassment.

California Required Notices

This report does not guarantee the accuracy or truthfulness of the information as to the subject of the investigation, but only that it is accurately copied from public records, and information generated as a result of identity theft, including evidence of criminal activity, may be inaccurately associated with the consumer who is the subject of the report.

An investigative consumer reporting agency shall provide a consumer seeking to obtain a copy of a report or making a request to review a file, a written notice in simple, plain English and Spanish setting forth the terms and conditions of his or her right to receive all disclosures, as provided in CA Civil Code Section 1786.26.

This report was prepared using software provided by RP On-Site LLC, which can be contacted at: 2201 Lakeside Blvd., Richardson, TX 75082; 1-877-222-0384; or <https://www.on-site.com/request-rental-report-or-submit-dispute/>.

Avisos obligatorios en el estado de California

El presente informe no garantiza la exactitud ni la veracidad de la información con respecto al tema de investigación, sino únicamente que es una copia exacta de los registros públicos y es posible que la información generada como consecuencia del robo de identidad, incluidos los registros de antecedentes delictivos, se haya asociado por error con el consumidor objeto del presente informe.

Una agencia de investigación de verificación de crédito proporcionará al consumidor que desee obtener una copia de un informe o que solicite la revisión de un archivo un aviso por escrito en inglés y español, escrito en un lenguaje simple y claro, que establezca los términos y condiciones de su derecho a recibir todas las divulgaciones conforme a la Sección 1786.26 del Código Civil de California.

Este informe se preparo con el software proporcionado pro RP On-Site LLC, que puede contractarse en: 2201 Lakeside Blvd., Richardson, TX 75082; 1-877-222-0384; or <https://www.on-site.com/request-rental-report-or-submit-dispute/>.

Rental Report for Judy Naran**The property's screening criteria result****APPROVE**

This application meets your requirements based on your Property's Screening Criteria. On-Site makes no independent assessment of an applicant's qualifications.
Application Canceled by Malgorzata Warchol on 3/5/2025.

Score for Judy Naran: 959

	Importance	Result
AI Score	Pass/Fail	
Total annual income to rent ratio exceeds 40.0	Pass/Fail	
May have been through a bankruptcy	Pass/Fail	



Rental Report for Judy Naran, 3/5/2025 for PH103 at 1328 Fulton

Credit Quick Summary		
Total annual income (reported by Applicant)	\$180,000.00	
Total combined annual income to rent ratio	64.22 (based on rent of \$2,803.00)	
Total number of accounts	27	
Accounts with no late payments	26 (0 unpaid past due)	
Accounts paid 30-59 days past due	1 (0 unpaid past due)	
Accounts paid 60-89 days past due	0 (0 unpaid past due)	
Accounts paid more than 90 days past due	0 (0 unpaid past due)	
Total outstanding balance	\$6,367.00 (\$0.00 past due)	
Outstanding revolving debt	\$6,367.00 (0% of limit) (\$0.00 past due)	
Outstanding loan balance	\$0.00 (\$0.00 past due)	
Bankruptcies, foreclosures, and legal items	0	
Collection total balance (includes past due)	\$0.00	
Rental History records found	1	

Identity	From Application	From Equifax
Name:	Judy Naran	JUDY P. NARAN JUDY P. NARAN JUDY GARNET PALMER JUDY P. PALMER
SSN:	***_**_****	***_**_****
Birth Date:	12/**/1967	12/**/1967

Addresses	From Application	From Equifax
	125 Ethans Glen Court Cary, NC 27513 - US	125 ETHANS GLEN CT. CARY, NC 27513 (Applicant) Reported 3/2025 517 BEXLEY BLUFF LN. LM CARY, NC 27513 (Applicant) Reported 2/2025 112 PRYNNWOOD CT. RALEIGH, NC 27607 (Applicant) Reported 9/2020 100 1B E CANOPY OAKS CT. CARY, NC 27513 (Applicant) Reported 11/2010

Employment	From Application	From Equifax
Applicant:	Retired Retired \$180,000.00/Yr. Total annual Income: \$180,000.00	DENTAL ASST DR PARESH CDA DINAH VICE DDS DENTAL ASST FAMILY DENTIST

Restricted Person Search		
Requested For Judy Naran	Requested 3/5/2025	Returned 3/5/2025
Results No Records Found		

Rental History Records

From Equifax

There are no rental history records on file with Equifax

From RealPage

Landlord PRESTON VIEW (Applicant)	On-Time Payments	Late Payments	Late Fees	Rent	Current Balance
	5	0	\$0.00	\$2,406.00	\$0.00
	Tenant JUDY NARAN				
	NSF Checks			Proper Notice No	
	Lease Dates 5/15/2024–8/14/2024		Deposit Returned Yes	Re-rent NA	Landlord Phone # (984) 214-8642

Risk Models

From RealPage

Risk Model Name RealPage AI Score (Applicant)	Score 959	Score Factors Tradeline scoring Debt-to-income ratio Credit Score Rental Payment History
	Description RealPage AI Score uses machine-learning and data patterns in credit score, debt/liability types, trade lines, rental payment history, and renter behavior to achieve reduced bad debt. The RealPage AI Score range is between 1 and 1000 (the higher the score, the less risky the consumer).	

From Equifax

Risk Model Name Credit Score (Applicant)	Score 812	Score Factors You have too many delinquent or derogatory accounts Balances on bankcard or revolving accounts too high compared to credit limits Lack of sufficient credit history on bankcard or revolving accounts You have too many inquiries on your credit report.
	Description This credit score is a widely used risk model that uses credit report data to predict the likelihood of default. The credit score range is between 300 and 850 (the higher the score, the less risky the consumer).	

Credit Accounts

From Equifax

Account Name CITICARDS CBNA (Applicant)	Opened 1/2019	Last Active 12/2024	30-59	60-89	90+	Past Due	Balance \$2,707.00
	Monthly Payment \$41.00	High Credit \$7,308.00	Type REVOLVING	Comments CONSUMER DISPUTES AFTER RESOLUTION Rate/Status 1: Pays account as agreed			
	Payment History 0 2/ 25 12/ 24 10/ 24 8/ 24 6/ 24 4/ 24 2/ 24 12/ 23 10/ 23 8/ 23 6/ 23 4/ 23						



Rental Report for Judy Naran, 3/5/2025 for PH103 at 1328 Fulton

Account Name CITICARDS CBNA (Applicant)	Opened 3/2015	Last Active 1/2025	30-59	60-89	90+	Past Due	Balance \$1,673.00
	Monthly Payment \$41.00	High Credit \$11,287.00	Type REVOLVING	Comments Rate/Status 1: Pays account as agreed			
	Payment History 0 3/25 1/25 11/24 9/24 7/24 5/24 3/24 1/24 11/23 9/23 7/23 5/23						
Account Name NORDSTROM/TD BANK (Applicant)	Opened 11/2002	Last Active 1/2025	30-59	60-89	90+	Past Due	Balance \$523.00
	Monthly Payment \$40.00	High Credit \$3,620.00	Type REVOLVING	Comments Rate/Status 1: Pays account as agreed			
	Payment History 0 2/25 12/24 10/24 8/24 6/24 4/24 2/24 12/23 10/23 8/23 6/23 4/23						
Account Name JPMCB CARD SERVICES (Applicant)	Opened 2/2018	Last Active 1/2025	30-59	60-89	90+	Past Due	Balance \$382.00
	Monthly Payment \$35.00	High Credit \$1,937.00	Type REVOLVING	Comments Rate/Status 1: Pays account as agreed			
	Payment History 0 2/25 12/24 10/24 8/24 6/24 4/24 2/24 12/23 10/23 8/23 6/23 4/23						
Account Name JPMCB CARD SERVICES (Applicant)	Opened 11/2000	Last Active 1/2025	30-59	60-89	90+	Past Due	Balance \$317.00
	Monthly Payment \$35.00	High Credit \$18,396.00	Type REVOLVING	Comments Rate/Status 1: Pays account as agreed			
	Payment History 0 2/25 12/24 10/24 8/24 6/24 4/24 2/24 12/23 10/23 8/23 6/23 4/23						
Account Name SYNCB/JCREW (Applicant)	Opened 9/2012	Last Active 1/2025	30-59	60-89	90+	Past Due	Balance \$266.00
	Monthly Payment \$41.00	High Credit \$540.00	Type REVOLVING	Comments Rate/Status 1: Pays account as agreed			
	Payment History 0 2/25 12/24 10/24 8/24 6/24 4/24 2/24 12/23 10/23 8/23 6/23 4/23						
Account Name CITICARDS CBNA (Applicant)	Opened 5/2021	Last Active 1/2025	30-59	60-89	90+	Past Due	Balance \$251.00
	Monthly Payment \$35.00	High Credit \$7,686.00	Type REVOLVING	Comments Rate/Status 1: Pays account as agreed			
	Payment History 0 3/25 1/25 11/24 9/24 7/24 5/24 3/24 1/24 11/23 9/23 7/23 5/23						

Rental Report for Judy Naran, 3/5/2025 for PH103 at 1328 Fulton

[illegible]

Rental Report for Judy Naran, 3/5/2025 for PH103 at 1328 Fulton

Account Name GUARANTEED RATE INC (Applicant)	Opened 3/2021	Last Active 6/2021	30-59	60-89	90+	Past Due	Balance \$0.00
	Monthly Payment	High Credit \$175,000.00	Type MORTGAGE	Comments FREDDIE MAC ACCOUNT FIXED RATE Rate/Status 1: Pays account as agreed			
	Payment History 0 0 0 0 0 0 8/ 21 6/ 21 4/ 21						
Account Name JPMCB - HOME LENDING (Applicant)	Opened 8/2003	Last Active 11/2017	30-59	60-89	90+	Past Due	Balance \$0.00
	Monthly Payment	High Credit \$123,500.00	Type MORTGAGE	Comments FANNIE MAE ACCOUNT Rate/Status 1: Pays account as agreed			
Account Name AMERICAN EXPRESS (Applicant)	Opened 3/2009	Last Active 3/2020	30-59	60-89	90+	Past Due	Balance \$0.00
	Monthly Payment	High Credit \$18,401.00	Type REVOLVING	Comments ACCOUNT CLOSED AT CONSUMER'S REQUEST Rate/Status 1: Pays account as agreed			
	Payment History 0 5/ 20 3/ 20 1/ 20 11/ 19 9/ 19 7/ 19 5/ 19 3/ 19 1/ 19 11/ 18 9/ 18 7/ 18						
Account Name CITICARDS CBNA (Joint)	Opened 11/2004	Last Active 3/2014	30-59	60-89	90+	Past Due	Balance \$0.00
	Monthly Payment	High Credit \$13,228.00	Type REVOLVING	Comments ACCOUNT CLOSED AT CONSUMER'S REQUEST Rate/Status 1: Pays account as agreed			
Account Name COMENITY BANK/ARHAUS (Applicant)	Opened 6/2023	Last Active 11/2024	30-59	60-89	90+	Past Due	Balance \$0.00
	Monthly Payment	High Credit \$11,793.00	Type REVOLVING	Comments Rate/Status 1: Pays account as agreed			
	Payment History 0 2/ 25 12/ 24 10/ 24 8/ 24 6/ 24 4/ 24 2/ 24 12/ 23 10/ 23 8/ 23						
Account Name AMERICAN EXPRESS (Applicant)	Opened 9/2018	Last Active 8/2020	30-59	60-89	90+	Past Due	Balance \$0.00
	Monthly Payment	High Credit \$11,192.00	Type OPEN ACCOUNT	Comments ACCOUNT CLOSED AT CONSUMER'S REQUEST Rate/Status 1: Pays account as agreed			
	Payment History 0 10/ 20 8/ 20 6/ 20 4/ 20 2/ 20 12/ 19 10/ 19 8/ 19 6/ 19 4/ 19 2/ 19 12/ 18						
Account Name FIFTH THIRD BANK (Applicant)	Opened 1/2015	Last Active 5/2015	30-59	60-89	90+	Past Due	Balance \$0.00
	Monthly Payment	High Credit \$8,595.00	Type REVOLVING	Comments ACCOUNT CLOSED AT CONSUMER'S REQUEST Rate/Status 1: Pays account as agreed			
Account Name CITICARDS CBNA (Joint)	Opened 10/2007	Last Active 10/2017	30-59	60-89	90+	Past Due	Balance \$0.00
	Monthly Payment	High Credit \$7,808.00	Type REVOLVING	Comments ACCOUNT CLOSED AT CONSUMER'S REQUEST Rate/Status 1: Pays account as agreed			

Rental Report for Judy Naran, 3/5/2025 for PH103 at 1328 Fulton

Account Name SYNCB/CARE CREDIT (Applicant)	Opened 12/2019	Last Active 4/2020	30-59	60-89	90+	Past Due	Balance \$0.00																																														
	Monthly Payment	High Credit \$4,555.00	Type REVOLVING	Comments ACCOUNT CLOSED DUE TO INACTIVITY Rate/Status 1: Pays account as agreed																																																	
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Account Name CITICARDS CBNA (Joint)	Opened 5/2017	Last Active 10/2017	30-59	60-89	90+	Past Due	Balance \$0.00																																														
	Monthly Payment	High Credit \$3,376.00	Type REVOLVING	Comments ACCOUNT CLOSED AT CONSUMER'S REQUEST Rate/Status 1: Pays account as agreed																																																	
Account Name CITICARDS CBNA (Joint)	Opened 9/2020	Last Active 9/2023	30-59	60-89	90+	Past Due	Balance \$0.00																																														
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Account Name BARCLAYS BANK DELAWA (Applicant)	Opened 8/2022	Last Active 9/2022	30-59	60-89	90+	Past Due	Balance \$0.00																																														
	Monthly Payment	High Credit \$643.00	Type REVOLVING	Comments ACCOUNT CLOSED AT CONSUMER'S REQUEST Rate/Status 1: Pays account as agreed																																																	
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Account Name CAPITAL ONE/WSI (Applicant)	Opened 4/2014	Last Active 11/2024	30-59	60-89	90+	Past Due	Balance \$0.00																																														
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Account Name SYNCB/CRATE&BARR (Applicant)	Opened 11/2014	Last Active 11/2024	30-59	60-89	90+	Past Due	Balance \$0.00																																														
	Monthly Payment	High Credit \$416.00	Type REVOLVING	Comments Rate/Status 1: Pays account as agreed																																																	
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Previous Credit Inquiries

From Equifax

6/2023	COMENITYBANK/ARHAUS (Applicant)
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NOTICE OF ADVERSE ACTION

March 5, 2025

Dear Judy Naran:

Thank you for submitting your application for rental housing to: 1328 Fulton; 1328 Fulton Street, Brooklyn, NY 11216.

1. Unfortunately, we are unable to offer you a lease on the terms that you requested and must deny your application at this time.

Our decision about your application was based in whole or in part on information contained in a consumer report from a consumer reporting agency, RP On-Site, LLC ("On-Site"), 2201 Lakeside Blvd, Richardson, TX 75082; (877) 222-0384; www.renterrelations.com. The report includes information provided by On-Site and the following other consumer reporting agency(ies):

Credit Information Provider(s):

Equifax
P.O. Box 740241
Atlanta, GA 30374
800-685-1111
www.equifax.com

Neither On-Site nor any other consumer reporting agency listed in this notice made the decision to take the adverse action and they are unable to provide the specific reasons why we chose to take the adverse action.

2. You have the right, under the Fair Credit Reporting Act ("FCRA"), to know the information contained in your file at each consumer reporting agency and to dispute any information that you believe is inaccurate or incomplete. If any person takes adverse action against you based in whole or in part on any information contained in a consumer report, you also have the right to a free copy of the report if you request it no later than 60 days after your receipt of the adverse action notice. In addition, if you find that any information contained in the report you receive is inaccurate or incomplete, you have the right to dispute it with the relevant consumer reporting agency.
3. If you would like to review the consumer report that we used to evaluate your application, you can do so by visiting On-Site's applicant help center at www.renterrelations.com and requesting a free copy of your rental report. You can also reach On-Site at the address or phone number listed above.
4. After you receive your rental report, you may submit a dispute to the relevant consumer reporting agency (listed above) about any information in the report that you believe is inaccurate or incomplete. You may also submit your dispute of any information in the report that was provided by another consumer reporting agency to On-Site and they will forward your dispute to the relevant provider. Both you and 1328 Fulton will be notified by On-Site via email of any updates made to the information.
5. We obtained your AI Score from our screening services provider, On-Site, and used it as a factor in our decision.

Your AI Score is: **959** Date: **March 5, 2025**

Scores range from a low of 0 to a high of 1000.

Key factors that adversely affected your AI score are:

- Tradeline scoring
- Debt-to-income ratio
- Credit Score
- Rental Payment History

6. We also obtained your credit score(s) and used it as a factor in our decision. Your credit score is a number that reflects the information in your credit report and can change, depending on how the information in your credit report changes.

Your **Equifax** Credit Score: **812** Date: **March 5, 2025**

Scores range from a low of 300 to a high of 850

Key factors that adversely affected your credit score:

- You have too many delinquent or derogatory accounts
- Balances on bankcard or revolving accounts too high compared to credit limits
- Lack of sufficient credit history on bankcard or revolving accounts
- You have too many inquiries on your credit report.

Please contact us if you have any questions about this notice or our rental criteria.

Sincerely,

Fulton Street Development LLC

A Summary of Your Rights Under the Fair Credit Reporting Act

<https://www.realtor.com/your-rights-under-fair-credit-reporting-act/>

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552 b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act. c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357

A Summary of Your Additional Rights in New York

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer credit reporting agency from releasing information in your credit report without your express authorization. A security freeze must be requested in writing by certified or overnight mail. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent.

To place a security freeze on your credit report, you must contact each of these credit reporting agencies:

Equifax Security Freeze

P.O. Box 105788

Atlanta, GA 30348

(800) 685-1111

<https://www.freeze.equifax.com>

Experian Security Freeze

P.O. Box 9554

Allen, TX 75013

(888) 397-3742

<https://www.experian.com/freeze/center.html>

TransUnion LLC

P.O. Box 2000

Chester, PA 19022-2000

(888) 909-8872

www.transunion.com/personal-credit/credit-disputes/credit-freezes.page

However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit mortgage, government services or payments, insurance, rental housing, employment, investment, license, cellular phone, utilities, digital signature, Internet credit card transaction, or other services, including an extension of credit at point of sale. When you place a security freeze on your credit report, you will be provided a personal identification number or password to use if you choose to remove the freeze on your credit report or authorize the release of your credit report to a specific party or for a period of time after the freeze is in place. To provide that authorization you must contact the consumer credit reporting agency and provide all of the following:

1. The personal identification number or password;
2. Proper identification to verify your identity;
3. The proper information regarding the party or parties who are to receive the credit report or the period of time for which the report shall be available to users of the credit report; and
4. Payment of any applicable fee.

A consumer reporting agency must authorize the release of your credit report no later than three business days after receiving the above information.

A security freeze does not apply to circumstances in which you have an existing account relationship and a copy of your report is requested by your existing creditor or its agents or affiliates for certain types of account review, collection, fraud control or similar activities.

If you are actively seeking credit, you should understand that the procedures involved in lifting a security freeze may slow your application for credit. You should plan ahead and lift a freeze, either completely if you are shopping around, or specifically for a certain creditor, before applying for new credit.

Additional rights under your state's law, which are also in the federal Fair Credit Reporting Act, are explained in the enclosed Summary of Your Rights under the Fair Credit Reporting Act.

Wells Fargo Everyday Checking

February 28, 2025 ■ Page 1 of 5

The Wells Fargo logo, consisting of the words "WELLS" and "FARGO" in a gold, serif font, stacked vertically within a red square.

PARESH C NARAN
JUDY P NARAN
125 ETHANS GLEN CT
CARY NC 27513-3434

Questions?

Available by phone 24 hours a day, 7 days a week:
We accept all relay calls, including 711

1-800-742-4932

En español: 1-877-727-2932

Online: [wellsfargo.com](https://www.wellsfargo.com)

Write: Wells Fargo Bank, N.A. (338)
P.O. Box 6995
Portland, OR 97228-6995

You and Wells Fargo

Thank you for being a loyal Wells Fargo customer. We value your trust in our company and look forward to continuing to serve you with your financial needs.

Other Wells Fargo Benefits

File your taxes early to help prevent identity theft

Early filing helps prevent someone else from filing taxes in your name.
Find other tips at [wellsfargo.com/spottaxscams](https://www.wellsfargo.com/spottaxscams)

A new twist on romance scams

Scammers make friends with you on social media, then offer to show you how to invest in crypto.
Watch for: Promises of big returns, help with downloading a crypto app, or requests to wire money.

Statement period activity summary

Beginning balance on 2/1	\$1,443.44
Deposits/Additions	19,760.71
Withdrawals/Subtractions	- 11,641.35
Ending balance on 2/28	\$9,562.80

Account number: **1017364118950** (primary account)

PARESH C NARAN
JUDY P NARAN

North Carolina account terms and conditions apply

For Direct Deposit use
Routing Number (RTN): 053000219

Overdraft Protection

Your account is linked to the following for Overdraft Protection:

- Savings - 001062641814333

Transaction history

Date	Check Number	Description	Deposits/ Additions	Withdrawals/ Subtractions	Ending daily balance
2/3		Recurring Transfer to Naran A Ref #Op0R5Kcc26 Everyday Checking Adult Help		175.00	
2/3	7939	Check		100.00	1,168.44
2/4		Online Transfer From Naran P Ref #Ib0R6PF8Yw Everyday Checking Target	233.46		1,401.90
2/5		Online Transfer From Chasava Properties LLC Ref #Ib0R72Fkww Business Checking Distribution	8,000.00		
2/5		Jcrew Crdt Crd Syf Paymnt Feb 05 609769472107399 Naranjudy P		268.13	
2/5		Target Card Srvc Bill Pay 250205 000000004120678 3J NA0000000Ran T		233.46	8,900.31
2/6		Online Transfer From Naran P Ref #Ib0R7N3Jgw Everyday Checking Prestonwood	2,423.59		11,323.90
2/10	7941	Check		50.00	11,273.90
2/14		Wake County Sch Salary 250207 xxxxx9649 Naran Judy	973.38		
2/14		Online Transfer From Naran P Ref #Ib0Rb877Ng Everyday Checking Portugal Air Tickets on Black Card	7,000.00		19,247.28
2/18		Nordstrom Payment 250214 043000096921402 Judy P Naran Judy P NA		258.05	
2/18	7942	Check		50.00	18,939.23
2/20		Online Transfer From Naran P Ref #Ib0Rd33F5Y Everyday Checking Black Card	687.00		19,626.23
2/21		Citi Card Online Payment 250220 421624965972864 Judy Naran		7,686.57	11,939.66
2/24		Crate and Barrel Syf Paymnt Feb 24 604588200076936 Naranjudy P		13.64	
2/24		Jcrew Crdt Crd Syf Paymnt Feb 24 609769472107399 Naranjudy P		227.80	
2/24		Capital One Mobile Pmt 250224 42Vpeak8lrqwkkb Judy Palmer		154.36	11,543.86
2/25		Prestonwood Coun 00147339 250223 N096 68 Naran Judy		2,424.34	9,119.52
2/28		Wake County Sch Salary 250220 xxxxx9649 Naran Judy	443.28		9,562.80
Totals			\$19,760.71	\$11,641.35	

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.



Summary of checks written (checks listed are also displayed in the preceding Transaction history)

Number	Date	Amount	Number	Date	Amount	Number	Date	Amount
7939	2/3	100.00	7941 *	2/10	50.00	7942	2/18	50.00

* Gap in check sequence.

Monthly service fee summary

For a complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 02/01/2025 - 02/28/2025	Standard monthly service fee \$10.00	You paid \$0.00
The fee is waived this fee period because the account is linked to your Prime Checking, Premier Checking, or Private Bank Interest Checking account.		

How to avoid the monthly service fee	Minimum required	This fee period
Have any ONE of the following each fee period		
• Minimum daily balance	\$500.00	\$1,168.44
• Total amount of qualifying electronic deposits	\$500.00	\$1,416.66
• Age of primary account owner	17 - 24	
• Account is linked to a Wells Fargo Campus ATM Card or Campus Debit Card	1	0

RC/RC

IMPORTANT ACCOUNT INFORMATION

NEW YORK CITY CUSTOMERS ONLY -- Pursuant to New York City regulations, we request that you contact us at 1-800-TO WELLS (1-800-869-3557) to share your language preference.

Important Information You Should Know

■ To dispute or report inaccuracies in information we have furnished to a Consumer Reporting Agency about your accounts

Wells Fargo Bank, N.A. may furnish information about deposit accounts to Early Warning Services. You have the right to dispute the accuracy of information that we have furnished to a consumer reporting agency by writing to us at Overdraft Collection and Recovery, P.O. Box 5058, Portland, OR 97208-5058. Include with the dispute the following information as available: Full name (First, Middle, Last), Complete address, The account number or other information to identify the account being disputed, Last four digits of your social security number, Date of Birth. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.

■ If your account has a negative balance:

Please note that an account overdraft that is not resolved 60 days from the date the account first became overdrawn will result in closure and charge off of your account. In this event, it is important that you make arrangements to redirect recurring deposits and payments to another account. The closure will be reported to Early Warning Services. We reserve the right to close and/or charge-off your account at an earlier date, as permitted by law. The laws of some states require us to inform you that this communication is an attempt to collect a debt and that any information obtained will be used for that purpose.

■ In case of errors or questions about your electronic transfers:

Telephone us at the number printed on the front of this statement or write us at Wells Fargo Bank, P.O. Box 6995, Portland, OR 97228-6995 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1. Tell us your name and account number (if any).
2. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
3. Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

■ In case of errors or questions about other transactions (that are not electronic transfers):

Promptly review your account statement within 30 days after we made it available to you, and notify us of any errors.

■ Early Pay Day information

With Early Pay Day, we may make funds from certain eligible direct deposits available for your use up to two days before we receive the funds from your payor. The Bank does not guarantee that any direct deposits will be made available before the date scheduled by the payor, and early availability of funds may vary between direct deposits from the same payor. When funds are made available early, this will be reflected in your account's available balance. Direct deposits made available early with Early Pay Day will not increase your account's ending daily balance, and will not count towards applicable options to avoid your account's monthly service fee, until the deposit posts to your account and is no longer pending (e.g., the pay date scheduled by your payor). Determinations about whether we will authorize and pay transactions and assess overdraft fees are based on an account's available balance. For example, using funds added to your available balance by Early Pay Day may lead to a negative ending daily balance showing on your account and statement while your available balance remains positive and no overdraft fees or returned items result. For interest-bearing accounts, interest on your incoming direct deposit will begin accruing on the business day we receive credit for the deposit from your payor's bank. For additional information about Early Pay Day, please refer to your Deposit Account Agreement.

Amount

- [illegible]

(Part A + Part B - Part C)
This amount should be the same
as the current balance shown in
your check register. \$



EQUAL HOUSING
LENDER

NORTH CAROLINA

DRIVER LICENSE



Wayne Gordon

COMMISSIONER OF MOTOR VEHICLES



4d DLN 000004653228

3b DOB 12/13/1967

4b EXP 12/13/2031

1 NARAN

2 JUDY PALMER

8 125 ETHANS GLEN CT
CARY, NC 27513-3434

9 CLASS C

9a END NONE

12 RESTR 1

15 SEX F

18 EYES BRO

16 HGT 5'-04" 19 HAIR BLK RACE



Shirley Naran

4a ISS 07/07/2023

5 DD 0035467618

12/13/67

Form 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return		2024	OMB No. 1545-0074		IRS Use Only—Do not write or staple in this space.	
For the year Jan. 1–Dec. 31, 2024, or other tax year beginning _____, 20____, ending _____, 20____					See separate instructions.	
Your first name and middle initial PARESH		Last name NARAN		Your social security number 457-61-2949		
If joint return, spouse's first name and middle initial JUDY		Last name NARAN		Spouse's social security number 246-43-9649		
Home address (number and street). If you have a P.O. box, see instructions. 125 ETHANS GLEN COURT				Apt. no.		Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse
City, town, or post office. If you have a foreign address, also complete spaces below		State NC		ZIP code 27513		
Foreign country name		Foreign province/state/county		Foreign postal code		
Filing Status						
☐ Single		☐ Head of household (HOH)				
☒ Married filing jointly (even if only one had income)		☐ Qualifying surviving spouse (QSS)				
☐ Married filing separately (MFS)						
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____						
☐ If treating a nonresident alien or dual-status alien spouse as a U.S. resident for the entire tax year, check the box and enter their name (see instructions and attach statement if required): _____						
Digital Assets At any time during 2024, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No						
Standard Deduction Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent ☐ Spouse itemizes on a separate return or you were a dual-status alien						
Age/Blindness You: ☐ Were born before January 2, 1960 ☐ Are blind ☐ Spouse: ☐ Was born before January 2, 1960 ☐ Is blind						
Dependents (see instructions):						
(1) First name		Last name		(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions): Child tax credit ☐ Credit for other dependents ☐
If more than four dependents, see instr. and check here ☐						
Income						
1a		Total amount from Form(s) W-2, box 1 (see instructions)				1a
b		Household employee wages not reported on Form(s) W-2				1b
c		Tip income not reported on line 1a (see instructions)				1c
d		Medicaid waiver payments not reported on Form(s) W-2 (see instructions)				1d
e		Taxable dependent care benefits from Form 2441, line 26				1e
f		Employer-provided adoption benefits from Form 8839, line 29				1f
g		Wages from Form 8919, line 6				1g
h		Other earned income (see instructions)				1h
i		Nontaxable combat pay election (see instructions) ☐ 1i ☐				
z		Add lines 1a through 1h				1z
2a		Tax-exempt interest		2a	b Taxable interest	2b
3a		Qualified dividends		3a	b Ordinary dividends	3b
4a		IRA distributions		4a	b Taxable amount	4b
5a		Pensions and annuities		5a	b Taxable amount	5b
6a		Soc. sec. ben.		6a	b Taxable amount	6b
c		If you elect to use the lump-sum election method, check here (see instructions) ☐				
7		Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐				7
8		Additional income from Schedule 1, line 10				8
9		Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income				9
10		Adjustments to income from Schedule 1, line 26				10
11		Subtract line 10 from line 9. This is your adjusted gross income				11
12		Standard deduction or itemized deductions (from Schedule A)				12
13		Qualified business income deduction from Form 8995 or Form 8995-A				13
14		Add lines 12 and 13				14
15		Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income				15

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

Form **1040** (2024)

Tax and Credits

16

Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972

3 ☐

17

Amount from Schedule 2, line 3

17

18

Add lines 16 and 17

18

0

19

Child tax credit or credit for other dependents from Schedule 8812

19

20

Amount from Schedule 3, line 8

20

21

Add lines 19 and 20

21

22

Subtract line 21 from line 18. If zero or less, enter -0-

22

0

23

Other taxes, including self-employment tax, from Schedule 2, line 21

23

24

Add lines 22 and 23. This is your **total tax**

24

0

Payments

25

Federal income tax withheld from:

a

Form(s) W-2

25a

b

Form(s) 1099

25b

c

Other forms (see instructions)

25c

d

Add lines 25a through 25c

25d

26

2024 estimated tax payments and amount applied from 2023 return

26

5,000

27

Earned income credit (EIC)

27

28

Additional child tax credit from Schedule 8812

28

29

American opportunity credit from Form 8863, line 8

29

30

Reserved for future use

30

31

Amount from Schedule 3, line 15

31

32

Add lines 27, 28, 29, and 31. These are your **total other payments and refundable credits**

32

33

Add lines 25d, 26, and 32. These are your **total payments**

33

5,000

Refund

34

If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid**

34

5,000

35a

Amount of line 34 you want **refunded to you**. If Form 8888 is attached, check here ☐

35a

5,000

b

Routing number XXXXX XXXX

c

Type: ☐ Checking ☐ Savings

d

Account number XXXX XXXXXXX XXXXX

36

Amount of line 34 you want **applied to your 2025 estimated tax**

36

Amount You Owe

37

Subtract line 33 from line 24. This is the **amount you owe**.
For details on how to pay, go to www.irs.gov/Payments or see instructions

37

38

Estimated tax penalty (see instructions)

38

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions

☒ Yes. Complete below. ☐ No

Designee's name

SHELTON M. ENNIS, CPA

Phone no.

919-466-0946

Personal identification number (PIN)

74643

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature

Date

Your occupation

DOCTOR OF DENTISTRY

If the IRS sent you an Identity Protection PIN, enter it here (see instr.)

Spouse's signature. If a joint return, **both** must sign.

Date

Spouse's occupation

OFFICE ASSISTANT

If the IRS sent your spouse an Identity Protection PIN, enter it here (see instr.)

Phone no.

Email address

Preparer's name

Preparer's signature

Date

PTIN

Check if: ☐ Self-employed

Paid Preparer Use Only

SHELTON M. ENNIS, CPA

JOYCE AND COMPANY, CPA

104 BRADY CT

CARY NC 27511

03/05/25

P00746975

919-466-0946

56-2202813

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

Form 1040 (2024)

DAA

SCHEDULE 1
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

2024

Attachment
Sequence No. 01

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

PARESH & JUDY NARAN

Your social security number

457 - 61 - 2949

For 2024, enter the amount reported to you on Form(s) 1099-K that was included in error or for personal items sold at a loss

Note: The remaining amounts reported to you on Form(s) 1099-K should be reported elsewhere on your return depending on the nature of the transaction. See www.irs.gov/1099.

Part 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	- 11, 513
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
a	Net operating loss	8a	()
b	Gambling	8b	
c	Cancellation of debt	8c	
d	Foreign earned income exclusion from Form 2555	8d	()
e	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	
l	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	8l	
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m	
n	Section 951(a) inclusion (see instructions)	8n	
o	Section 951A(a) inclusion (see instructions)	8o	
p	Section 461(l) 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 nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t	
u	Wages earned while incarcerated	8u	
v	Digital assets received as ordinary income not reported elsewhere. See instructions	8v	
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. This is your additional income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10	- 11, 513

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

Schedule 1 (Form 1040) 2024

SCHEDULE E

(Form 1040)

Department of the Treasury
Internal Revenue Service

Name(s) shown on return

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.

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

OMB No. 1545-0074

2024

Attachment
Sequence No. 13

Your social security number

457-61-2949

PARESH & JUDY NARAN

Part I Income or Loss From Rental Real Estate and Royalties

Note: If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

A Did you make any payments in 2024 that would require you to file Form(s) 1099? See instructions ☐ Yes ☐ No
B If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No

1a Physical address of each property (street, city, state, ZIP code)

A 125 SOLSTICE CIRCLE, CARY, NC 27513
B 4703 WESTERN BLVD, RALEIGH, NC 27606-1815
C 125 ETHANS GLEN COURT, CARY, NC 27513

1b Type of Property
(from list below)

A 1
B 4
C 3

2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.

	Fair Rental Days	Personal Use Days	QJV
A	366		
B	366		
C			

Type of Property:

1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income:

3 Rents received **4** Royalties received

Expenses:

5 Advertising **6** Auto and travel (see instructions) **7** Cleaning and maintenance **8** Commissions **9** Insurance **10** Legal and other professional fees **11** Management fees **12** Mortgage interest paid to banks, etc. (see instructions) **13** Other interest **14** Repairs **15** Supplies **16** Taxes **17** Utilities **18** Depreciation expense or depletion **19** Other (list) **20** Total expenses. Add lines 5 through 19 **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** **22** Deductible rental real estate loss after limitation, if any, on **Form 8582** (see instructions)

Properties:

	A	B	C
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18	6,767	4,433	
19	45		268
20	6,812	4,433	268
21	-6,812	-4,433	-268
22	6,812	4,433	268

23a Total of all amounts reported on line 3 for all rental properties **23a**
b Total of all amounts reported on line 4 for all royalty properties **23b**
c 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** 11,200
e Total of all amounts reported on line 20 for all properties **23e** 11,513

24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses **24** 0
25 **Losses.** Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here **25** 11,513
26 **Total rental real estate and royalty income or (loss).** Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 **26** -11,513

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2024

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

PARESH & JUDY NARAN

457-61-2949

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations

Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you **must** check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which **any** amount is **not** at risk, you **must** check the box in column (f) on line 28 and attach **Form 6198**. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section

☐ Yes ☒ No

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
A	PARESH C. NARAN, DDS, P.A.	S		41-2047845		
B						
C						
D						

Passive Income and Loss			Nonpassive Income and Loss		
(g) Passive loss allowed (attach Form 8582 if required)		(h) Passive income from Schedule K-1	(i) Nonpassive loss allowed (see Schedule K-1)	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A			0		
B					
C					
D					
29a	Totals				
b	Totals				
30	Add columns (h) and (k) of line 29a			30	0
31	Add columns (g), (i), and (j) of line 29b			31	0
32	Total partnership and S corporation income or (loss). Combine lines 30 and 31				32 0

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A		
B		

Passive Income and Loss			Nonpassive Income and Loss		
(c) Passive deduction or loss allowed (attach Form 8582 if required)		(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1	
A					
B					
34a	Totals				
b	Totals				
35	Add columns (d) and (f) of line 34a			35	
36	Add columns (c) and (e) of line 34b			36	
37	Total estate and trust income or (loss). Combine lines 35 and 36				37

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs)—Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q , line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q , line 1b	(e) Income from Schedules Q , line 3b

39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below

39

Part V Summary

40	Net farm rental income or (loss) from Form 4835 . Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5	41	-11,513
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AN; and Schedule K-1 (Form 1041), box 14, code F. See instructions	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

Form **1116**

Department of the Treasury
Internal Revenue Service

Name

Foreign Tax Credit
(Individual, Estate, or Trust)

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0121

2024
Attachment
Sequence No. **19**

Identifying number as shown on page 1 of your tax return

PARESH

NARAN

457-61-2949

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a** ☐ Section 951A category income **c** ☒ Passive category income **e** ☐ Section 901(j) income **g** ☐ Lump-sum distributions
b ☐ Foreign branch category income **d** ☐ General category income **f** ☐ Certain income re-sourced by treaty

h Resident of (name of country) **US UNITED STATES**

Note: If you paid taxes to only one foreign country or U.S. territory, use column A in Part I and line A in Part II. If you paid taxes to **more than one** foreign country or U.S. territory, use a separate column and line for each country or territory.

Part I Taxable Income or Loss From Sources Outside the United States (for category checked above)

	Foreign Country or U.S. Territory			Total (Add cols. A, B, and C.)
	A	B	C	
i Enter the name of the foreign country or U.S. territory	OC			
	VARIOUS			
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
DIVIDENDS & INTEREST				1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions ☐				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related :				
a Certain itemized deductions or standard deduction (see instructions)	29,200			
b Other dedts. (attach stmt.)				
c Add lines 3a and 3b	29,200			
d Gross foreign source income (see instructions)				
e Gross income from all sources (see instructions)				
f Divide line 3d by line 3e (see instructions)				
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5				6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				7

Part II Foreign Taxes Paid or Accrued (see instructions)

Country	Credit is claimed for taxes (you must check one) (j) ☒ Paid (k) ☐ Accrued	Foreign taxes paid or accrued							(u) Total foreign taxes paid or accrued (add cols. (q) through (t))	
		In foreign currency			In U.S. dollars					
		Taxes withheld at source on:			Taxes withheld at source on:			(t) Other foreign taxes paid or accrued		
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	(p) Other foreign taxes paid or accrued	(q) Dividends	(r) Rents and royalties	(s) Interest	
A 1099 TAX										
B										
C										

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2

8

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2024)

PARESH NARAN**457-61-2949**

Form 1116 (2024)

Page **2****Part III Figuring the Credit**

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9		
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) SEE SCH B ☐ (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10		399
11	Add lines 9 and 10	11		399
12	Reduction in foreign taxes (see instructions)	12	()	
13	Taxes reclassified under high tax kickout (see instructions)	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		399
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions	15		
16	Adjustments to line 15 (see instructions)	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17		
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption	18		
	Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 1z. Estates and trusts: See instructions	20		
	Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 9978, Partner's Additional Reporting Year Tax, see instructions.			
21	Multiply line 20 by line 19 (maximum amount of credit)	21		
22	Increase in limitation (section 960 (c)) (see instructions)	22		
23	Add lines 21 and 22	23		
24	Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV See instructions	24		

Part IV Summary of Credits From Separate Parts III (see instructions)

25	Credit for taxes on section 951A category income	25		
26	Credit for taxes on foreign branch category income	26		
27	Credit for taxes on passive category income	27		
28	Credit for taxes on general category income	28		
29	Credit for taxes on section 901(j) income	29		
30	Credit for taxes on certain income re-sourced by treaty	30		
31	Credit for taxes on lump-sum distributions	31		
32	Add lines 25 through 31	32		
33	Enter the smaller of line 20 or line 32	33		
34	Reduction of credit for international boycott operations. See instructions for line 12	34		
35	Subtract line 34 from line 33. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a	35		0

Form **1116** (2024)

Form **8995**

Department of the Treasury
Internal Revenue Service

**Qualified Business Income Deduction
Simplified Computation**

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2024

Attachment
Sequence No. **55**

Name(s) shown on return

PARESH & JUDY NARAN

Your taxpayer identification number

457-61-2949

Note: You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$191,950 (\$383,900 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)
i	RENTAL HOUSE	457-61-2949	-6,812
ii	CHASAVA PROPERTIES, LLC	457-61-2949	-4,433
iii			
iv			
v			

2

Total qualified business income or (loss). Combine lines 1 through 1v, column (c)

2

-11,245

3

Qualified business net (loss) carryforward from the prior year

3

18,560

4

Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-

4

0

5

Qualified business income component. Multiply line 4 by 20% (0.20)

5

6

Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)

6

7

Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year

7

8

Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-

8

0

9

REIT and PTP component. Multiply line 8 by 20% (0.20)

9

10

Qualified business income deduction before the income limitation. Add lines 5 and 9

10

0

11

Taxable income before qualified business income deduction (see instructions)

11

-40,713

12

Enter your net capital gain, if any, increased by any qualified dividends (see instructions)

12

13

Subtract line 12 from line 11. If zero or less, enter -0-

13

0

14

Income limitation. Multiply line 13 by 20% (0.20)

14

0

15

Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions)

15

0

16

Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-

16

29,805

17

Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-

17

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

Form **8995** (2024)

Filing Status:	☐ 1 Single	☒ 2 Married filing jointly	☐ 3 Married filing separately	☐ 4 Head of household*	☐ 5 Qualifying widow(er)*
MFS spouse name:	*Qualifying person that is a child but not a dependent:				
Taxpayer first name and initial PARESH	Last name NARAN	Taxpayer social security number 457-61-2949			
If a joint return, spouse's first name and initial JUDY	Last name NARAN	Spouse's social security number 246-43-9649			
Home address (number and street). If you have a P.O. box, see instructions. 125 ETHANS GLEN COURT		Apt. no.	Presidential Election Campaign Taxpayer ☐ Spouse ☐		
City, town or post office, state, and ZIP code. CARY NC 27513					
Foreign country name	Foreign province/state/county	Foreign postal code			
At anytime during 2024, did you receive, sell, send, exchange, or otherwise acquire financial interest in any digital assets? Yes ☐ No ☒					
6a ☒ Taxpayer. If someone can claim you as a dependent, do not check box 6a	Boxes checked on 6a and 6b		2		
b ☒ Spouse	Children on 6c who lived with you				
	Children on 6c who did not live with you				
	Dependents on 6c not entered above				
	Total. Add lines above		2		
6C Dependents:					
(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) ☒ if qualifies for Child tax credit Other dependents	
				☐ ☐ ☐ ☐ ☐ ☐	
				☐ ☐ ☐ ☐ ☐ ☐	
				☐ ☐ ☐ ☐ ☐ ☐	
				☐ ☐ ☐ ☐ ☐ ☐	
				If more than four dependents, ☒ here	
Income (Schedule 1)					
7 Wages, salaries, tips, etc. Attach Form(s) W-2				7	
8a Taxable interest. Attach Schedule B if required				8a	
b Tax-exempt interest. Do not include on line 8a				8b	
9a Ordinary dividends. Attach Schedule B if required				9a	
b Qualified dividends				9b	
10 Taxable refunds, credits, or offsets of state and local income taxes				10	
11 Alimony received				11	
12 Business income or (loss). Attach Schedule C or C-EZ				12	
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐				13	
14 Other gains or (losses). Attach Form 4797				14	
15a IRA distributions				15a	
b Taxable amount				15b	
16a Pensions and annuities				16a	
b Taxable amount				16b	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E				17	
18 Farm income or (loss). Attach Schedule F				18	
19 Unemployment compensation				19	
20a Social security benefits				20a	
b Taxable amount				20b	
21 Other income. List type and amount				21	
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶				22	
				- 11,513	
Adjusted Gross Income (Schedule 1)					
23 Educator expenses				23	
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ				24	
25 Health savings account deduction. Attach Form 8889				25	
26 Moving expenses. Attach Form 3903				26	
27 Deductible part of self-employment tax. Attach Schedule SE				27	
28 Self-employed SEP, SIMPLE, and qualified plans				28	
29 Self-employed health insurance deduction				29	
30 Penalty on early withdrawal of savings				30	
31a Alimony paid b Recipient's SSN ▶				31a	
32 IRA deduction				32	
33 Student loan interest deduction				33	
34 Reserved for future use				34	
35 Reserved for future use				35	
36 Add lines 23 through 35				36	
37 Subtract line 36 from line 22. This is your adjusted gross income ▶				37	
				- 11,513	

Form 1040		Tax Return Reconciliation Worksheet, Page 2		2024	
Name PARESH & JUDY NARAN			Tp TIN 457-61-2949		
38 Amount from line 37 (adjusted gross income)			38 -11,513		
Tax and Credits (Schedules 2, 3)	39a Check ☐ You were born before January 2, 1960, ☐ Blind. ☐ Spouse was born before January 2, 1960, ☐ Blind. Total boxes checked 39a				
	b If your spouse itemizes on a separate return or you were a dual-status alien, check here ☐				
Standard Deduction for— • People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions. • All others: Single or Married filing separately, \$14,600 Married filing jointly or Qualifying widow(er), \$29,200 Head of household, \$21,900	40 Itemized deductions (from Schedule A) or your standard deduction (see left margin)		40 29,200		
	40b		40b		
	41 Subtract line 40 and 40b from line 38		41 -40,713		
	42 Qualified business income deduction (see instructions)		42		
	43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-		43 0		
	44 Tax (see instr.). Check if any from: a ☐ Form(s) 8814 b ☐ Form 4972 c ☐		44 0		
	45 Alternative minimum tax (see instructions). Attach Form 6251		45		
	46 Additions to tax (Excess advance premium tax credit repayment and clean vehicle repayment)		46		
	47 Add lines 44, 45, and 46		47		
	48 Foreign tax credit. Attach Form 1116 if required		48		
	49 Credit for child and dependent care expenses. Attach Form 2441		49		
	50 Education credits from Form 8863, line 19		50		
	51 Retirement savings contributions credit. Attach Form 8880		51		
	52 Child tax credit/credit for other dependents		52		
	53 Residential energy credits. Attach Form 5695		53		
	54 Other credits from Form ☐ 3800 b ☐ 8801 c ☐		54		
	55 Add lines 48 through 54. These are your total credits		55		
	56 Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-		56 0		
Other Taxes (Schedule 2)	57 Self-employment tax. Attach Schedule SE		57		
	58 Unreported social security and Medicare tax from Form ☐ 4137 b ☐ 8919		58		
	59 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required		59		
	60a Household employment taxes from Schedule H		60a		
	b First-time homebuyer credit repayment. Attach Form 5405 if required		60b		
	61 Taxes from: a ☐ Form 8959 b ☐ Form 8960 c ☐ Instructions; enter code(s)		61		
	62 Section 965 net tax liability installment from Form 965-A		62		
	63 Add lines 56 through 61. This is your total tax		63 0		
Payments (Schedule 3)	64 Federal income tax withheld from: a Form(s) W-2 b Form(s) 1099 c Other forms		64a 64b 64c		
	65 2024 estimated tax payments and amount applied from 2023 return		65 5,000		
	66 Earned income credit (EIC)		66		
	67 Additional child tax credit. Attach Schedule 8812		67		
	68 American opportunity credit from Form 8863, line 8		68		
	69 Recovery rebate credit		69		
	70 Net premium tax credit. Attach Form 8962		70		
	71 Amount paid with request for extension to file		71		
	72 Excess social security and tier 1 RRTA tax withheld		72		
	73 Credit for federal tax on fuels. Attach Form 4136		73		
	74 Other payments and refundable credits		74		
	75 Total pymts. Add lines 64 - 74.		75 5,000		
Refund	76 If line 75 is more than line 63, subtract line 63 from line 75. This is the amount you overpaid		76 5,000		
	77a Amount of line 76 you want refunded to you. If Form 8888 is attached, check here ☐		77a 5,000		
	b Routing number XXXXXXXXXX c Type: ☐ Checking ☐ Savings				
	d Account number XXXXXXXXXXXXXXXXXXXX				
	78 Amount of line 76 you want applied to your 2025 estimated tax		78		
Amount You Owe	79 Amount you owe. Subtract line 75 from line 63. For details on how to pay, see instructions		79		
	80 Estimated tax penalty (see instructions)		80		
Int/Pen	Date filed	Int	Fail to file	Fail to pay	Total
Third Party Designee	Do you want to allow another person to discuss this return with the IRS (see instructions) ☒ Yes. Complete below. ☐ No Personal identification no. (PIN) 74643				
	Designee's Name SHELTON M. ENNIS, CPA Phone no. 919-466-0946				
Other Info	Taxpayer Daytime phone number		Taxpayer: Occupation DOCTOR OF DENTISTRY		IRS Identity Protection PIN
	Spouse: Occupation OFFICE ASSISTANT				IRS Identity Protection PIN
	☐ Taxpayer	☐ Spouse	Email address		

RENTAL HOUSE

Statement 1 - Schedule E, Line 19 - Other Expenses

Description	Gross Amount	Business Use Percentage	Net Amount
AMORTIZATION	\$ 45		\$ 45
HOA DUES			
BANK FEES			
TOTAL	\$ 45		\$ 45

125 ETHANS GLEN COURT

Statement 2 - Schedule E, Line 19 - Other Expenses

Description	Gross Amount	Business Use Percentage	Net Amount
HOA DUES	\$		\$
C/O EXC CASUALTY/DEPRECIATION	268		268
TOTAL	\$ 268		\$ 268

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Passive Income

Form 1116, Line 10 - Carryback or Carryover

Year	Fgn Taxes Pd/Accrued	Limit	Available to Carryover
2014	\$	\$	\$
2015			
2016			
2017			
2018			
2019			
2020	384	280	21
2021	501	287	214
2022			
2023	603	439	164
CARRYBACK TO 2024			
TOTAL			\$ 399

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Form 1040	Shareholder's Basis Worksheet Page 1	2024
Name PARESH NARAN		Taxpayer Identification Number 457-61-2949
Name of Entity PARESH C. NARAN, DDS, P.A.		EIN 41-2047845
Passive Activity Type NOT PASSIVE		K1 Unit 3

Shareholder Stock Basis

1. Beginning of year stock basis. Per IRC 1367(a)(2) do not enter an amount below zero	1.	42,403
Increases to stock basis		
2. Capital contributions made or additional stock acquired	2.	
3. Ordinary business income	3.	
4. Net rental real estate income	4.	
5. Other net rental income	5.	
6. Interest, dividends and royalties	6.	
7. Net capital gains	7.	
8. Net section 1231 gain and ordinary business gain	8.	
9. Tax-exempt interest, other tax-exempt income and recapture credits	9.	
10. Other income	10.	
11. Excess of deductions for depletion over basis of property (other than oil and gas)	11.	
12. Other increases to stock basis	12.	
13. Total increases to stock basis. Combine lines 2 through 12	13.	0
14. Stock basis before distributions and items of loss or deductions. Add line 1 and line 13 and enter the result here	14.	42,403
Decreases to stock basis		
15. Distributions allowed	15.	
16. Stock basis after distributions and before items of loss or deductions. Subtract line 15 from line 14. If zero or less, enter - 0	16.	42,403
17. Losses and deductions applied against stock basis. (See Shareholder Basis Worksheet Page 2)	17.	
18. Other decreases to stock basis	18.	
19. Amount used to restore loan basis	19.	
20. Total decreases (other than distributions) to stock basis. Combine lines 17 through 19	20.	0
21. Stock basis at the end of year. (Subtract line 20 from line 16). Per IRC 1367(a)(2) do not enter an amount below zero	21.	42,403

Shareholder Debt Basis

22. Debt basis at the beginning of corporation's tax year	22.	
23. Additional loans	23.	
24. Debt basis restoration	24.	
25. Nontaxable debt repayment	25.	
26. Debt basis before losses and deductions. Combine lines 22 through 25	26.	
27. Losses and deductions applied against debt basis. (See Shareholder Basis Worksheet Page 3)	27.	
28. Debt basis at the end of year (Subtract line 27 from line 26).	28.	0
29. Stock and debt basis at the end of the year (Add lines 21 and line 28)	29.	42,403

Gain Recognized on Excess Distributions

30. Property distributions reported in Box 16, Code D, Schedule K-1 (1120S)	30.	
31. Stock basis before distributions and loss items (line 14) less gain from the entire disposition of stock reported on line 18.	31.	
32. Total gain recognized on excess distributions. (Subtract line 31 from line 30)	32.	
● Sch D/8949, short-term capital gain		
● Sch D/8949, long-term capital gain		

PARESH & JUDY NARAN
125 ETHANS GLEN COURT
CARY, NC 27513

Section 1.263(a)-3(h) Safe Harbor Election for Small Taxpayers

The taxpayer hereby elects, pursuant to Regulation 1.263(a)-3(h), to apply the safe harbor provisions to all amounts paid during the tax year for repairs, maintenance, improvements, and similar activities performed on the following eligible building(s).

Schedule E: RENTAL HOUSE

125 SOLSTICE CIRCLE

PARESH & JUDY NARAN
125 ETHANS GLEN COURT
CARY, NC 27513

Section 1.263(a)-3(h) Safe Harbor Election for Small Taxpayers

The taxpayer hereby elects, pursuant to Regulation 1.263(a)-3(h), to apply the safe harbor provisions to all amounts paid during the tax year for repairs, maintenance, improvements, and similar activities performed on the following eligible building(s).

Schedule E: CHASAVA PROPERTIES, LLC

4703 WESTERN BLVD

PARESH & JUDY NARAN
125 ETHANS GLEN COURT
CARY, NC 27513

Section 1.263(a)-3(h) Safe Harbor Election for Small Taxpayers

The taxpayer hereby elects, pursuant to Regulation 1.263(a)-3(h), to apply the safe harbor provisions to all amounts paid during the tax year for repairs, maintenance, improvements, and similar activities performed on the following eligible building(s).

Schedule E: 125 ETHANS GLEN COURT

125 ETHANS GLEN COURT

Form 1040	Broker Reconciliation Worksheet	2024
Name(s) of Account holder PARESH NARAN		Taxpayer identification number 457-61-2949
Payer's name CHARLES SCHWAB		Account number 6406-8183

Form/Schedule/Worksheet	Form/Sch Line No.	Form 1099 Name	Form 1099 Box No(s)	Amount
Schedule B				
Part I - Interest	1	1099-INT	1, 3, 10	
Part II - Ordinary Dividends	5	1099-DIV	1a	
Nondividend distributions		1099-DIV	3	
Schedule D				
Short-term 1099B transactions with no adjustments, basis reported to IRS	1a	1099-B		
Long-term 1099B transactions with no adjustments, basis reported to IRS	8a	1099-B		
Part II - Capital gain distributions	13	1099-DIV	2a	
28% Rate Capital Gain Worksheet (Schedule D, line 18)	1, 4	1099-DIV, B	2d, 3	
Unrecaptured Section 1250 Gain Worksheet (Schedule D, line 19)	11	1099-DIV	2b	
Schedule A				
State and local income taxes withheld	5a	1099 ALL	17, 15, 16	
Foreign tax deduction	6	1099-INT, DIV	6, 7	
Form 1040				
Tax-exempt interest	2a	1099-INT	8	
Tax-exempt interest dividends	2a	1099-DIV	11	
Qualified dividends	3a	1099-DIV	1b	
Penalty on early withdrawal of savings (Schedule 1)	18	1099-INT	2	
Foreign tax credit (Credit claimed without filing Form 1116) (Schedule 3)	1	1099-INT, DIV	6, 7	
Federal income tax withheld	25b	1099 ALL	4	
Section 199A dividends	13	1099-DIV	5	
Form 1116				
Part II Foreign taxes paid or accrued	8	1099-INT, DIV	6, 7	
Form 6251				
Interest from specified private activity bonds exempt from regular tax	2g	1099-INT	9	
Interest dividends from specified private activity bonds exempt from regular tax	2g	1099-DIV	12	
Form 8949				
Basis reported to IRS				
Short-term - 8949 Box A	1	1099-B		
Short-term - 8949 Box A (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box D	1	1099-B		
Long-term - 8949 Box D (column g) - Wash sale loss disallowed *	1	1099-B		
Basis not reported to IRS				
Short-term - 8949 Box B	1	1099-B		
Short-term - 8949 Box B (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box E	1	1099-B		
Long-term - 8949 Box E (column g) - Wash sale loss disallowed *	1	1099-B		
Not reported on Form 1099-B				
Short-term - 8949 Box C	1	1099-B		
Short-term - 8949 Box C (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box F	1	1099-B		
Long-term - 8949 Box F (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box F - Section 1202 gain exclusion adjustment	1	1099-DIV	2c	
Form 6781				
Net section 1256 contracts loss election				
Part I - Section 1256 Contracts Marked to Market	1	1099-B	11	
Form 1099-B adjustments	4			
Net section 1256 contracts loss carry back	6			
Form 4952				
Investment interest expenses - margin interest	1			

* Form 8949 column (g), amount of adjustment, is reported as wash sale loss disallowed for any transaction with a "W" in column (f) Code(s) from instructions. Therefore, transactions with multiple codes in column (f), may not reflect the true disallowed wash sale loss.

Form 1040	Broker Reconciliation Worksheet	2024
Name(s) of Account holder PARESH NARAN		Taxpayer identification number 457-61-2949
Payer's name WELLS FARGO		Account number 8741-4615

Form/Schedule/Worksheet	Form/Sch Line No.	Form 1099 Name	Form 1099 Box No(s)	Amount
Schedule B				
Part I - Interest	1	1099-INT	1, 3, 10	
Part II - Ordinary Dividends	5	1099-DIV	1a	
Nondividend distributions		1099-DIV	3	
Schedule D				
Short-term 1099B transactions with no adjustments, basis reported to IRS	1a	1099-B		
Long-term 1099B transactions with no adjustments, basis reported to IRS	8a	1099-B		
Part II - Capital gain distributions	13	1099-DIV	2a	
28% Rate Capital Gain Worksheet (Schedule D, line 18)	1, 4	1099-DIV, B	2d, 3	
Unrecaptured Section 1250 Gain Worksheet (Schedule D, line 19)	11	1099-DIV	2b	
Schedule A				
State and local income taxes withheld	5a	1099 ALL	17, 15, 16	
Foreign tax deduction	6	1099-INT, DIV	6, 7	
Form 1040				
Tax-exempt interest	2a	1099-INT	8	
Tax-exempt interest dividends	2a	1099-DIV	11	
Qualified dividends	3a	1099-DIV	1b	
Penalty on early withdrawal of savings (Schedule 1)	18	1099-INT	2	
Foreign tax credit (Credit claimed without filing Form 1116) (Schedule 3)	1	1099-INT, DIV	6, 7	
Federal income tax withheld	25b	1099 ALL	4	
Section 199A dividends	13	1099-DIV	5	
Form 1116				
Part II Foreign taxes paid or accrued	8	1099-INT, DIV	6, 7	
Form 6251				
Interest from specified private activity bonds exempt from regular tax	2g	1099-INT	9	
Interest dividends from specified private activity bonds exempt from regular tax	2g	1099-DIV	12	
Form 8949				
Basis reported to IRS				
Short-term - 8949 Box A	1	1099-B		
Short-term - 8949 Box A (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box D	1	1099-B		
Long-term - 8949 Box D (column g) - Wash sale loss disallowed *	1	1099-B		
Basis not reported to IRS				
Short-term - 8949 Box B	1	1099-B		
Short-term - 8949 Box B (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box E	1	1099-B		
Long-term - 8949 Box E (column g) - Wash sale loss disallowed *	1	1099-B		
Not reported on Form 1099-B				
Short-term - 8949 Box C	1	1099-B		
Short-term - 8949 Box C (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box F	1	1099-B		
Long-term - 8949 Box F (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box F - Section 1202 gain exclusion adjustment	1	1099-DIV	2c	
Form 6781				
Net section 1256 contracts loss election				
Part I - Section 1256 Contracts Marked to Market	1	1099-B	11	
Form 1099-B adjustments	4			
Net section 1256 contracts loss carry back	6			
Form 4952				
Investment interest expenses - margin interest	1			

* Form 8949 column (g), amount of adjustment, is reported as wash sale loss disallowed for any transaction with a "W" in column (f) Code(s) from instructions. Therefore, transactions with multiple codes in column (f), may not reflect the true disallowed wash sale loss.

Form 1040	QTP/ESA Basis Worksheet	2024
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949

Payer's/Trustee's name	COLLEGE FOUNDATION OF NC		
Account type	STATE QTP	Account number	
Beneficiary first name	CHASE P.	Beneficiary last name	NARAN

Worksheet for Determining QTP/ESA Basis Amounts

1. Basis in QTP/ESA as of December 31, 2023	1.	14,615
2. Enter QTP/ESA contributions for 2024	2.	
3. Add lines 1 and 2	3.	14,615
4. Enter distributions from this QTP/ESA during 2024	4.	
5. Subtract Line 4 from Line 3	5.	14,615
6. Other increases or decreases to basis	6.	
7. Basis in your QTP or ESA as of December 31, 2024	7.	14,615

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Form 1040	QTP/ESA Basis Worksheet	2024
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949

Payer's/Trustee's name	COLLEGE FOUNDATION OF NC		
Account type	STATE QTP	Account number	
Beneficiary first name	AVA P.	Beneficiary last name	NARAN

Worksheet for Determining QTP/ESA Basis Amounts

1. Basis in QTP/ESA as of December 31, 2023	1.	13,836
2. Enter QTP/ESA contributions for 2024	2.	
3. Add lines 1 and 2	3.	13,836
4. Enter distributions from this QTP/ESA during 2024	4.	
5. Subtract Line 4 from Line 3	5.	13,836
6. Other increases or decreases to basis	6.	
7. Basis in your QTP or ESA as of December 31, 2024	7.	13,836

COPY

Form 1040	QTP/ESA Basis Worksheet	2024
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949

Payer's/Trustee's name	COLLEGE FOUNDATION OF NC		
Account type	STATE QTP	Account number	
Beneficiary first name	AVA P.	Beneficiary last name	NARAN

Worksheet for Determining QTP/ESA Basis Amounts

1. Basis in QTP/ESA as of December 31, 2023	1.
2. Enter QTP/ESA contributions for 2024	2.
3. Add lines 1 and 2	3.
4. Enter distributions from this QTP/ESA during 2024	4.
5. Subtract Line 4 from Line 3	5.
6. Other increases or decreases to basis	6.
7. Basis in your QTP or ESA as of December 31, 2024	7.

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Form 1040	Foreign Tax Credit Carryover Report	2024
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949
Foreign Income Category		PASSIVE INCOME

Year	Regular	AMT
2015		
2016		
2017		
2018		
2019		
2020	21	
2021	214	109
2022		
2023	164	603
2024		
Carryover to 2025	399	712

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**SCHEDULE B
(Form 1116)**

(Rev. December 2022)

Department of the Treasury
Internal Revenue Service**Foreign Tax Carryover Reconciliation Schedule**For calendar year **2024**, or other tax year beginning, and ending**See separate instructions.****Attach to Form 1116.****Go to www.irs.gov/Form1116 for instructions and the latest information.**

OMB No. 1545-0121

Name

PARESH**NARAN**Identifying number as shown
on page 1 of your tax return**457-61-2949**

Use a separate Schedule B (Form 1116) for each applicable category of income listed below. See instructions. Check only one box on each schedule.

Check the box for the same separate category code as that shown on the Form 1116 to which this Schedule B is attached.

- a** ☐ Reserved for future use
c ☒ Passive category income
e ☐ Section 901(j) income
g ☐ Lump-sum distributions
b ☐ Foreign branch category income
d ☐ General category income
f ☐ Certain income re-sourced by treaty
h If box e is checked, enter the country code for the sanctioned country. See instructions
i If box f is checked, enter the country code for the treaty country. See instructions

Foreign Tax Carryover Reconciliation	(i) 10th Preceding Tax Year	(ii) 9th Preceding Tax Year	(iii) 8th Preceding Tax Year	(iv) 7th Preceding Tax Year	(v) 6th Preceding Tax Year	(vi) 5th Preceding Tax Year	(vii) Subtotal (add columns (i) through (vi))
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions))							
2 Adjustments to line 1 (enter description—see instructions):							
a Carryback adjustment (see instructions)							
b Adjustments for section 905(c) redeterminations (see instructions)							
c							
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2)							
4 Foreign tax carryover used in current tax year (enter as a negative number)							
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year							
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8 Foreign tax carryover to the following tax year. Combine lines 3 through 7.	-0-						

For Paperwork Reduction Act Notice, see the separate instructions.**Schedule B (Form 1116) (Rev. 12-2022)**

Foreign Tax Carryover Reconciliation <i>(continued)</i>	(viii) Subtotal from page 1 (enter the amounts from column (vii) on page 1)	(ix) 4th Preceding Tax Year	(x) 3rd Preceding Tax Year	(xi) 2nd Preceding Tax Year	(xii) 1st Preceding Tax Year	(xiii) Current Tax Year	(xiv) Totals (add columns (viii) through (xiii))
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions))		21	214		164		399
2 Adjustments to line 1 (enter description—see instructions):							
a Carryback adjustment (see instructions)							
b Adjustments for section 905(c) redeterminations (see instructions)							
c							
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1116, Part III, line 10.		21	214		164		399
4 Foreign tax carryover used in current tax year (enter as a negative number)							
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year							
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8 Foreign tax carryover to the following tax year. Combine lines 3 through 7.		21	214		164		399

Form **1040**

Foreign Tax Credit Carryover Worksheet

2024

Name
PARESH & JUDY NARAN

Taxpayer Identification Number
457-61-2949

Foreign Income Category

PASSIVE INCOME

Regular						
	Foreign Taxes Available	Maximum Credit Allowable	Unused (+) or Excess (-)	Carryback Applied from CY	Carryforward Applied to CY	* CY Unused (+) or Excess (-)
2014						
2015						
2016						
2017						
2018						
2019						
2020	384	280	21			21
2021	501	287	214			214
2022						
2023	603	439	164			164
2024						

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* Amounts flow to the Foreign Tax Credit Carryover Report

Alternative Minimum Tax						
	Foreign Taxes Available	Maximum Credit Allowable	Unused (+) or Excess (-)	Carryback Applied from CY	Carryforward Applied to CY	* CY Unused (+) or Excess (-)
2014						
2015						
2016						
2017						
2018						
2019						
2020						
2021	501	362	109			109
2022						
2023	603		603			603
2024						

* Amounts flow to the Foreign Tax Credit Carryover Report

Form 1040	Roth IRA Worksheets	2024 Pub 590A
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949

	Taxpayer IRA	Spouse IRA
Modified adjusted gross income for Roth IRA contributions		
Roth IRA Contribution Worksheet		
1. Enter your taxable compensation	1.	
2. Enter the smaller of line 1 or \$7000 (\$ 8000 if 50 or older)	2.	
3. Enter your total contributions to traditional IRAs for 2024	3.	
4. Subtract line 3 from line 2	4.	
5. Enter: \$240,000 if married filing jointly or qualifying surviving spouse; \$10,000 if married filing separately and you lived with your spouse at any time during the year. All other filers, enter \$161,000	5.	
6. Enter your modified AGI for purposes of Roth IRAs	6.	
7. Subtract line 6 from line 5. If zero or less, stop here ; you may not contribute to a Roth IRA for 2024. See Recharacterizations on page 3 of Form 8606 instructions if you made Roth IRA contributions for 2024	0	0
8. If line 5 above is \$161,000, enter \$15,000; otherwise, enter \$10,000. If line 7 is greater than or equal to line 8, skip lines 9 and 10, and enter the amount from line 4 on line 12	8.	
9. Divide line 7 by line 8 and enter the result as a decimal (rounded to at least 3 places). Do not enter more than "1.000"	9.	
10. Multiply line 2 by line 9. If the result is not a multiple of \$10, round it up to the next multiple of \$10 (e.g., round \$611.40 to \$620)	10.	
11. Enter the greater of \$200 or the amount on line 10	11.	
12. Maximum 2024 Roth IRA contribution. Enter the smaller of line 4 or line 11. See Recharacterizations on page 3 of Form 8606 instructions if you contributed more than this amount to Roth IRAs for 2024	12.	

	Taxpayer IRA	Spouse IRA
Modified adjusted gross income for Roth IRA conversions (does not include minimum required distributions)		
Worksheet for Determining Roth IRA Basis Amounts		
1. Basis in your Roth IRA contributions as of December 31, 2023.	13,500	13,500
2. Enter your Roth IRA contributions for 2024, adjusted for any recharacterizations.	2.	
3. Add lines 1 and 2.	13,500	13,500
4. Enter the amount, if any, from Form 8606, line 19.	4.	
5. Contribution basis loss.	5.	
Basis in your Roth IRA contributions as of December 31, 2024.		
6. Subtract lines 4 and 5 from line 3. If zero or less, enter -0-.	13,500	13,500
7. Basis in your Roth IRA conversions as of December 31, 2023.	7.	
8. Enter the amount(s), if any, from Form 8606 line 16.	8.	
9. Add lines 7 and 8.	9.	
10. Enter the amount, if any, from Form 8606, line 23.	10.	
11. Conversion basis loss.	11.	
Basis in your Roth IRA conversions as of December 31, 2024.		
12. Subtract lines 10 and 11 from line 9. If zero or less, enter -0-.	0	0

Form 1040	K-1 Reconciliation Worksheet - Sch E, B, D, Form 4797						2024	
Name PARESH NARAN						Taxpayer Identification Number 457-61-2949		
Entity Name PARESH C. NARAN, DDS, P.A.		EIN 41-2047845		Entity Type S CORPORATION		Screen K1		K1 Unit 3
Activity Passive Activity Type NOT PASSIVE								
	Current Year Amount	PY Suspended Basis Loss	Disallowed Basis Limitation	PY Suspended At-risk Loss	Disallowed At-risk Limitation	PY Suspended Passive Loss	Disallowed Loss Limitation	Tax Return
Schedule E page 2								
Ordinary business income/-loss								
Net rental real estate income/-loss								
Other net rental income/-loss								
Guaranteed payments								
Section 179 expense								
Disallowed Section 179 expense								
Depletion								
Section 59(e)(2) expenditures								
Preproductive period expense								
Reforestation expense deduct								
Other deductions								
Unreimbursed expenses								
Other inc/loss - Schedule E								
Debt financed acquisition								
Dependent care benefits								
Total Schedule E page 2								
Schedule E page 1								
Royalties								
Deductions-royalty income								
Depletion								
Total Schedule E page 1								
Schedule B								
Interest Income								
Tax-exempt interest income								
Dividend Income								
Qualified dividends (1040, Page 2)								
Schedule D/8949/6781								
Short-term capital gain/-loss								
Long-term capital gain/-loss								
28% capital gain/-loss								
1256 contracts and straddles								
Form 4797								
4797 Part I								
4797 Part II								
Section 179/280F recapture								

Form 1040	Form 8960 - Net Investment Income Worksheet 4	2024
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949

Section 1411 Net Operating Loss for Net Investment Income Tax

1. 2024 total net operating loss, including excess business loss if applicable **1. -11,513**
2. Net investment income from Form 8960, line 8 minus line 11 **2. -11,513**
- If line 1 and line 2 are losses, complete the Section 1411 applicable portion of net operating loss computation below.
3. Section 1411 net nonbusiness capital losses. Enter as a positive number **3. _____**
4. Section 1411 net nonbusiness capital gains **4. _____**
5. Section 1411 Nonbusiness deductions **5. _____**
6. Section 1411 Nonbusiness income other than capital gains **6. _____**
7. Add lines 4 and 6 **7. _____**
8. If line 5 is more than line 7, enter the difference; otherwise, enter -0- **8. 0**
9. If line 7 is more than line 5, enter the difference;
otherwise, enter -0- (But do not enter more than line 4) **9. 0**
10. Section 1411 business capital losses. Enter as a positive number **10. _____**
11. Section 1411 business capital gains **11. _____**
12. Add lines 9 and 11 **12. _____**
13. Subtract line 12 from line 10. If zero or less, enter -0- **13. 0**
14. Add lines 3 and 13 **14. _____**
15. Section 1202 exclusion. Enter as a positive number **15. _____**
16. Section 1411 NOL deduction for losses from other years **16. _____**
17. **Section 1411 NOL.** Combine lines 2, 8, 14, 15 and 16, but do not enter a loss greater than the NOL on line 1
If the result is less than zero, enter it here **17. -11,513**
- If the result is zero or more, you **do not** have a net investment income NOL
18. Divide line 17 by line 1 and enter as a positive percentage. **18. 100.0 %**
Section 1411 net investment income applicable portion of net operating loss

NOL Origination Year	Regular Tax NOL	Applicable Portion of NOL	Section 1411 NOL
Calendar Year 2024	-11,513	100.0 %	-11,513

Form 1040	Net Operating Loss Worksheet 1	2024
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949

Net Operating Loss Calculation

1	For individuals, subtract your standard deduction or itemized deductions from your adjusted gross income and enter it here. For estates and trusts, enter taxable income increased by the total of the charitable deduction, income distribution deduction, and exemption amount	1	-40,713
2	Nonbusiness capital losses before limitation. Enter as a positive number	2	
3	Nonbusiness capital gains (without regard to any section 1202 exclusion)	3	
4	If line 2 is more than line 3, enter the difference; otherwise, enter -0-	4	0
5	If line 3 is more than line 2, enter the difference; otherwise, enter -0-	5	0
6	Nonbusiness deductions (see instructions)	6	29,200
7	Nonbusiness income other than capital gains (see instructions)	7	
8	Add lines 5 and 7	8	
9	If line 6 is more than line 8, enter the difference; otherwise, enter -0-	9	29,200
10	If line 8 is more than line 6, enter the difference; otherwise, enter -0-. But do not enter more than line 5	10	0
11	Business capital losses before limitation. Enter as a positive number	11	
12	Business capital gains (without regard to any section 1202 exclusion)	12	
13	Add lines 10 and 12	13	
14	Subtract line 13 from line 11. If zero or less, enter -0-	14	0
15	Add lines 4 and 14	15	
16	Enter the loss, if any, from line 16 of Schedule D (Form 1040). (Estates and trusts, enter the loss, if any, from line 15, column (3), of Schedule D (Form 1041).) Enter as a positive number. If you do not have a loss on that line (and do not have a section 1202 exclusion), skip lines 16 through 21 and enter on line 22 the amount from line 15	16	
17	Section 1202 exclusion. Enter as a positive number	17	
18	Subtract line 17 from line 16. If zero or less, enter -0-	18	0
19	Enter the loss, if any, from line 21 of Schedule D (Form 1040). (Estates and trusts, enter the loss, if any, from line 16 of Schedule D (Form 1041).) Enter as a positive number	19	
20	If line 18 is more than line 19, enter the difference; otherwise, enter -0-	20	0
21	If line 19 is more than line 18, enter the difference; otherwise, enter -0-	21	0
22	Subtract line 20 from line 15. If zero or less, enter -0-	22	0
23	NOL deduction for losses from other years. Enter as a positive number	23	
24	NOL. Combine lines 1, 9, 17, and 21 through 23. If the result is less than zero, you have a current year NOL. If the result is zero or more, you do not have an NOL	24	-11,513

Farm Net Operating Loss Calculation

1 Schedule F - Profit or Loss from farming	1	
2 Form 4835 - Farm Rental eligible for income averaging	2	
3 Partnership and S corporation income or loss from farming activities	3	
4 Net ordinary gain or loss from sale of farming business property	4	
5 Capital gain/loss from sale of farming property	5	
6 Farm NOL. Combine lines 1 through 5. If the result is less than zero, you have a current year farm NOL. If the result is zero or more, you do not have a Farm NOL.	6	
7 Farm NOL available for carryback: Lesser of farm NOL or amount of NOL for the year	7	

Form 1040	AMT Net Operating Loss Worksheet 2	2024
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949

AMT Net Operating Loss Calculation		
1	Enter the amount from your 2024 Form 6251, line 1	-40,713
2	AMT Nonbusiness capital losses before limitation. Enter as a positive number	
3	AMT Nonbusiness capital gains (without regard to any section 1202 exclusion)	
4	If line 2 is more than line 3, enter the difference; otherwise, enter -0-	0
5	If line 3 is more than line 2, enter the difference; otherwise, enter -0-	0
6	Nonbusiness deductions (that are included in AMTI)	
7	Nonbusiness income other than capital gains (that are included in AMTI)	
8	Add lines 5 and 7	
9	If line 6 is more than line 8, enter the difference; otherwise, enter -0-	0
10	If line 8 is more than line 6, enter the difference; otherwise, enter -0-. But do not enter more than line 5	0
11	AMT Business capital losses before limitation. Enter as a positive number	
12	AMT Business capital gains (without regard to any section 1202 exclusion)	
13	Add lines 10 and 12	
14	Subtract line 13 from line 11. If zero or less, enter -0-	0
15	Add lines 4 and 14	
16	Enter the loss, if any, from line 16 of Schedule D - AMT. Enter as a positive number. If you do not have a loss on that line (and do not have a section 1202 exclusion), skip lines 16 through 21 and enter on line 22 and enter on line 22 the amount from line 15	
17	Section 1202 exclusion. Enter as a positive number	
18	Subtract line 17 from line 16. If zero or less, enter -0-	0
19	Enter the loss, if any, from line 21 of Schedule D - AMT. Enter as a positive number.	
20	If line 18 is more than line 19, enter the difference; otherwise, enter -0-	0
21	If line 19 is more than line 18, enter the difference; otherwise, enter -0-	0
22	Subtract line 20 from line 15. If zero or less, enter -0-	0
23	AMT NOL deduction for losses from other years. Enter as a positive amount.	
24	Total adjustment and certain preference items from Form 6251	29,200
25	AMTNOL. Combine lines 1, 9, 17, and 21 through 24. If the result is zero or more, you do not have an AMTNOL.	-11,513

Form	1040	Net Operating Loss Carryover Information	2024
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Name	PARESH & JUDY NARAN	Taxpayer Identification Number	457-61-2949
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Post-2017 Net Operating Loss Carryover Information

	Regular	AMT
Carryover from prior years		
Excess business loss		
2024 Net operating loss	11,513	11,513
2024 Utilized on carryback / return		
Carryover to 2025	11,513	11,513

Pre-2018 Net Operating Loss Carryover Information

Prior Year Carryover	Prior Amounts Utilized	Carryover to 2025
2004	2004	
2005	2005	2005
2006	2006	2006
2007	2007	2007
2008	2008	2008
2009	2009	2009
2010	2010	2010
2011	2011	2011
2012	2012	2012
2013	2013	2013
2014	2014	2014
2015	2015	2015
2016	2016	2016
2017	2017	2017
	2024	2024
	Total	

Pre-2018 AMT Net Operating Loss Carryover Information

Prior Year Carryover	Prior Amounts Utilized	Carryover to 2025
2004	2004	
2005	2005	2005
2006	2006	2006
2007	2007	2006
2008	2008	2008
2009	2009	2009
2010	2010	2010
2011	2011	2011
2012	2012	2012
2013	2013	2013
2014	2014	2014
2015	2015	2015
2016	2016	2016
2017	2017	2017
	2024	2024
	Total	

Form 1040	Passive Activity Deduction Worksheet	2024
Name PARESH NARAN		Taxpayer Identification Number 457-61-2949
Activity RENTAL HOUSE	Form SCH E	Unit 1
Type RENTAL REAL ESTATE W/ACTIVE PARTICIPATION	Entire Disposition of Activity	

Regular Tax Loss Calculations

	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized	Suspended Losses To Next Year
Operating		6,812	6,812	
Short-term capital loss				
Long-term capital loss				
28% rate capital loss				
Section 1231 loss				
Ordinary business loss				
Other Losses - 1040 Schedule 1				

Alternative Minimum Tax Loss Calculations

	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized	Suspended Losses To Next Year
Operating		6,812	6,812	
Short-term capital loss				
Long-term capital loss				
28% rate capital loss				
Section 1231 loss				
Ordinary business loss				
Other Losses - 1040 Schedule 1				

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Form 1040	Passive Activity Deduction Worksheet	2024
Name PARESH NARAN		Taxpayer Identification Number 457-61-2949
Activity CHASAVA PROPERTIES, LLC	Form SCH E	Unit 2
Type RENTAL REAL ESTATE W/ACTIVE PARTICIPATION	Entire Disposition of Activity	

Regular Tax Loss Calculations

	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized	Suspended Losses To Next Year
Operating		4,433	4,433	
Short-term capital loss				
Long-term capital loss				
28% rate capital loss				
Section 1231 loss				
Ordinary business loss				
Other Losses - 1040 Schedule 1				

Alternative Minimum Tax Loss Calculations

	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized	Suspended Losses To Next Year
Operating		4,433	4,433	
Short-term capital loss				
Long-term capital loss				
28% rate capital loss				
Section 1231 loss				
Ordinary business loss				
Other Losses - 1040 Schedule 1				

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Form 1040	Passive Activity Deduction Worksheet	2024
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949
Activity 125 ETHANS GLEN COURT	Form SCH E Unit 3	
Type RENTAL REAL ESTATE W/ACTIVE PARTICIPATION	Entire Disposition of Activity	

Regular Tax Loss Calculations

	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized	Suspended Losses To Next Year
Operating		268	268	
Short-term capital loss				
Long-term capital loss				
28% rate capital loss				
Section 1231 loss				
Ordinary business loss				
Other Losses - 1040 Schedule 1				

Alternative Minimum Tax Loss Calculations

	Prior Year Suspended Losses	Current Year Generated	Current Year Utilized	Suspended Losses To Next Year
Operating		268	268	
Short-term capital loss				
Long-term capital loss				
28% rate capital loss				
Section 1231 loss				
Ordinary business loss				
Other Losses - 1040 Schedule 1				

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Schedule E	Qualified Business Income Calculation Worksheet	2024
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Name PARESH & JUDY NARAN	Taxpayer Identification Number 457-61-2949
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Property Description RENTAL HOUSE	Form/Schedule E	Unit 1
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1. Schedule E, Page 1, Net rental real estate income or (loss)	1. - 6,812
Additions for qualified business income:	
2. Form 4797, Ordinary income	2.
Prior year suspended losses utilized this year:	
3. Passive suspended losses	3.
4. At-Risk suspended losses	4.
5. Section 179 expense	5.
6. Total additions to net profit or (loss). Add lines 2 through 5.	6.
Subtractions for qualified business income	
7. Form 4797, Ordinary loss (includes share of net 1231 loss)	7.
8. Reserved	8.
9. Reserved	9.
10. Total subtraction to net profit or (loss). Add lines 7 through 9.	10.
11. Qualified business income for this activity. Line 1 plus line 6 less line 10.	11. - 6,812

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	Beginning of Year			End of Year		
Carryovers:	Pre -2018	After 2017	Allowed loss	Pre -2018	After 2017	QBI Portion of
Passive activity:	(A)	(B)	(C)	(D)	(E)	Allowed Losses
Operating						
Form 4797, Part II						
Section 1231 loss						
At-Risk:						
Operating						
Form 4797, Part II						
Section 1231 loss						
Section 179 expense						
Other:						
Section 179 expense						

Amount to Form 8995, line 3 or Schedule C (Form 8995-A), line 2 qualified business loss carryforward

Schedule E	Qualified Business Income Calculation Worksheet	2024
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949
Property Description CHASAVA PROPERTIES, LLC		Form/Schedule E Unit 2

1. Schedule E, Page 1, Net rental real estate income or (loss)	1. -4,433
Additions for qualified business income:	
2. Form 4797, Ordinary income	2.
Prior year suspended losses utilized this year:	
3. Passive suspended losses	3.
4. At-Risk suspended losses	4.
5. Section 179 expense	5.
6. Total additions to net profit or (loss). Add lines 2 through 5.	6.
Subtractions for qualified business income	
7. Form 4797, Ordinary loss (includes share of net 1231 loss)	7.
8. Reserved	8.
9. Reserved	9.
10. Total subtraction to net profit or (loss). Add lines 7 through 9.	10.
11. Qualified business income for this activity. Line 1 plus line 6 less line 10.	11. -4,433

	Beginning of Year			End of Year		QBI Portion of Allowed Losses
Carryovers:	Pre -2018 (A)	After 2017 (B)	Allowed loss (C)	Pre -2018 (D)	After 2017 (E)	
Passive activity:						
Operating						
Form 4797, Part II						
Section 1231 loss						
At-Risk:						
Operating						
Form 4797, Part II						
Section 1231 loss						
Section 179 expense						
Other:						
Section 179 expense						

Amount to Form 8995, line 3 or Schedule C (Form 8995-A), line 2 qualified business loss carryforward _____

Form **1040**

Rent and Royalty Reconciliation

2024

Name
PARESH & JUDY NARAN

Taxpayer identification number
457-61-2949

Property description
RENTAL HOUSE

Unit **1** Ownership Percentage
T, S, J **T** Business Use Percentage **100.00**

Passive type: **ACTIVE PARTICIPATION** State **NC** Personal Use Percentage

1. Physical address:
Street **125 SOLSTICE CIRCLE**
City, state, zip **CARY NC 27513**
Property type: **SINGLE FAMILY RESIDENCE**

2. Property Use Information:
Fair Rental Days **366**
Personal Use Days
QJV

	Column A	Column B	Column C	(Column A - B - C)
	Total Income/Expense	Nonbusiness Expenses	Vacation Home / Personal Use Expenses	Income / Expenses Reported on Schedule E
Income:				
3. Rents received				
4. Royalties received				
Expenses:				
5. Advertising				
Auto				
Travel				
6. Auto and travel (total)				
7. Cleaning and maintenance				
8. Commissions				
9. Insurance				
10. Legal and other professional fees				
11. Management fees				
Mortgage interest from 1098				
Refinancing points on 1098				
12. Mortgage interest paid to banks, etc.				
Other mortgage interest				
Other interest				
Refinancing points				
Qualified mortgage insurance				
13. Other interest (total)				
14. Repairs				
15. Supplies				
Real estate taxes				
All other taxes				
16. Taxes (total)				
17. Utilities				
18. Depreciation expense or depletion	6,767			6,767
19. Other (list)				
HOA DUES				
BANK FEES				
AMORTIZATION	45			45
20. Total expenses. Add lines 5 through 19	6,812			6,812
21. Income or (loss) from rental or royalty properties.				-6,812

-4,433

[illegible]

Form 1040, Line 26 - Estimated Tax Payments and Amount Applied From Previous Year

Description	Amount
2023 OVERPAYMENT APPLIED	\$ 5,000
TOTAL	\$ 5,000

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RENTAL HOUSE

Schedule E, Line 3 - Rents Received

Description	Amount
RENTS AND ROYALTIES	\$
TOTAL	\$ 0

RENTAL HOUSE

Schedule E, Line 9 - Insurance

Description	Gross Amount	Business Use Percentage	Net Amount
INSURANCE	\$		\$
TOTAL	\$ 0		\$ 0

RENTAL HOUSE

Schedule E, Line 16 - Taxes

Description	Gross Amount	Business Use Percentage	Net Amount
REAL ESTATE TAXES	\$		\$
TOTAL	\$ 0		\$ 0

CHASAVA PROPERTIES, LLC

Schedule E, Line 3 - Rents Received

Description	Amount
RENTS AND ROYALTIES	\$
TOTAL	\$ 0

CHASAVA PROPERTIES, LLC

Schedule E, Line 16 - Taxes

Description	Gross Amount	Business Use Percentage	Net Amount
REAL ESTATE TAXES	\$		\$
TOTAL	\$ 0		\$ 0

125 ETHANS GLEN COURT

Schedule E, Line 16 - Taxes

Description	Gross Amount	Business Use Percentage	Net Amount
REAL ESTATE TAXES	\$		\$
TOTAL	\$0		\$0

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NOL Worksheet 1, Line 6 - Nonbusiness Deductions

Description	Amount
STANDARD DEDUCTION	\$ 29,200
TOTAL	<u>\$ 29,200</u>

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Prior MACRS:											
7	CARPET	6/27/08	3,486			X	1,743	5	HY 200DB	3,486	0
8	RENOVATIONS	7/15/08	6,510				6,510	27	MMS/L	3,659	237
9	REFRIGERATOR	8/10/15	997			X	498	5	HY 200DB	997	0
10	LENNOX GAS PACKAGE HVAC UNIT	1/03/17	3,980		X	X	0	5	HY 200DB	3,980	0
11	FENCE	9/01/19	5,025			X	0	15	HY 150DB	5,025	0
12	RANGE, DISHWASHER, MICROWAVE	4/18/21	2,718				2,718	5	HY 200DB	1,935	313
13	FLOORING	11/30/23	14,479				14,479	27	MMS/L	66	526
14	CABINETS	10/10/23	8,656				8,656	27	MMS/L	66	314
15	GARAGE DOORS	10/03/23	3,090			X	618	15	MQ 150DB	2,480	61
16	COUNTER TOPS	10/27/23	14,479				14,479	27	MMS/L	110	526
17	BLINDS	12/04/23	1,206			X	241	15	MQ 150DB	968	24
			<u>64,626</u>				<u>49,942</u>			<u>22,772</u>	<u>2,001</u>
Other Depreciation:											
2	HOUSE	10/22/99	131,059				131,059	27	MO S/L	115,372	4,766
3	LAND	10/22/99	<u>14,562</u>				<u>14,562</u>	0	-- Land	<u>0</u>	<u>0</u>
	Total Other Depreciation		<u>145,621</u>				<u>145,621</u>			<u>115,372</u>	<u>4,766</u>
	Total ACRS and Other Depreciation		<u>145,621</u>				<u>145,621</u>			<u>115,372</u>	<u>4,766</u>
Amortization:											
1	REFINANCED POINTS	10/22/99	1,307				1,307	29	MO Amort	1,082	45
4	REFINANCE	8/22/03	<u>5,475</u>				<u>5,475</u>	5	MO Amort	<u>5,475</u>	<u>0</u>
			<u>6,782</u>				<u>6,782</u>			<u>6,557</u>	<u>45</u>
	Grand Totals		217,029				202,345			144,701	6,812
	Less: Dispositions and Transfers		0				0			0	0
	Less: Start-up/Org Expense		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Net Grand Totals		<u>217,029</u>				<u>202,345</u>			<u>144,701</u>	<u>6,812</u>

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Prior MACRS:											
1	BUILDING	9/27/02	172,869				172,869	39	MMS/L	94,376	4,433
3	HEAT PUMP	4/01/22	6,404			X	0	5	HY 200DB	6,404	0
			<u>179,273</u>				<u>172,869</u>			<u>100,780</u>	<u>4,433</u>
Other Depreciation:											
2	LAND	9/27/02	19,208				19,208	0	-- Land	0	0
Total Other Depreciation			<u>19,208</u>				<u>19,208</u>			<u>0</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>19,208</u>				<u>19,208</u>			<u>0</u>	<u>0</u>
Grand Totals			198,481				192,077			100,780	4,433
Less: Dispositions and Transfers			0				0			0	0
Less: Start-up/Org Expense			0				0			0	0
Net Grand Totals			<u>198,481</u>				<u>192,077</u>			<u>100,780</u>	<u>4,433</u>

COPY

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Prior MACRS:											
1	HOUSE	11/22/19	379,415	41.37			156,964	27	MMS/L	45,731	0
	Out Of Service: 6/01/23										
3	SHUTTERS	3/03/21	4,142	41.37			1,714	7	HY 200DB	4,142	0
	Out Of Service: 6/01/23										
5	GUTTERS	11/14/22	4,394	41.37			1,818	27	MMS/L	50	0
	Out Of Service: 6/01/23										
			<u>387,951</u>				<u>160,496</u>			<u>49,923</u>	<u>0</u>
Other Depreciation:											
2	LAND	11/22/19	94,854	41.37			39,241	0	-- Land	0	0
	Out Of Service: 6/01/23										
	Total Other Depreciation		<u>94,854</u>				<u>39,241</u>			<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>94,854</u>				<u>39,241</u>			<u>0</u>	<u>0</u>
Grand Totals			482,805				199,737			49,923	0
Less: Dispositions and Transfers			0				0			0	0
Less: Start-up/Org Expense			0				0			0	0
Net Grand Totals			<u>482,805</u>				<u>199,737</u>			<u>49,923</u>	<u>0</u>

COPY

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
7	CARPET	6/27/08	3,486		0	0	1,743	1,743
9	REFRIGERATOR	8/10/15	997		0	0	499	498
10	LENNOX GAS PACKAGE HVAC UNIT	1/03/17	3,980		3,980	0	0	0
11	FENCE	9/01/19	5,025		0	0	5,025	0
13	FLOORING	11/30/23	14,479		0	0	0	14,479
15	GARAGE DOORS	10/03/23	3,090		0	0	2,472	618
16	COUNTER TOPS	10/27/23	14,479		0	0	0	14,479
17	BLINDS	12/04/23	1,206		0	0	965	241
Grand Total			46,742		0	0	10,704	32,058

COPY

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
3	HEAT PUMP	4/01/22	6,404		0	0	6,404	0
Grand Total			6,404		0	0	6,404	0

COPY

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Qualified Property
2	HOUSE	10/22/99	131,059	100.00	131,059
8	RENOVATIONS	7/15/08	6,510	100.00	6,510
9	REFRIGERATOR	8/10/15	997	100.00	997
10	LENNOX GAS PACKAGE HVAC UNIT	1/03/17	3,980	100.00	3,980
11	FENCE	9/01/19	5,025	100.00	5,025
12	RANGE, DISHWASHER, MICROWAVE	4/18/21	2,718	100.00	2,718
13	FLOORING	11/30/23	14,479	100.00	14,479
14	CABINETS	10/10/23	8,656	100.00	8,656
15	GARAGE DOORS	10/03/23	3,090	100.00	3,090
16	COUNTER TOPS	10/27/23	14,479	100.00	14,479
17	BLINDS	12/04/23	1,206	100.00	1,206
Grand Total			192,199		192,199

COPY

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Qualified Property
1	BUILDING	9/27/02	172,869	100.00	172,869
3	HEAT PUMP	4/01/22	6,404	100.00	6,404
Grand Total			179,273		179,273

COPY

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Prior MACRS:											
7	CARPET	6/27/08	3,486			X	1,743	5	HY 200DB	3,486	0
8	RENOVATIONS	7/15/08	6,510				6,510	27	MMS/L	3,659	237
9	REFRIGERATOR	8/10/15	997			X	498	5	HY 200DB	997	0
10	LENNOX GAS PACKAGE HVAC UNIT	1/03/17	3,980		X	X	0	5	HY 200DB	3,980	0
11	FENCE	9/01/19	5,025			X	0	15	HY 150DB	5,025	0
12	RANGE, DISHWASHER, MICROWAVE	4/18/21	2,718				2,718	5	HY 200DB	1,935	313
13	FLOORING	11/30/23	14,479				14,479	27	MMS/L	66	526
14	CABINETS	10/10/23	8,656				8,656	27	MMS/L	66	314
15	GARAGE DOORS	10/03/23	3,090			X	618	15	MQ 150DB	2,480	61
16	COUNTER TOPS	10/27/23	14,479				14,479	27	MMS/L	110	526
17	BLINDS	12/04/23	1,206			X	241	15	MQ 150DB	968	24
			<u>64,626</u>				<u>49,942</u>			<u>22,772</u>	<u>2,001</u>
Other Depreciation:											
2	HOUSE	10/22/99	131,059				131,059	27	MO S/L	115,372	4,766
3	LAND	10/22/99	<u>14,562</u>				<u>14,562</u>	0	-- Land	<u>0</u>	<u>0</u>
	Total Other Depreciation		<u>145,621</u>				<u>145,621</u>			<u>115,372</u>	<u>4,766</u>
	Total ACRS and Other Depreciation		<u>145,621</u>				<u>145,621</u>			<u>115,372</u>	<u>4,766</u>
	Grand Totals		<u>210,247</u>				<u>195,563</u>			<u>138,144</u>	<u>6,767</u>
	Less: Dispositions and Transfers		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Net Grand Totals		<u>210,247</u>				<u>195,563</u>			<u>138,144</u>	<u>6,767</u>

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Prior MACRS:											
1	BUILDING	9/27/02	172,869				172,869	39	MMS/L	94,376	4,433
3	HEAT PUMP	4/01/22	6,404			X	0	5	HY 200DB	6,404	0
			<u>179,273</u>				<u>172,869</u>			<u>100,780</u>	<u>4,433</u>
Other Depreciation:											
2	LAND	9/27/02	19,208				19,208	0	-- Land	0	0
Total Other Depreciation			<u>19,208</u>				<u>19,208</u>			<u>0</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>19,208</u>				<u>19,208</u>			<u>0</u>	<u>0</u>
Grand Totals			198,481				192,077			100,780	4,433
Less: Dispositions and Transfers			<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
Net Grand Totals			<u>198,481</u>				<u>192,077</u>			<u>100,780</u>	<u>4,433</u>

COPY

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:										
1	HOUSE	11/22/19	379,415	41.37			156,964	27 MMS/L	45,731	0
	Out Of Service: 6/01/23									
3	SHUTTERS	3/03/21	4,142	41.37			1,714	7 HY 200DB	4,142	0
	Out Of Service: 6/01/23									
5	GUTTERS	11/14/22	4,394	41.37			1,818	27 MMS/L	50	0
	Out Of Service: 6/01/23									
			<u>387,951</u>				<u>160,496</u>		<u>49,923</u>	<u>0</u>
Other Depreciation:										
2	LAND	11/22/19	94,854	41.37			39,241	0 -- Land	0	0
	Out Of Service: 6/01/23									
	Total Other Depreciation		<u>94,854</u>				<u>39,241</u>		<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>94,854</u>				<u>39,241</u>		<u>0</u>	<u>0</u>
	Grand Totals		482,805				199,737		49,923	0
	Less: Dispositions and Transfers		<u>0</u>				<u>0</u>		<u>0</u>	<u>0</u>
	Net Grand Totals		<u>482,805</u>				<u>199,737</u>		<u>49,923</u>	<u>0</u>

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Form 1040	Carryover Report	2024																																																																																												
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949																																																																																												
<table><thead><tr><th>Carryover Item</th><th>Available to 2024</th><th>2024 Amounts</th><th>Carryover to 2025</th></tr></thead><tbody><tr><td>Minimum tax credit</td><td></td><td></td><td></td></tr><tr><td>Investment interest</td><td></td><td></td><td></td></tr><tr><td>Investment interest - AMT</td><td></td><td></td><td></td></tr><tr><td>Short-term capital loss</td><td></td><td></td><td></td></tr><tr><td>Short-term capital loss - AMT</td><td></td><td></td><td></td></tr><tr><td>Long-term capital loss</td><td></td><td></td><td></td></tr><tr><td>Long-term capital loss - AMT</td><td></td><td></td><td></td></tr><tr><td>Residential energy efficient property</td><td></td><td></td><td></td></tr><tr><td>D.C. first-time homebuyer credit</td><td></td><td></td><td></td></tr><tr><td>Tax credit bonds</td><td></td><td></td><td></td></tr><tr><td>Qualified business income loss</td><td>18,560</td><td>GENERATED</td><td>11,245</td></tr><tr><td>Qualified REIT income and PTP loss</td><td></td><td></td><td></td></tr><tr><td>Excess business loss portion of NOL</td><td></td><td></td><td></td></tr></tbody></table>	Carryover Item	Available to 2024	2024 Amounts	Carryover to 2025	Minimum tax credit				Investment interest				Investment interest - AMT				Short-term capital loss				Short-term capital loss - AMT				Long-term capital loss				Long-term capital loss - AMT				Residential energy efficient property				D.C. first-time homebuyer credit				Tax credit bonds				Qualified business income loss	18,560	GENERATED	11,245	Qualified REIT income and PTP loss				Excess business loss portion of NOL				<table><thead><tr><th colspan="2">Nonrecaptured Section 1231 Losses - Line 8, Form 4797</th></tr></thead><tbody><tr><td>2019 Amounts</td><td>GENERATED 310</td></tr><tr><td>2020 Amounts</td><td></td></tr><tr><td>2021 Amounts</td><td></td></tr><tr><td>2022 Amounts</td><td>UTILIZED -310</td></tr><tr><td>2023 Amounts</td><td>GENERATED 473</td></tr><tr><td>Available to 2024</td><td>473</td></tr><tr><td>2024 Amounts</td><td></td></tr><tr><td>Carryover to 2025</td><td>473</td></tr></tbody></table>	Nonrecaptured Section 1231 Losses - Line 8, Form 4797		2019 Amounts	GENERATED 310	2020 Amounts		2021 Amounts		2022 Amounts	UTILIZED -310	2023 Amounts	GENERATED 473	Available to 2024	473	2024 Amounts		Carryover to 2025	473	<table><thead><tr><th colspan="2">AMT Nonrecaptured Section 1231 Losses - Line 8, Form 4797</th></tr></thead><tbody><tr><td>2019 Amounts</td><td>GENERATED 311</td></tr><tr><td>2020 Amounts</td><td></td></tr><tr><td>2021 Amounts</td><td></td></tr><tr><td>2022 Amounts</td><td>UTILIZED -311</td></tr><tr><td>2023 Amounts</td><td>GENERATED 473</td></tr><tr><td>Available to 2024</td><td>473</td></tr><tr><td>2024 Amounts</td><td></td></tr><tr><td>Carryover to 2025</td><td>473</td></tr></tbody></table>	AMT Nonrecaptured Section 1231 Losses - Line 8, Form 4797		2019 Amounts	GENERATED 311	2020 Amounts		2021 Amounts		2022 Amounts	UTILIZED -311	2023 Amounts	GENERATED 473	Available to 2024	473	2024 Amounts		Carryover to 2025	473
Carryover Item	Available to 2024	2024 Amounts	Carryover to 2025																																																																																											
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Form 1040		Two Year Comparison Report - Page 1		2023 & 2024	
Name PARESH & JUDY NARAN			Taxpayer Identification Number 457-61-2949		
		2023	2024	Differences	
		MFJ	MFJ		
		0	0		
Filing Status					
Dependents					
1. Salaries and wages	1.	65,810		-65,810	
2. Interest income	2.	33,470		-33,470	
3. Tax exempt interest income	3.	331		-331	
4. Dividend income	4.	38,785		-38,785	
5. Qualified dividend income	5.	16,941		-16,941	
6. Taxable state/local refunds	6.				
7. Alimony received	7.				
8. Business income/loss	8.				
9. Capital gain/loss	9.	-2,091		2,091	
10. Other gains/losses	10.	-473		473	
11. Taxable IRA distributions	11.				
12. Taxable pensions	12.				
13. Rent and royalty income including farm rental	13.	10,137	-11,513	-21,650	
14. Partnership/S corp income	14.	6,015		-6,015	
15. Estate or trust income	15.				
16. Farm income/loss	16.				
17. Unemployment compensation	17.				
18. Taxable social security	18.				
19. Other income	19.	270		-270	
20. Total income	20.	151,923	-11,513	-163,436	
21. Moving expenses	21.				
22. Deductible part of self-employment tax	22.				
23. SEP/SIMPLE/Qualified plans deductions	23.				
24. SE health insurance	24.	25,470		-25,470	
25. Penalty on early withdrawal of savings	25.				
26. Alimony paid	26.				
27. IRA deductions	27.				
28. Student loan interest	28.				
29. Other adjustments	29.				
30. Adjusted gross income	30.	126,453	-11,513	-137,966	
31. Medical	31.				
32. Taxes	32.	10,000	1,452	-8,548	
33. Interest	33.	14,761	43	-14,718	
34. Contributions	34.	500		-500	
35. Casualty losses	35.				
36. Miscellaneous expenses	36.				
37. Allowable itemized deductions	37.	25,261	1,495	-23,766	
38. Standard deduction	38.	27,700	29,200	1,500	
		STANDARD	STANDARD		
39. Deduction taken	39.	27,700	29,200	1,500	
40. Taxable income before Qual Bus Inc Ded (QBID)	40.	98,753	-40,713	-139,466	
41. QBID	41.	262	0	-262	
42. Taxable income	42.	98,491	0	-98,491	

Form 1040		Two Year Comparison Report - Page 2		2023 & 2024	
Name PARESH & JUDY NARAN				Taxpayer Identification Number 457-61-2949	

		2023	2024	Differences
43. Taxable income from 2YR page 1, line 42	43.	98,491	0	-98,491
44. Tax on taxable income	44.	10,735	0	-10,735
45. Alternative minimum tax	45.			
46. Excess advance premium tax credit & other advanced repayments	46.			
47. Child care credit	47.			
48. Education credits	48.			
49. Retirement savings credit	49.			
50. Child & other dependent tax credit	50.			
51. General business credit	51.			
52. Other credits	52.	439		-439
53. Total credits	53.	439		-439
54. Net tax liability	54.	10,296		-10,296
55. Self-employment taxes	55.			
56. Other taxes	56.			
57. Total tax	57.	10,296		-10,296
58. Income tax withheld	58.	9,061		-9,061
59. Estimated tax payments	59.	8,000	5,000	-3,000
60. Earned income credit	60.			
61. Additional Child tax credit	61.			
62. Other refundable tax credits	62.			
63. Other payments	63.			
64. Total payments	64.	17,061	5,000	-12,061
65. Tax due/-refund	65.	-6,765	-5,000	1,765
66. Penalties and interest	66.			
67. Net tax due/-refund	67.	-6,765	-5,000	1,765
68. Refund applied to estimated tax payments	68.	5,000		-5,000
69. Refund received	69.	-1,765	-5,000	-3,235
70. Effective tax rate	70.	10.0 %	%	

Two Year Comparison - Tax Reconciliation Marginal Tax Rates

	2023	2023 Marginal	2024	2024 Marginal
	Taxable Income	Tax Rate	Taxable Income	Tax Rate
Ordinary income	81,550	12.0 %		%
Capital income	16,941	15.0 %		%
Capital - Sec. 1250		%		%
Capital - Sec. 1202		%		%

Form 1040	Two Year Comparison Report - Schedule E Page 1	2023 & 2024
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Name **PARESH NARAN** Taxpayer identification number **457-61-2949**

Property description **RENTAL HOUSE** Unit **1**

		2023	2024	Differences
Income				
1. Total rents and royalties received	1.	13,679		-13,679
Expenses				
2. Advertising	2.			
3. Auto and travel	3.			
4. Cleaning and maintenance	4.	3,448		-3,448
5. Commissions	5.			
6. Insurance	6.	947		-947
7. Legal and other professional fees	7.			
8. Management fees	8.	1,400		-1,400
9. Mortgage interest paid to banks, etc.	9.			
10. Other interest	10.			
11. Repairs	11.	27,309		-27,309
12. Supplies	12.			
13. Taxes	13.	2,894		-2,894
14. Utilities	14.	162		-162
15. Depreciation expense or depletion	15.	9,214	6,767	-2,447
16. Other expenses	16.	595	45	-550
17. Total expenses	17.	45,969	6,812	-39,157
Profit/(loss)				
18. Income or (loss) from rental real estate or royalty properties	18.	-32,290	-6,812	25,478
19. Deductible rental real estate loss	19.	-32,290	-6,812	25,478
Carryover				
20. Vacation home operating expenses carryover to next year	20.			
21. Vacation home excess casualty & depreciation carryover to next year	21.			

Form 1040	Two Year Comparison Report - Schedule E Page 1	2023 & 2024
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Name **PARESH NARAN** Taxpayer identification number **457-61-2949**

Property description **CHASAVA PROPERTIES, LLC** Unit **2**

		2023	2024	Differences
Income				
1. Total rents and royalties received	1.	52,101		-52,101
Expenses				
2. Advertising	2.			
3. Auto and travel	3.			
4. Cleaning and maintenance	4.			
5. Commissions	5.			
6. Insurance	6.	1,481		-1,481
7. Legal and other professional fees	7.			
8. Management fees	8.			
9. Mortgage interest paid to banks, etc.	9.			
10. Other interest	10.			
11. Repairs	11.			
12. Supplies	12.			
13. Taxes	13.	3,761		-3,761
14. Utilities	14.			
15. Depreciation expense or depletion	15.	4,432	4,433	1
16. Other expenses	16.			
17. Total expenses	17.	9,674	4,433	-5,241
Profit/(loss)				
18. Income or (loss) from rental real estate or royalty properties	18.	42,427	-4,433	-46,860
19. Deductible rental real estate loss	19.		-4,433	-4,433
Carryover				
20. Vacation home operating expenses carryover to next year	20.			
21. Vacation home excess casualty & depreciation carryover to next year	21.			

Form 1040	Two Year Comparison Report - Schedule E Page 1	2023 & 2024
Name PARESH & JUDY NARAN		Taxpayer identification number 457-61-2949
Property description 125 ETHANS GLEN COURT		Unit 3

		2023	2024	Differences
Income				
1. Total rents and royalties received	1.	7,800		- 7,800
Expenses				
2. Advertising	2.			
3. Auto and travel	3.			
4. Cleaning and maintenance	4.	175		- 175
5. Commissions	5.			
6. Insurance	6.	218		- 218
7. Legal and other professional fees	7.			
8. Management fees	8.	624		- 624
9. Mortgage interest paid to banks, etc.	9.	2,402		- 2,402
10. Other interest	10.			
11. Repairs	11.			
12. Supplies	12.			
13. Taxes	13.	1,748		- 1,748
14. Utilities	14.			
15. Depreciation expense or depletion	15.	2,646		- 2,646
16. Other expenses	16.	- 13	268	281
17. Total expenses	17.	7,800	268	- 7,532
Profit/(loss)				
18. Income or (loss) from rental real estate or royalty properties	18.		- 268	- 268
19. Deductible rental real estate loss	19.		- 268	- 268
Carryover				
20. Vacation home operating expenses carryover to next year	20.			
21. Vacation home excess casualty & depreciation carryover to next year	21.	268		- 268

Form **D-400**

North Carolina Direct Deposit / Electronic Funds Withdrawal Record

2024

Name
PARESH & JUDY NARAN

Taxpayer Identification Number
457-61-2949

2024 Individual Income Tax Return

I (we) have authorized the North Carolina Department of Revenue ☒ deposit to ☐ withdraw from the amount of \$ **1,452**

Date of electronic withdrawal

2025 Estimated Tax Payments	Requested Withdrawal Date	Amount
1st payment		0
2nd payment		0
3rd payment		0
4th payment		0

Account Information

Financial institution **WELLS FARGO**

Routing number (9-digit) **053000219** Account number **1017364118950**

Type of account ☒ Checking or ☐ Savings

DO NOT MAIL. RETAIN FOR YOUR RECORDS.

D-400 (42) 7-25-24

Individual Income Tax Return 2024

< Staple All Pages of Your
Return and W-2s Here

North Carolina Department of Revenue

☐ Amended Return

DOR
Use
Only

For calendar year 2024, or fiscal year beginning 24 and ending

PARESH NARAN JUDY NARAN

125 ETHANS GLEN COURT

CARY

NC 27513

WAKE

Your SSN: 457612949

Spouse's SSN: 246439649

Filing Status ☐ 1. Single ☒ 2. Married Filing Jointly ☐ 3. Married Filing Separately
☐ 4. Head of Household ☐ 5. Qualifying Widow(er)

Are you a veteran? Yes ☐ No ☒

Is your spouse a veteran? Yes ☐ No ☒

Were you granted an automatic extension to file your
2024 federal income tax return, e.g., Form 1040?

Yes ☐ No ☒

Year spouse died:

Were you a resident of N.C. for the entire year? Yes ☒ No ☐

Return for deceased taxpayer. Date of death:

Was your spouse a resident of N.C. for the entire year? Yes ☒ No ☐

Return for deceased spouse. Date of death:

N.C. Education Endowment Fund: You may contribute to the N.C. Education Endowment Fund by making a contribution or designating some or all of
your overpayment to the Fund. To make a contribution, enclose Form NC-EDU and your payment of \$ 0. To designate your overpayment
to the Fund, enter the amount of your designation on Page 2, Line 31. (See instructions for information about the Fund.)

☐ Select box if you, or if married filing jointly, your spouse were out of the country on April 15, 2025, and a U.S. citizen or resident.

☐ Select box if return is filed and signed by Executor, Administrator, or Court-Appointed Personal Representative.

FS 2 PP Y DT N OC N TPRES Y SPRES Y VT N SVT N

NARA 125 27513 DS N EA N TD SD FDEXT N

PARESH NARAN 457612949 WAKE

JUDY NARAN 246439649 NC 27513

125 ETHANS GLEN COURT CARY

06 -11513 16 0 26C 0

07 0 18 Y 0 26E 0

09 4229 20A 0 EU

10A 0 20B 0 27 0

10B 0 21A 1452 29 0

11 S Y I N 21B 0 30 0

11 25500 21C 0 31 0

13 00000 21D 0 32 0

14 -41242 26A 0 34 1452

15 0 26B 0

TN PN 9194660946 PP 562202813

Sign Return Below ☒ Refund Due 1452 Payment Due 0

I declare and certify that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. ☒ Check here if you authorize the North Carolina Department of Revenue to discuss this return and attachments with the paid preparer below.

Your Signature Date Spouse's Signature (If filing joint return, both must sign.) Date Contact Phone No. (Include area code)

PAID PREPARER USE ONLY If prepared by a person other than taxpayer, this certification is based on all information of which the preparer has any knowledge.

SHELTON M. ENNIS, CPA 03 05 25 919-466-0946 562202813
Paid Preparer's Signature Date Preparer's Contact Phone Number (Include area code) Preparer's FEIN, SSN, or PTIN

If REFUND, mail return to: N.C. DEPT. OF REVENUE, P.O. BOX R, RALEIGH, NC 27634-0001
If you ARE NOT due a refund, mail return, any payment, and D-400V to: N.C. DEPT. OF REVENUE, P.O. BOX 25000, RALEIGH, NC 27640-0640

D-400 2024 Page 2 (42)Last Name (First 10 Characters) **NARAN**

Your Social Security Number

457612949**D-400 Line-by-Line Information**

6.	Federal Adjusted Gross Income	6.	-11513
7.	Additions to Federal Adjusted Gross Income	7.	0
8.	Add Lines 6 and 7	8.	-11513
9.	Deductions From Federal Adjusted Gross Income	9.	4229
10.	Child Deduction		
a.	Enter the number of qualifying children for whom you were allowed a federal child tax credit	10a.	0
b.	Enter the amount of the child deduction	10b.	0
11.	N.C. Standard Deduction	11.	Y
11.	N.C. Itemized Deduction	11.	N
11.	Deduction amount	11.	25500
12.	a. Add Lines 9, 10b, and 11	12a.	29729
	b. Subtract Line 12a from Line 8	12b.	-41242
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.0000
14.	N.C. Taxable Income	14.	-41242
15.	N.C. Income Tax	15.	0
16.	Tax Credits	16.	0
17.	Subtract Line 16 from Line 15	17.	0
18.	Consumer Use Tax	18.	0
	You certify that no Consumer Use Tax is due		Y
19.	Add Lines 17 and 18	19.	0

North Carolina Income Tax Withheld

20a.	Your tax withheld	20a.	0
20b.	Spouse's tax withheld	20b.	0

Other Tax Payments

21a.	2024 estimated tax	21a.	1452
21b.	Paid with extension	21b.	0
21c.	Partnership	21c.	0
21d.	S Corporation	21d.	0
22.	Additional Payments	22.	0
23.	Add Lines 20a through 22	23.	1452
24.	Previous Refunds	24.	0
25.	Subtract Line 24 from Line 23	25.	1452
26a.	Tax Due	26a.	0
26b.	Penalties	26b.	0
26c.	Interest	26c.	0
26d.	Add Lines 26b and 26c and enter the total on 26d	26d.	0
EU	Exception to Underpayment of Estimated Tax	EU	
26e.	Interest on the Underpayment of Estimated Income Tax	26e.	0
27.	Pay this Amount	27.	0
28.	Overpayment	28.	1452

Amount of Refund to Apply to:

29.	Amount of Line 28 to be applied to 2025 Estimated Income Tax	29.	0
30.	N.C. Nongame and Endangered Wildlife Fund	30.	0
31.	N.C. Education Endowment Fund	31.	0
32.	N.C. Breast and Cervical Cancer Control Program	32.	0
33.	Add Lines 29 through 32	33.	0
34.	Amount to be Refunded	34.	1452

DOR
Use
Only

If you are required to add certain items to federal adjusted gross income on Form D-400, Line 7, or if you are entitled to take deductions from federal adjusted gross income on Form D-400, Line 9, you must complete and attach this schedule to Form D-400. Importantly, you must attach both pages of this schedule to Form D-400, even if you are only required to complete one part of the schedule. If you do not, the Department may be unable to process your return.

Last Name (First 10 Characters)NARANYour Social Security Number457612949

01	0	13	0	23D	1089	30	0
02	0	14	0	23E	584	31	0
03	0	15	0	24A	0	32	0
04	0	17	0	24B	998	33	0
05	0	18	0	24C	0	34	0
06	0	19	0	24D	0	35	0
07	0	20	0	24E	0	36	0
08	0	21	0	25	0	37	0
09	0	22	0	26	0	38A	0
10	0	23A	854	27	0	38B	0
11	0	23B	0	28	0	39	0
12	0	23C	704	29	0	40	0

Part A. Additions to Federal Adjusted Gross Income

1. Interest Income From Obligations of States Other Than N.C.

2. Deferred Gains Reinvested Into an Opportunity Fund

3. Bonus Depreciation

4. IRC Section 179 Expense

5. S-Corporation Shareholder Built-in Gains Tax

6. Amount by Which Federal Basis Exceeds State Basis for Property Disposed of in 2024

7. Federal Net Operating Loss Deduction

8. State, Local, or Foreign Income Tax Deducted by an S Corporation, Partnership, or Estate and Trust

9. Withdrawal of 529 Plan Contributions Not Used for Permissible Purpose

10. Discharge of Qualified Principal Residence Indebtedness

11. Qualified Education Loan Payments Paid by Employer

12. Expenses Allocable to Income Exempt or Excluded From Gross Income

13. Discharge of Certain Student Loan Debt

14. Taxed Pass-Through Entity Loss

15. Reserved for Future Use

16. Total Additions - Add Lines 1 through 15

1.

2.

3.

4.

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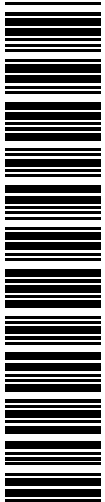
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7020742026

Last Name (First 10 Characters) **NARAN**

Your Social Security Number **457612949**

Part B. Deductions From Federal Adjusted Gross Income

17.	State or Local Income Tax Refund	17.	0
18.	Interest Income From Obligations of the United States or United States' Possessions	18.	0
19.	Taxable Portion of Social Security and Railroad Retirement Benefits	19.	0
20.	Retirement Benefits Received by Vested N.C. State Government, N.C. Local Government, or Federal Government Retirees, i.e. Bailey Settlement	20.	0
21.	Certain Retirement Benefits Received by a Retired Member of the United States Uniformed Services Not Deducted on Line 20	21.	0
22.	Bonus Asset Basis	22.	0
23.	Bonus Depreciation		
23a.	2019 854	23b. 2020 0	23c. 2021 704
23d.	2022 1089	23e. 2023 584	23f. 3231
24.	IRC Section 179 Expense		
24a.	2019 0	24b. 2020 998	24c. 2021 0
24d.	2022 0	24e. 2023 0	24f. 998
25.	Recognized IRC Section 1400Z-2 Gain	25.	0
26.	Gain From the Disposition of Exempt N.C. Obligations Issued Before July 1, 1995	26.	0
27.	Exempt Income Earned or Received by a Member of a Federally Recognized Indian Tribe	27.	0
28.	Amount by Which State Basis Exceeds Federal Basis for Property Disposed of in 2024	28.	0
29.	Ordinary and Necessary Business Expense Reduced or not Allowed Due to Claiming a Federal Tax Credit in Lieu of a Deduction	29.	0
30.	Personal Education Student Account Deposits	30.	0
31.	Certain State Emergency Response and Disaster Relief Reserve Fund Payments	31.	0
32.	Certain Economic Incentive Payments	32.	0
33.	Certain N.C. Grant Payments	33.	0
34.	Certain Net Operating Loss Carrybacks	34.	0
35.	Excess Net Operating Loss Carryforward	35.	0
36.	Excess Business Loss	36.	0
37.	Business Interest Limitation	37.	0
38.	Taxed Pass-Through Entity Income		
38a.	N.C. Sourced 0	38b. Non-N.C. Sourced 0	38c. 0
39.	N.C. Net Operating Loss	39.	0
40.	Reserved for Future Use	40.	0
41.	Total Deductions - Add Lines 17 through 22, 23f, 24f, and 25 through 40	41.	4229

(42)
8-24

NC-NOL 2024 Net Operating Loss Worksheet

Read the instructions before completing this worksheet. Failure to read the instructions in their entirety will result in an incorrect N.C. NOL calculation.

Name (First 10 Characters)

NARAN

Do not send a photocopy of this form.

Federal Tax ID Number

457612949

Part 1. Net Operating Loss Calculation(Complete Part 1 to determine if you have an N.C. NOL for the tax year 2024)

1a. Federal Adjusted Gross Income	1a.	-11513		
1b. Additions to Federal Adjusted Gross Income	1b.			
1c. Add Lines 1a and 1b			1c.	-11513
1d. Deductions from Federal Adjusted Gross Income	1d.	4229		
1e. N.C. Standard Deduction Amount or N.C. Itemized Deduction Amount	1e.	25500		
1f. Excess Business Loss Included as Other Income on your 2024 Federal Income Tax Return	1f.			
1g. Add Lines 1d through 1f			1g.	29729
1. Subtract Lines 1g from Line 1c				1. -41242
2. Nonbusiness Capital Losses (Enter as a positive number)	2.			
3. Nonbusiness Capital Gains (Without regard to any IRC section 1202 exclusion)	3.			
4. If Line 2 is greater than Line 3, subtract Line 3 from Line 2 and enter the difference. Otherwise, enter zero			4.	
5. If Line 3 is greater than Line 2, subtract Line 2 from Line 3 and enter the difference. Otherwise, enter zero			5.	
6. Nonbusiness Deductions (Enter as a positive number)	6.	25500		
7. Nonbusiness Income Other than Capital Gains	7.			
8. Add Line 5 and Line 7			8.	
9. If Line 6 is greater than Line 8, subtract Line 8 from Line 6 and enter the difference. Otherwise, enter zero				9. 25500
10. If Line 8 is greater than Line 6, subtract Line 6 from Line 8 and enter the difference. Otherwise, enter zero (Amount cannot exceed the amount entered on Line 5)	10.			
11. Business Capital Losses Before Limitations (Enter as a positive number)	11.			
12. Business Capital Gains (Without regard to any IRC section 1202 exclusion)	12.			
13. Add Line 10 and Line 12			13.	
14. Subtract Line 13 from Line 11. (If zero or less, enter zero)			14.	
15. Add Line 4 and Line 14			15.	
16a. Enter the amount of your Net Short-Term Capital Gain (Loss)	16a.			
16b. Enter the amount of your Net Long-Term Capital Gain (Loss)	16b.			
16c. Add Lines 16a and 16b			16c.	
16. Amount of Line 16c (Enter the amount as a positive number.) Important: If you do not have a loss on Line 16c (and do not have a IRC section 1202 exclusion), skip Lines 16 through 21 and enter the amount of Line 15 on Line 22.			16.	

Part 1. Net Operating Loss Calculation

17. IRC Section 1202 Exclusion from your 2024 Federal Income Tax Return

17.

18. Subtract Line 17 from Line 16. (If zero or less, enter zero)

18.

19. Enter the smaller of Line 16 or \$3,000, or if you filed your N.C. tax return married filing separately, enter the smaller of Line 16 or \$1,500

19.

20. If Line 18 is greater than Line 19, subtract Line 19 from Line 18 and enter the difference. Otherwise, enter zero.

20.

21. If Line 19 is greater than Line 18, subtract Line 18 from Line 19 and enter the difference. Otherwise, enter zero.

21.

22. Subtract Line 20 from Line 15. (If zero or less, enter zero) Important: If you were not required to complete Lines 16 through 21, enter the amount from Line 15.

22.

23. N.C. NOL Deduction for Losses from Prior Years (Enter as a positive number)

23.

24. N.C. NOL (Add Lines 1, 9, 17, 21, 22, and 23. If the result is less than zero, enter the amount here. If the result is zero or more, you do not have an N.C. NOL.)

24.

-15742

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Part 2A. Federal Net Operating Loss Carryover Deduction (Complete Part 2A to determine the amount of your Federal Net Operating Loss Carryover to deduct for tax year 2024)

Tax Year	Column A Federal NOL Incurred and not Absorbed by January 1, 2022	Column B Federal NOL Carryover Deducted as N.C. NOL in Tax Year 2024	Column C Federal NOL Carryover Remaining (Column A minus Column B)
1. 2009			
2. 2010			
3. 2011			
4. 2012			
5. 2013			
6. 2014			
7. 2015			
8. 2016			
9. 2017			
10. 2018			
11. 2019			
12. 2020			
13. 2021			
	14. Federal NOL Carryover Deduction (Add Lines 1 through 13, Column B and enter the result here)		

Part 2B. North Carolina Net Operating Loss Carryover Deduction (Complete Part 2B to determine the amount of your N.C. Net Operating Loss Carryover to deduct for tax year 2024)

Tax Year	Column A N.C. NOL Carryover	Column B N.C. NOL Carryover Deducted as N.C. NOL in Tax Year 2024	Column C N.C. NOL Carryover Remaining (Column A minus Column B)
15. 2022			
16. 2023			
	17. N.C. NOL Carryover Deduction (Add Lines 15 and 16, Column B and enter the result here)		

Part 2C. North Carolina Net Operating Loss Deduction (Complete Part 2C to determine the amount of your N.C. NOL Deduction for tax year 2024)

18. Federal NOL Carryover Deduction Amount (Enter the Federal NOL Carryover Deduction amount from Part 2A, Line 14)	18.
19. N.C. NOL Carryover Deduction Amount (Enter the N.C. NOL Carryover Deduction amount from Part 2B, Line 17)	19.
20. Total N.C. NOL Deduction (Add Lines 18 and 19 and enter the result here and on Form D-400, Schedule S, Line 39)	20.

Form **D-400****North Carolina Depreciation Adjustment Worksheet****2024**

Name

PARESH & JUDY NARAN

Taxpayer Identification Number

457-61-2949**Bonus Depreciation Addition**

1. 85% of bonus depreciation from federal Form 4562 1. _____
2. Depreciation addition from pass through entities 2. _____

Section 179 Expense Addition

3. Section 179 expense elected from non-pass-through entities 3. _____
4. Federal Section 179 expense elected from pass-through entities 4. _____
5. Total federal Section 179 expense elected (Sum of lines 3 and 4) 5. _____
6. Maximum Section 179 deduction allowed 6. **25,000**
7. Total cost of Section 179 property placed in service 7. _____
8. Threshold cost of Section 179 property 8. **200,000**
9. Reduction in limitation (Line 7 minus line 8, not less than zero) 9. _____
10. North Carolina dollar limitation (Line 6 minus line 9, not less than zero) 10. **25,000**
11. Section 179 expense elected from non-pass-through entities 11. _____
12. North Carolina Section 179 expense elected from pass-through entities 12. _____
13. Total North Carolina Section 179 expense elected (Sum of lines 11 and 12) 13. _____
14. Tentative North Carolina deduction. (Smaller of line 10 or 13) 14. _____
15. Excess Section 179 expense (Line 5 minus line 14) 15. _____
16. Section 179 addition (85% of excess Section 179 expense) 16. _____
17. Total depreciation additions to income (Sum of lines 1, 2 and 16) 17. _____

Bonus Depreciation Adjustment for the Year Assets Placed in Service

Tax Year Reported	2019	2020	2021	2022	2023	2024	Net Adjustment
2019	4271						4271
2020	-854	0					-854
2021	-854	0	3521				2667
2022	-854	0	-704	5443			3885
2023	-854	0	-704	-1089	2921		274
2024	-854	0	-704	-1089	-584	0	-3231
2025		0	-704	-1089	-584	0	-2377
2026			-704	-1089	-584	0	-2377
2027				-1089	-584	0	-1673
2028					-584	0	-584
2029						0	0

Section 179 Adjustment for the Year Assets Placed in Service

Tax Year Reported	2019	2020	2021	2022	2023	2024	Net Adjustment
2019	0						0
2020	0	4991					4991
2021	0	-998	0				-998
2022	0	-998	0	0			-998
2023	0	-998	0	0	0		-998
2024	0	-998	0	0	0	0	-998
2025		-998	0	0	0	0	-998
2026			0	0	0	0	0
2027				0	0	0	0
2028					0	0	0
2029						0	0

Form D-400	North Carolina Itemized Deduction Comparison Worksheet	2024
Name PARESH & JUDY NARAN		Taxpayer Identification Number 457-61-2949

1.	Qualifying home mortgage interest	1.	43
2.	Real estate property taxes (Not greater than \$10,000 or if married filing separate, \$5,000)	2.	
3.	Total home mortgage interest and real estate property taxes	3.	43
4.	Qualifying home mortgage interest and real estate property taxes limitation	4.	20,000
5.	Home mortgage interest and real estate property taxes after limitation	5.	43
6.	Charitable contributions	6.	
7.	Medical and dental expenses		
	7a. Medical and dental expenses before limitation	7a.	
	7b. Amount from Form D-400, line 6	7b.	-11,513
	7c. Multiply line 7b by 7.5%	7c.	
	7d. Medical and dental expenses after limitation	7d.	
8.	Claim of right repayment	8.	
9.	Total N.C. itemized deductions	9.	43
10.	North Carolina standard deduction	10.	25,500
11.	Deduction taken on return	11.	25,500

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457-61-2949

FYE: 12/31/2024

NC Asset Report

RENTAL HOUSE

Asset	Description	Date In Service	Cost	Basis for Depr	NC Prior	NC Current	Federal Current	Difference Fed - NC
<u>Prior MACRS:</u>								
7	CARPET	6/27/08	3,486	1,743	3,486	0	0	0
8	RENOVATIONS	7/15/08	6,510	6,510	3,659	237	237	0
9	REFRIGERATOR	8/10/15	997	498	997	0	0	0
10	LENNOX GAS PACKAGE HVAC UNIT	1/03/17	3,980	0	3,980	0	0	0
11	FENCE	9/01/19	5,025	0	5,025	0	0	0
12	RANGE, DISHWASHER, MICROWAVE	4/18/21	2,718	2,718	1,935	313	313	0
13	FLOORING	11/30/23	14,479	14,479	66	526	526	0
14	CABINETS	10/10/23	8,656	8,656	66	314	314	0
15	GARAGE DOORS	10/03/23	3,090	618	2,480	61	61	0
16	COUNTER TOPS	10/27/23	14,479	14,479	110	526	526	0
17	BLINDS	12/04/23	1,206	241	968	24	24	0
			<u>64,626</u>	<u>49,942</u>	<u>22,772</u>	<u>2,001</u>	<u>2,001</u>	<u>0</u>
<u>Other Depreciation:</u>								
2	HOUSE	10/22/99	131,059	131,059	115,372	4,766	4,766	0
3	LAND	10/22/99	14,562	14,562	0	0	0	0
	Total Other Depreciation		<u>145,621</u>	<u>145,621</u>	<u>115,372</u>	<u>4,766</u>	<u>4,766</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>145,621</u>	<u>145,621</u>	<u>115,372</u>	<u>4,766</u>	<u>4,766</u>	<u>0</u>
<u>Amortization:</u>								
1	REFINANCED POINTS	10/22/99	1,307	1,307	1,082	45	45	0
4	REFINANCE	8/22/03	5,475	5,475	5,475	0	0	0
			<u>6,782</u>	<u>6,782</u>	<u>6,557</u>	<u>45</u>	<u>45</u>	<u>0</u>
	Grand Totals		217,029	202,345	144,701	6,812	6,812	0
	Less: Dispositions		0	0	0	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>217,029</u>	<u>202,345</u>	<u>144,701</u>	<u>6,812</u>	<u>6,812</u>	<u>0</u>

Asset	Description	Date In Service	Cost	Basis for Depr	NC Prior	NC Current	Federal Current	Difference Fed - NC
Prior MACRS:								
1	BUILDING	9/27/02	172,869	172,869	94,376	4,433	4,433	0
3	HEAT PUMP	4/01/22	6,404	0	6,404	0	0	0
			<u>179,273</u>	<u>172,869</u>	<u>100,780</u>	<u>4,433</u>	<u>4,433</u>	<u>0</u>
Other Depreciation:								
2	LAND	9/27/02	19,208	19,208	0	0	0	0
Total Other Depreciation			<u>19,208</u>	<u>19,208</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>19,208</u>	<u>19,208</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Grand Totals			198,481	192,077	100,780	4,433	4,433	0
Less: Dispositions			0	0	0	0	0	0
Less: Start-up/Org Expense			0	0	0	0	0	0
Net Grand Totals			<u>198,481</u>	<u>192,077</u>	<u>100,780</u>	<u>4,433</u>	<u>4,433</u>	<u>0</u>

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Asset	Description	Date In Service	Cost	Basis for Depr	NC Prior	NC Current	Federal Current	Difference Fed - NC
Prior MACRS:								
1	HOUSE	11/22/19	379,415	156,964	45,731	0	0	0
	Out Of Service: 6/01/23							
3	SHUTTERS	3/03/21	4,142	1,714	4,142	0	0	0
	Out Of Service: 6/01/23							
5	GUTTERS	11/14/22	4,394	1,818	50	0	0	0
	Out Of Service: 6/01/23							
			<u>387,951</u>	<u>160,496</u>	<u>49,923</u>	<u>0</u>	<u>0</u>	<u>0</u>
Other Depreciation:								
2	LAND	11/22/19	94,854	39,241	0	0	0	0
	Out Of Service: 6/01/23							
	Total Other Depreciation		<u>94,854</u>	<u>39,241</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>94,854</u>	<u>39,241</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	Grand Totals		482,805	199,737	49,923	0	0	0
	Less: Dispositions		0	0	0	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>482,805</u>	<u>199,737</u>	<u>49,923</u>	<u>0</u>	<u>0</u>	<u>0</u>

COPY

Form D-400		North Carolina Two Year Comparison Report		2023 & 2024	
Name				Taxpayer Identification Number	
PARESH & JUDY NARAN				457-61-2949	
Adjustments		2023	2024	Differences	
	1. Federal adjusted gross income	1. 126,453	-11,513	-137,966	
	2. Non-North Carolina municipal income	2. 331		-331	
	3. Bonus depreciation adjustment	3. 2,921		-2,921	
	4. Section 179 expense adjustment	4.			
	5. Other additions (Including lump-sum distributions)	5. 37,570		-37,570	
	6. Total additions	6. 40,822	0	-40,822	
	7. State tax refund	7.			
	8. US obligations	8. 14,065		-14,065	
	9. Social security/Railroad Tier I and II	9.			
	10. Bailey retirement benefits	10.			
	11. Deduction for children	11.			
	12. Other deductions (Including depreciation adjustment)	12. 14,833	4,229	-10,604	
	13. Total deductions	13. 28,898	4,229	-24,669	
	14. Standard or itemized deductions	14. 25,500	25,500		
15. North Carolina taxable income	15. 112,877	-41,242	-154,119		
Tax Computation	16. North Carolina tax	16. 3,252	0	-3,252	
	17. Credit tax paid to other state	17. 115		-115	
	18. Other credits	18.			
	19. Carryover from previous years	19.			
	20. Total credits	20. 115	0	-115	
	21. Net income tax	21. 3,137	0	-3,137	
	22. Use tax	22.			
	23. Income tax withheld	23. 1,669		-1,669	
	24. Estimates	24. 2,920	1,452	-1,468	
	25. Other payments	25.			
	26. Total payments	26. 4,589	1,452	-3,137	
	27. Amended returns (Refund/-Tax paid w/ original return)	27. 0	0		
	28. Tax due/-refund	28. -1,452	-1,452	0	
	29. Penalties and interest	29.			
	30. Contributions	30.			
	31. Total contributions and statutory additions	31. 0	0	0	
	32. Net tax due/-refund	32. -1,452	-1,452	0	
	33. Effective tax rate	33. 3%	0%		

Form D-400	North Carolina Electronic Filing - PDF Attachment Report	2024
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Name PARESH & JUDY NARAN	Taxpayer Identification Number 457-61-2949
--	--

Title	Attachment Source	Proforma
NORTH CAROLINA ATTACHMENTS: TAX RETURN: NCNOLWORKSHEET	(AUTOMATICALLY ATTACHED)	N/A
COPY		



Advisors

Electronic Delivery

PARESH C NARAN &
JUDY P NARAN JT WROS
TOD
125 ETHANS GLEN CT
CARY NC 27513-3434

SNAPSHOT

Current period ending February 28, 2025

ACCOUNT NAME: PARESH C NARAN &
JUDY P NARAN JT WROS
TOD

ACCOUNT NUMBER: 8741-4615

Your Financial Advisor:
GEORGE EDWARD C MOSELEY
Phone: 919-881-7390

3105 GLENWOOD AVE
STE 201
RALEIGH, NC 27612

If you have more than one account with us, why not link them and receive summary information for your entire household? Contact Your Financial Advisor for more details.

Message from Wells Fargo Advisors

APRIL 15, 2025, IS THE FINAL DAY TO MAKE YOUR 2024 IRA CONTRIBUTION. THE 2024 LIMIT FOR A TRADITIONAL IRA, ROTH IRA, OR A COMBINATION OF THE TWO IS \$7,000 (\$8,000 IF YOU'RE 50 OR OLDER). CONTACT YOUR FINANCIAL ADVISOR TODAY TO CONTRIBUTE TO OR OPEN A WELLS FARGO ADVISORS IRA.

News

SHOULD YOU NEED ADDITIONAL DETAILS ABOUT A SPECIFIC TRANSACTION REFLECTED ON YOUR STATEMENT, THE INFORMATION IS AVAILABLE ONLINE OR BY CONTACTING THE CLIENT SERVICE NUMBER ON YOUR STATEMENT.

Investment and Insurance Products are:

- Not Insured by the FDIC or Any Federal Government Agency
- Not a Deposit or Other Obligation of, or Guaranteed by, the Bank or Any Bank Affiliate
- Subject to Investment Risks, Including Possible Loss of the Principal Amount Invested

Wells Fargo Advisors is a trade name used by Wells Fargo Clearing Services, LLC, a registered broker-dealer and non-bank affiliate of Wells Fargo & Company.

General instructions and disclosures

About this statement

Clearing services: Wells Fargo Clearing Services, LLC (Wells Fargo Advisors), an indirect wholly owned subsidiary of Wells Fargo & Company, is a clearing broker-dealer registered with the Securities and Exchange Commission (SEC) and the Municipal Securities Rulemaking Board (MSRB) and is a member of the New York Stock Exchange (NYSE), the Financial Industry Regulatory Authority (FINRA) and all principal U.S. exchanges. Wells Fargo Advisors carries your account(s) and acts as your custodian for funds and securities deposited with us directly by you, or as a result of transactions we process for your account. Twice a year, Wells Fargo Advisors publishes on its web site www.wfclearing.com a statement of the firm's financial condition. A financial statement of this organization is available for your personal inspection at its offices, or a copy of it will be mailed upon your written request.

Trade date statement and trade details: All activity and positions on this statement are shown as of the date a trade is entered on the brokerage trading system (i.e., the trade date). Proceeds from the sale of securities and costs for the purchase of securities are not transacted through your account until the actual settlement date of the trade. The time of the transactions, the name of the buyer or seller, and the source and amount of any commission or fee will be furnished upon written request.

Pricing of securities: Securities prices on your statement may vary from actual liquidation value. Prices are provided by outside quotation services which we believe are reliable but due to the nature of market data the accuracy cannot be guaranteed. In the absence of such pricing, prices are estimated by Wells Fargo Advisors using available information and its judgment. Such estimates may not reflect actual trades and do not reflect a commitment by the firm to buy or sell at those prices. Securities listed on a national exchange are priced as of the close of the statement period. Unlisted shares may be valued at the current best published "bid-price", and, if none exists, the last reported transaction if occurring within the last 45 days. Prices of securities not actively traded may not be available and are indicated by "N/A." Corporate and municipal bonds and other fixed income securities are priced by a computerized pricing service or, if less actively traded, by utilizing a yield-based matrix system to arrive at an estimated market value. Listed options are priced based on the closing "bid-ask" prices and the last reported trade. Mutual fund shares are priced at net asset value. Shares of direct participation program (DPP) and real estate investment trust (REIT) securities that are not listed on a national exchange are generally illiquid. Because no trading market exists for these investments, their values are estimated. Unless otherwise indicated, the values shown for DPP and REIT securities have been provided by the management of each program and represent that management's estimate of the investor's interest in the net assets of the program. See statement sections for additional pricing information. Values for hedge funds and certain managed futures funds are provided on a month delay basis. Other managed futures funds may be priced more frequently. Long-term certificates of deposit (maturity beyond one year from date of issue) are priced using a market value pricing model. The sale or redemption price of your securities may be higher or lower than the prices shown on your statement. For an actual quote, contact the individual servicing your account.

Estimated annual income/yield: Estimated Annual Income (EAI), when available, reflects the estimated amount you would earn on a security if your current position and its related income remained constant for a year. Estimated Annual Yield (EAY), when available, reflects the current estimated annual income divided by the current value of the security as of the statement closing date. EAI and EAY are estimates and the actual income and yield might be lower or higher than the estimated amounts. EAY reflects only the income generated by an investment. It does not reflect changes in its price, which may fluctuate. The information used to derive these estimates is obtained from various outside vendors; Wells Fargo Advisors is not responsible for incorrect or missing estimated annual income and yields. Past performance is not a guarantee of future results.

Income summary: The Income summary displays all income as recorded in the tax system as of period end date. The totals in the Cash flow snapshot may not match the totals in the Income snapshot due to reclassifications or other corrections made in the tax system. Remember, you may have certain products that are not included in these figures and whose income is only available on the tax forms sent to you at year-end. Reclassifications and other tax reporting requirements may alter these numbers both during and after year end. You should rely only on tax reporting documents. Contact your tax advisor if you have any questions about the tax consequences of your brokerage activity.

Texas designation: If you are a resident of Texas who has purchased mutual fund shares, you may designate a representative to receive notification to assist in avoiding escheatment of assets in your investment account to the State of Texas. The designated representative does not have any rights to your account. Please use the Texas Unclaimed Property link (<https://claimtexas.org/>) to access the Designation of Representative for Notice Request form which you may complete and return to us at **ATTN: H0006-08K, 1 N. Jefferson Ave, St. Louis, MO 63103** or return by email at clientcontact@firstclearing.com.

Tax reporting: We are required by federal law to report annually to you and to the Internal Revenue Service (IRS) on Form(s) 1099 interest income, dividend payments and sales proceeds including cost basis information for applicable transactions credited to your account.

About your rights and responsibilities

Questions and complaints about Your Account: This account statement contains important information about your brokerage account, including recent transactions. All account statements sent to you shall be deemed complete and accurate if not objected to in writing within ten days of receipt. We encourage you to review the details in this statement. If you do not understand any of the information in your statement or if you believe there are any inaccuracies or discrepancies in your statement, you should promptly report them to the manager of the Wells Fargo Advisors office listed on the front of your statement. To further protect your rights, including any rights under the Securities Investor Protection Act, any verbal communications with Wells Fargo Advisors should be re-confirmed in writing. Inquiries or complaints about your account statement, including the positions and balances in your account, may be directed to **Wells Fargo Advisors Client Services at (866) 887-2402 or ATTN: H0005-087, 1 N. Jefferson Ave, St. Louis, MO 63103**.

Public disclosure: You may reach FINRA by calling the FINRA BrokerCheck Hotline at **(800) 289-9999** or by visiting the FINRA website at www.finra.org. An investor brochure that includes information describing FINRA BrokerCheck is available from FINRA upon request. A brochure describing the FINRA Pricing of Securities Regulation Public Disclosure Program is also available from the FINRA upon request.

MSRB disclosure: A brochure describing the protections available under MSRB rules and how to file a complaint is available at www.MSRB.org.

Account protection: Wells Fargo Advisors is a member of the Securities Investor Protection Corporation (SIPC) which protects against the loss of cash and securities held in client accounts of a SIPC member firm in the event of the member's insolvency and liquidation. SIPC coverage is limited to \$500,000 per customer, including up to \$250,000 for cash. For more information on SIPC coverage, please see the explanatory brochure at www.sipc.org or contact SIPC at **(202) 371-8300**. In addition, Wells Fargo Advisors maintains additional insurance coverage provided through London Underwriters (led by Lloyd's of London Syndicates). This additional insurance policy becomes available to clients if their SIPC limit is exhausted and provides additional protection up to a firm aggregate of \$1 billion, including up to \$1.9 million for cash per client. SIPC does not insure the quality of investments or protect against market losses. SIPC only protects the custody function of their members, which means that SIPC works to restore to clients their securities and cash that are in their accounts when the member firm liquidation begins. Not all investments are protected by SIPC. In general, SIPC does not cover instruments such as unregistered investment contracts, unregistered limited partnerships, fixed annuity contracts, escrow receipts, direct investments, currency, commodities or related contracts, hedge funds and certain other investments.

Investor education: Wells Fargo Advisors publishes on its web site www.wellsfargoadvisors.com information on topics of interest to investors as well as market commentary and economic analysis. This information may be found in the "Other Insights" menu. Wells Fargo Advisors has also developed numerous investor education guides to provide you with important information regarding the products and services we offer. These guides may be found in the "Why Invest With Us" menu.

Free credit balances: Free credit balances are not segregated and may be used by Wells Fargo Advisors in the operation of its business in accordance with applicable laws and regulations. You have the right to receive from us in the course of normal business operations, subject to any open commitments in any of your accounts, any free credit balances to which you are entitled.

Investment objectives/Risk tolerances: Please inform us promptly of any material change that might affect your investment objectives, risk tolerances or financial situation, or if you wish to impose or change any reasonable restrictions on the management of your account. A copy of the Investment Advisory Services Disclosure document is available without charge upon request. Please contact the individual denoted on the front of your statement to update your information and to receive a copy of this document.

Option accounts: Pursuant to FINRA Rule 2360, option assignment notices are randomly allocated by an automated process amongst all client short option positions that are subject to exercise, including positions established on the day of assignment. Transaction confirmations that were previously furnished to you provides information on commissions and other charges related to your option transaction executions. Details of our random allocation procedures and copies of transaction confirmations are available upon request.



PARESH C NARAN &
JUDY P NARAN JT WROS
TOD

FEBRUARY 1, 2025 - FEBRUARY 28, 2025
ACCOUNT NUMBER: 8741-4615

Progress summary

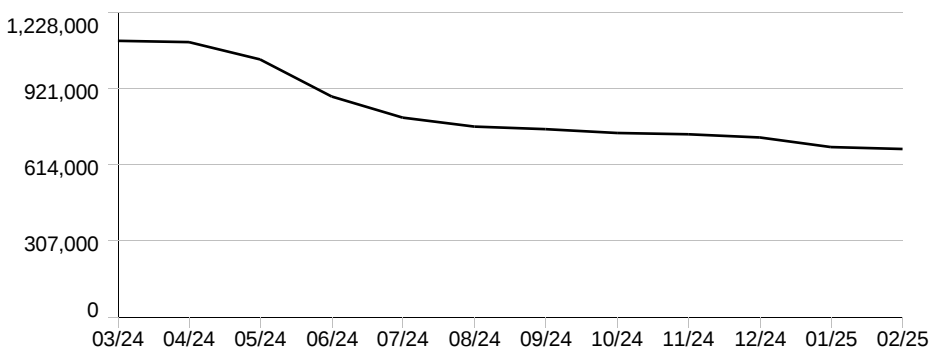
	THIS PERIOD	THIS YEAR
Opening value	\$683,943.78	\$723,240.57
Cash deposited	0.00	0.00
Securities deposited	0.00	0.00
Cash withdrawn	-10,000.00	-52,920.30
Securities withdrawn	0.00	0.00
Change in value	2,738.96	6,362.47
Closing value	\$676,682.74	\$676,682.74

Estimated accrued interest ^ 291.34

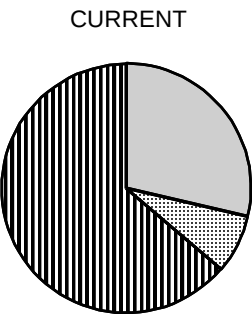
Total value (incl. accruals) \$676,974.08

^ Estimated accrued interest is included for your convenience. The value represents the estimated portion of the interest that would be received upon the sale of your Fixed Income positions. For more information, see the Specific instructions and disclosures page.

Value over time



Portfolio summary



CURRENT		ASSET TYPE		PREVIOUS VALUE ON JAN 31	%	CURRENT VALUE ON FEB 28	%	ESTIMATED ANN. INCOME
ASSETS		Cash and sweep balances		187,608.59	27.43	193,887.74	28.65	7,624
		Stocks, options & ETFs		0.00	0.00	0.00	0.00	0
		Fixed income securities		66,552.95	9.73	51,353.90	7.59	775
		Mutual funds		0.00	0.00	0.00	0.00	0
		Annuities/insurance #		429,782.24	62.84	431,441.10	63.76	0
Asset value				\$683,943.78	100%	\$676,682.74	100%	\$8,399

Certain assets in this category may not be held in your account. None of the positions are protected by SIPC. If you no longer own any of these investments, please tell us so we can update this section. For important additional information please refer to the disclosures contained in this statement.

SNAPSHOT

Page 2 of 12

PARESH C NARAN &
JUDY P NARAN JT WROS
TOD

FEBRUARY 1, 2025 - FEBRUARY 28, 2025
ACCOUNT NUMBER: 8741-4615

Cash flow summary

	THIS PERIOD	THIS YEAR
Opening value of cash and sweep balances	\$187,608.59	
Income and distributions	671.65	1,527.24
Securities sold and redeemed	15,607.50	25,607.50
Net additions to cash	\$16,279.15	\$27,134.74
Electronic funds transfers	-10,000.00	-52,920.30
Net subtractions from cash	-\$10,000.00	-\$52,920.30
Closing value of cash and sweep balances	\$193,887.74	

Income summary *

	THIS PERIOD	THIS YEAR
TAXABLE Money market/sweep funds	571.65	1,220.99
Interest	100.00	306.25
Total taxable income	\$671.65	\$1,527.24
Total federally tax-exempt income	\$0.00	\$0.00
Total income	\$671.65	\$1,527.24

* Certain distributions made in the current year are reported as prior year income according to IRS regulations. This may cause a difference between Cash Flow and Income Summary totals.

Gain/loss summary **

	UNREALIZED	THIS PERIOD REALIZED	THIS YEAR REALIZED
Short term/Net lots	836.00	0.00	0.00
Long term (L)	653.23	607.50	607.50
Total	\$1,489.23	\$607.50	\$607.50

** Net tax lots can combine short and long term holdings, along with reinvested and systematic dividend lots into the Short term/Net lots category.



Advisors

SNAPSHOT

Page 3 of 12

**PARESH C NARAN &
JUDY P NARAN JT WROS
TOD**

FEBRUARY 1, 2025 - FEBRUARY 28, 2025
ACCOUNT NUMBER: 8741-4615

Your Financial Advisor

GEORGE EDWARD C MOSELEY
Phone: 919-881-7390

3105 GLENWOOD AVE
STE 201
RALEIGH, NC 27612

Account profile

Full account name:

PARESH C NARAN &
JUDY P NARAN JT WROS
TOD

Account type:

Brokerage Cash Services

Brokerage account number:

8741-4615

Brokerage Cash Services number:

1652053560

Tax status:

Taxable

Investment objective/Risk tolerance:*

CONSERVATIVE GROWTH
INTERMEDIATE (3-5 YEARS)

Time horizon:*

MODERATE

Liquidity needs:*

Cost Basis Election:

First in, First out

Sweep option:

EXPANDED BANK DEPOSIT

*For more information, please visit us at: www.wellsfargoadvisors.com/disclosures

Available funds

Cash	0.00
Money market and sweep funds	193,887.74
Available for loan	0.00
Your total available funds	\$193,887.74

Client service information

Client service: 800-266-6263
Website: www.wellsfargoadvisors.com

For your consideration

Go paperless. Accessing your account documents online is easy, secure, and costs nothing. Sign on at wellsfargoadvisors.com, go to **Portfolio** and select **Statements & Docs**, and then click on the **Delivery Preferences** link. Choose **Paperless - All Docs** or view your Delivery Settings details to select specific account documents for paperless delivery. If you do not have a Username and Password, visit wellsfargoadvisors.com/signup or call 1-877-879-2495 for enrollment assistance.

Document delivery status

Email Address: MOUTHHEALER@HOTMAIL.COM

	Paper	Electronic
Statements:		X
Trade confirmations:		X
Tax documents:	X	
Shareholder communications:		X
Other documents:		X

**PARESH C NARAN &
JUDY P NARAN JT WROS
TOD**

FEBRUARY 1, 2025 - FEBRUARY 28, 2025
ACCOUNT NUMBER: 8741-4615

Additional information

	THIS PERIOD	THIS YEAR
Gross proceeds	15,607.50	25,607.50

Portfolio detail

Cash and Sweep Balances

Sweep Balances - You have the right, in the course of normal business operations, to withdraw balances in the Bank Deposit Sweep Program(s) or redeem shares of the money market mutual fund used in the sweep, subject to any open commitments in any of your accounts and have the proceeds returned to your accounts or remitted to you. The money market mutual funds in the sweep reserve the right to require one or more day's prior notice before permitting withdrawals.

Standard Bank Deposit Sweep - Consists of monies generally first held at Wells Fargo Bank, N.A. and (if amounts exceed \$250,000) at one or more Wells Fargo affiliated banks.

Expanded Bank Deposit Sweep - Consists of monies held at Wells Fargo Bank, N.A. unless indicated otherwise on our public website and (if amounts exceed \$250,000) at one or more Wells Fargo affiliated or nonaffiliated banks.

Brokered Liquid Deposit - Consists of monies held at Wells Fargo Bank N.A., as described in the Brokered Liquid Deposit Disclosure.

Assets in the Bank Deposit Sweep Program and Brokered Liquid Deposit are not covered by SIPC, but are instead eligible for FDIC insurance of up to \$250,000 per depositor, per institution, in accordance with FDIC rules. Insurance is subject to FDIC rules, including for pass-through coverage, which require certain conditions to be satisfied for deposit insurance coverage to apply. Wells Fargo Clearing Services, LLC is not an FDIC-insured depository institution; FDIC deposit insurance only protects against the failure of an insured depository institution. Banking products and services provided by nonaffiliated banks and Wells Fargo Bank, N.A. Member FDIC. For additional information, please contact Your Financial Advisor.

DESCRIPTION	% OF ACCOUNT	ANNUAL PERCENTAGE YIELD EARNED*	CURRENT MARKET VALUE	ESTIMATED ANNUAL INCOME
BROKERED LIQUID DEPOSIT	26.30	4.282	177,973.90	7,621.00
Interest Period 02/01/25 - 02/28/25				
EXPANDED BANK DEPOSIT	2.35	0.019	15,913.84	3.00
Interest Period 02/01/25 - 02/28/25				
Total Cash and Sweep Balances	28.65		\$193,887.74	\$7,624.00

* APYE measures the total amount of the interest paid on an account based on the interest rate and the frequency of the compounding during the interest period. The annual percentage yield earned is expressed as an annualized rate, based on a 365 day year.



PARESH C NARAN &
JUDY P NARAN JT WROS
TOD

FEBRUARY 1, 2025 - FEBRUARY 28, 2025
ACCOUNT NUMBER: 8741-4615

Bank Deposit Allocation

Monies on deposit at each bank are eligible for FDIC insurance of up to \$250,000 per depositor, per bank in accordance with FDIC rules. Insurance is subject to FDIC rules, including for pass-through coverage, which require certain conditions to be satisfied for deposit insurance coverage to apply. Wells Fargo Clearing Services, LLC is not an FDIC-insured depository institution; FDIC deposit insurance only protects against the failure of an insured depository institution. Banking products and services provided by nonaffiliated banks and Wells Fargo Bank, N.A. Member FDIC. In those instances where deposit balances exceed the maximum FDIC insurance limits, those deposits will be uninsured. Deposits at each bank are not held in your securities brokerage account and therefore not covered by SIPC. Settlement timing differences will cause balances displayed in this section to vary from those indicated in the Portfolio detail section due to activity that occurs after 2pm ET on the last business day of the month. For additional information, please contact Your Financial Advisor.

DESCRIPTION	FDIC CERT NUMBER	CURRENT VALUE	AS OF VALUE DATE
WELLS FARGO BANK, N.A.	3511	193,887.74	02/28
Total Bank Deposits		\$193,887.74	

Fixed Income Securities

Corporate and municipal bonds and other fixed income securities are priced by a computerized pricing service or, for less actively traded issues, by utilizing a yield-based matrix system to arrive at an estimated market value.

Government Bonds

DESCRIPTION	% OF ACCOUNT	QUANTITY	ADJ PRICE/ ORIG PRICE	ADJ COST/ ORIG COST	CURRENT PRICE	CURRENT MARKET VALUE	UNREALIZED GAIN/LOSS	ESTIMATED		
								ACCRUED INTEREST	ANNUAL INCOME	ANNUAL YIELD (%)
US TREASURY ^ NOTES CPN 3.875% DUE 03/31/25 DTD 03/31/23 FC 09/30/23 Moody AAA CUSIP 91282CGU9 Acquired 08/25/23 L	1.48	10,000	98.33	9,840.52	99.9530	9,995.30	154.78	161.82	388	3.87
US TREASURY NOTES CPN 3.875% DUE 04/30/25 DTD 04/30/23 FC 10/31/23 Moody AAA CUSIP 91282CGX3 Acquired 08/25/23 L	1.48	10,000	98.29	9,836.22	99.9180	9,991.80	155.58	129.52	388	3.87

**PARESH C NARAN &
JUDY P NARAN JT WROS
TOD**

FEBRUARY 1, 2025 - FEBRUARY 28, 2025
ACCOUNT NUMBER: 8741-4615

Fixed Income Securities

Government Bonds continued

DESCRIPTION	% OF ACCOUNT	QUANTITY	ADJ PRICE/ ORIG PRICE	ADJ COST/ ORIG COST	CURRENT PRICE	CURRENT MARKET VALUE	UNREALIZED GAIN/LOSS	ESTIMATED		
								ACCRUED INTEREST	ANNUAL INCOME	ANNUAL YIELD (%)
US TREAS STRIPS 02/26 INTEREST PMT DUE 02/15/26 DTD 02/15/96 Moody NR , S&P NR CUSIP 912833LY4 Acquired 02/23/24 L	2.70	19,000	95.72 91.42	18,187.93 17,377.18	96.2400	18,285.60	97.67	N/A	N/A	N/A
Total Government Bonds	5.66	39,000		\$37,864.67 \$37,053.92		\$38,272.70	\$408.03	\$291.34	\$775	2.02

^ Denotes bonds with a maturity date in the next 60 days. Please contact us for further investment opportunities or any assistance.

Market Linked Notes and Securities

For more information, see the Specific instructions and disclosures page.

DESCRIPTION	% OF ACCOUNT	QUANTITY	ADJ PRICE/ ORIG PRICE	ADJ COST/ ORIG COST	CURRENT PRICE	CURRENT MARKET VALUE	UNREALIZED GAIN/LOSS	ESTIMATED		
								ACCRUED INTEREST	ANNUAL INCOME	ANNUAL YIELD (%)
RBC 2YR MLS LNKD TO SPX VAR% CONT FXD RTN @ MTY CPN 0.000% DUE 07/07/25 DTD 07/05/23 FC 07/07/25 Moody NR CUSIP 78016NDT1 Acquired 06/29/23 L	0.33	2,000	100.00	2,000.00	112.2600	2,245.20	245.20	N/A	N/A	N/A
GS 3YR MLS AUTOCALL LNKD TO SX5E CPN 0.000% DUE 03/04/27 DTD 03/04/24 FC 03/04/27 Moody NR CUSIP 40057Y4L4 Acquired 02/28/24 S	0.81	5,000	100.00	5,000.00	110.2700	5,513.50	513.50	N/A	N/A	N/A



PARESH C NARAN &
JUDY P NARAN JT WROS
TOD

FEBRUARY 1, 2025 - FEBRUARY 28, 2025
ACCOUNT NUMBER: 8741-4615

Fixed Income Securities

Market Linked Notes and Securities continued

DESCRIPTION	% OF ACCOUNT	QUANTITY	ADJ PRICE/ ORIG PRICE	ADJ COST/ ORIG COST	CURRENT PRICE	CURRENT MARKET VALUE	UNREALIZED GAIN/LOSS	ESTIMATED		
								ACCRUED INTEREST	ANNUAL INCOME	ANNUAL YIELD (%)
CIBC 5YR MLS LNKD TO SX5E VAR% CONT MIN RTN @ MTY CPN 0.000% DUE 03/06/29 DTD 03/05/24 FC 03/06/29 Moody NR CUSIP 13607XQD2 Acquired 02/29/24 S	0.79	5,000	100.00	5,000.00	106.4500	5,322.50	322.50	N/A	N/A	N/A
Total Market Linked Notes and Securities	1.93			\$12,000.00		\$13,081.20	\$1,081.20			
Total Fixed Income Securities	7.59			\$49,864.67 \$49,053.92		\$51,353.90	\$1,489.23	\$291.34	\$775	1.51

Annuities/Insurance

These positions are not held in your account and are not protected by SIPC. These positions are held directly by the issuing insurance company and are shown for informational purposes only. Annuity and insurance information is provided directly from the insurance companies. Accuracy is not guaranteed and surrender charges may apply. IRA holders will receive a separate IRS Form 5498/FMV Statement in compliance with IRS requirements. Total premium(s) represents the gross amount of premiums made since the contract issue date and is not reduced by any withdrawals. Elected benefit rider information may not be available from all insurance companies. Verify contract and rider information prior to taking action on your contract as values may have changed. Please contact Your Financial Advisor should you have any questions about the contracts you own.

Fixed Annuities

DESCRIPTION	% OF ACCOUNT	AS OF VALUE DATE		ESTIMATED MARKET VALUE
ATHENE ANNUITY AND LIFE CO ATHENE MYG 5 MVA FIXED ANNUITY CONTR# 3300464154 ISSUE DATE 8/30/23 TOTAL PREMIUM(S) \$200,000.00	31.89	02/27/25		215,786.08
Sub Funds 5 Year Fixed		Units 0.00000	Estimated Value 215,786.08	% Market Value 100.00

**PARESH C NARAN &
JUDY P NARAN JT WROS
TOD**

FEBRUARY 1, 2025 - FEBRUARY 28, 2025
ACCOUNT NUMBER: 8741-4615

Annuities/Insurance continued

Fixed Annuities

DESCRIPTION	% OF ACCOUNT	AS OF VALUE DATE	ESTIMATED MARKET VALUE
MASSMUTUAL ASCEND LIFE INS CO ELEVATE 3 FIXED ANNUITY CONTR# 3015360487 ISSUE DATE 8/23/23 TOTAL PREMIUM(S) \$200,000.00	31.87	02/27/25	215,655.02
Sub Funds MVA3UB		Units 0.00000	Estimated Value 215,655.02
		% Market Value 0.00	
Total Fixed Annuities	63.76		\$431,441.10
Total Annuities/Insurance	63.76		\$431,441.10

Activity detail

Income and distributions

DATE	ACCOUNT TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	AMOUNT
02/18	Cash	INTEREST		US TREASURY WI NOTES CPN 2.000% DUE 02/15/25 DTD 02/17/15 FC 08/15/15 021525 10,000 AS OF 2/15/25 CUSIP 912828J27		100.00
02/28	Cash	INTEREST		EXPANDED BANK DEPOSIT 022825 15,913		0.07
02/28	Cash	INTEREST		BROKERED LIQUID DEPOSIT 022825 177,402		571.58
Total Income and distributions:						\$671.65

Securities sold and redeemed

DATE	ACCOUNT TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	AMOUNT
02/18	Cash	REDEMPTION	-10,000.00000	US TREASURY WI NOTES CPN 2.000% DUE 02/15/25 DTD 02/17/15 FC 08/15/15 CUSIP 912828J27		10,000.00



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TOD

FEBRUARY 1, 2025 - FEBRUARY 28, 2025
ACCOUNT NUMBER: 8741-4615

Activity detail continued

Securities sold and redeemed

DATE	ACCOUNT TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	AMOUNT
02/27	Cash	REDEMPTION	-5,000.00000	GS 3YR MLS AUTOCALL LNKD TO RTY CPN 0.000% DUE 02/19/27 DTD 02/22/24 FC 02/19/27 CUSIP 40057Y7K3		5,607.50
Total Securities sold and redeemed:						\$15,607.50

Electronic funds transfer

DATE	ACCOUNT TYPE	TRANSACTION	DESCRIPTION	AMOUNT
02/05	Cash	AUTO ACTIVITY	MONTHLY DISTRIBUTION TRACE # 121000240016670	-10,000.00
Total Electronic funds transfer:				-\$10,000.00

Cash sweep activity

Our Cash Sweep program allows you to earn a return on the idle cash balances in your account by automatically investing such balances into one of our cash sweep options. These 'sweep transactions' may represent a net amount for the day and occur on settlement date. The following section displays transfers into and out of your sweep option. Transactions displayed here are Transfer To, Transfer From and Reinvested Dividends and Interest. These transaction amounts are not included in your cash flow summary.

DATE	TRANSACTION	DESCRIPTION	AMOUNT	DATE	TRANSACTION	DESCRIPTION	AMOUNT
02/01		BEGINNING BALANCE	177,402.34	02/28	REINVEST INT	EXPANDED BANK DEPOSIT	0.07
02/03	TRANSFER TO	EXPANDED BANK DEPOSIT	10,206.25	02/28	TRANSFER TO	EXPANDED BANK DEPOSIT	5,607.50
02/05	TRANSFER FROM	EXPANDED BANK DEPOSIT	-10,000.00	02/28	REINVEST INT	BROKERED LIQUID DEPOSIT	571.58
02/19	TRANSFER TO	EXPANDED BANK DEPOSIT	10,100.00	02/28		ENDING BALANCE	193,887.74

PARESH C NARAN &
JUDY P NARAN JT WROS
TOD

FEBRUARY 1, 2025 - FEBRUARY 28, 2025
ACCOUNT NUMBER: 8741-4615

Bank Deposits Through Teller

February 1 - February 28

Wells Fargo Bank, N.A. (Member FDIC)

Account number 1652053560

Questions? Call us at 1-800-266-6263

Deposits made in a bank branch on the last business day of the month will typically appear on your next statement. Wells Fargo Clearing Services, LLC is not an FDIC-insured depository institution; FDIC deposit insurance only protects against the failure of an insured depository institution. Banking products and services provided by Wells Fargo Bank, N.A. Member FDIC.

DATE	TRANSACTION	DESCRIPTION	AMOUNT	BANK BALANCE
02/01		BEGINNING BALANCE		\$0.00
02/28		ENDING BALANCE		\$0.00

Realized gain/loss

Realized Gain/Loss Summary

	THIS PERIOD GAIN	THIS PERIOD LOSS	THIS PERIOD NET	THIS YEAR GAIN	THIS YEAR LOSS	THIS YEAR NET
Short term	0.00	0.00	0.00	0.00	0.00	0.00
Long term	607.50	0.00	607.50	607.50	0.00	607.50
Total Realized Gain/Loss	\$607.50	\$0.00	\$607.50	\$607.50	\$0.00	\$607.50



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TOD

FEBRUARY 1, 2025 - FEBRUARY 28, 2025
ACCOUNT NUMBER: 8741-4615

Realized Gain/Loss Detail

Long term

DESCRIPTION	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
US TREASURY WI	10,000.00000	100.0000 95.7640	08/25/23	02/18/25	10,000.00	10,000.00 9,583.41	0.00
NOTES CPN 2.000% DUE 02/15/25 DTD 02/17/15 FC 08/15/15 CUSIP 912828J27							
GS 3YR MLS AUTOCALL LNKD TO RTY	5,000.00000	100.0000	02/16/24	02/27/25	5,607.50	5,000.00	607.50
CPN 0.000% DUE 02/19/27 DTD 02/22/24 FC 02/19/27 CUSIP 40057Y7K3							
Total Long term					\$15,607.50	\$15,000.00 \$14,583.41	\$607.50

Specific instructions and disclosures

Available funds

"Available for loan" reflects the approximate amount available as of the statement period ending date and should be reduced by any pending checks and Visa charges not yet cleared. This amount is the approximate amount available for withdrawal and loans. A margin loan is a variable rate loan secured by your account.

Callable Securities

Securities that are subject to a partial call will be selected by an impartial lottery process in which the probability of your securities being selected for redemption is proportional to the holdings of all shareholders of such securities held in street name. If a security is called prior to maturity it may affect the yield you receive. Additional information is available at www.wellsfargoadvisors.com under Legal Disclosures or the written procedures are available upon request.

Cost basis - To add or update information or modify your reporting options, please contact Your Financial Advisor.

This statement presents estimated unrealized or realized gains or losses for your information only. If acquisition or other information is not available, the gain/loss information may not be displayed and section and summary totals may not reflect your complete portfolio. Cost basis information is not verified by Wells Fargo Advisors and should not be relied upon for legal or tax purposes. Revisions to this information (due to corporate mergers, tenders and other reorganizations) may be required from time to time.

Cost basis for factored bonds (GNMA, CMO, etc.) will be adjusted for paydown of principal. Systematic investments in mutual funds and reinvested dividends for mutual funds and stocks have been consolidated for each position. Unit cost data for systematic investments and dividend reinvestment securities is provided for informational purposes only and is a non-weighted average.

Your account statement should not be used for tax preparation without assistance from your tax consultant. We do not report capital gains or losses for non-covered securities to the IRS.

Cost basis options

Unless specific tax lots are selected at trade time, sales of tax lots will occur using the cost basis election reflected in the Account profile section.

Market Linked Notes and Securities

Pricing for these securities is an indication of secondary market value only and any return of principal provided by the structure applies when held to maturity and is subject to the creditworthiness of the issuer. This section may include securities not sold through Wells Fargo Advisors. It may also include Wells Fargo issues that were sold to third parties by affiliates.

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FEBRUARY 1, 2025 - FEBRUARY 28, 2025
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Estimated accrued interest on Fixed Income securities

Estimated accrued interest is included in the Portfolio summary as a convenience to you and represents the estimated portion of the interest that would be received upon the sale of the Fixed Income positions in your account, calculated from the date of the last coupon (or dated date) through the date of the account statement, based upon information provided by the issuer. This is not a guarantee that this amount will be realized in your account. Actual income will be based upon the payout schedule of the securities held in your account. If you own a Foreign Fixed Income security, and it is denominated in a foreign currency, the Estimated accrued interest will not be accurate.