£1040

Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return

2020

OMB No. 1545-007

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

Filing Status Check only one box.	If yo	Single Married filing jointly u checked the MFS box, enter the son is a child but not your depende	name of y	ed filing separately your spouse. If you		_		, ,	_	-	-	. , . ,	
Your first name and middle initial Last no				me					Your	Your social security number			
SATYANARAYANA CHI				LUBOINA					675	675-08-2001			
If joint return, spouse's first name and middle initial Last na				me					Spou	Spouse's social security number			
Home address	•	er and street). If you have a P.O. box, se	ee instruction	ons.				Apt. no.	•		al Election	n Campaign	
		ce. If you have a foreign address, also o	complete s	naces helow	Sta	ite.	7IP (code				ly, want \$3	
Renton	,001 0111	oo. II you have a loroigh address, also c	omplote e	WA				057	"	to go to this fund. Checking a			
Foreign countr	/ name		I F	Foreign province/state/county			Foreign postal code		_	box below will not change your tax or refund.			
r orongir oddira	y mamo			oroign province, otate	1 010	. oreign poetar code		You Spou					
At any time du	ring 20	020, did you receive, sell, send, ex	change, c	or otherwise acquire	e any	financial intere	est in	any virtual	currency	·? [Yes	⋈ No	
Standard Deduction		eone can claim:	•										
Age/Blindness	You	Were born before January 2,	1956	Are blind Sp	ouse	: Was bo	rn be	fore Januar	y 2, 1956	3 [Is blir	nd	
Dependents	s (see	instructions):		(2) Social securi	(2) Social security (3) Relationship			(4) 🗸 ii	f qualifies	alifies for (see instructions):			
If more		irst name Last name		number		to you		Child tax credit		- 1		er dependents	
than four]				
dependents, see instruction]				
and check]]	
here ▶ □]]	
	1	Wages, salaries, tips, etc. Attach	Form(s) \	W-2						1	6	3,258.	
Attach Sch. B if	2a	Tax-exempt interest	2a		b T	axable interes	t		. 🗔	2b			
required.	3a	Qualified dividends	3a		b (Ordinary divide	nds		. 🗔	3b			
	4a	IRA distributions	4a	b Taxable amount .					· L	4b			
	5a	Pensions and annuities	5a		b T	axable amoun	nt.			5b			
Standard	6a	Social security benefits	6a		b T	axable amoun	nt.			6b			
Deduction for— Single or	7	Capital gain or (loss). Attach Sch	edule D if required. If not required, check here							7		-558.	
Married filing	8	Other income from Schedule 1, line 9								8		5,000.	
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9	5	7,700.	
Married filing	10	Adjustments to income:											
jointly or Qualifying	а	From Schedule 1, line 22											
widow(er), \$24,800	b	Charitable contributions if you take the standard deduction. See instructions 10b											
Head of	С	Add lines 10a and 10b. These are your total adjustments to income								0с			
household, \$18,650	11	Subtract line 10c from line 9. This is your adjusted gross income								11	5	7,700.	
If you checked	12	Standard deduction or itemized deductions (from Schedule A)								12	1	2,400.	
any box under Standard	13	Qualified business income deduc	ction. Atta	ach Form 8995 or F	orm 8	8995-A				13			
Deduction, see instructions.	14	Add lines 12 and 13								12,400.			
	15	Taxable income. Subtract line 1	4 from lin	e 11. If zero or less	, ente	er -0				15	4	5,300.	

Form 1040 (2020))							Page 2			
	16	Tax (see instructions). Check if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌		16	5,762.			
	17	Amount from Schedule 2, line 3				- 	17				
	18	Add lines 16 and 17					18	5,762.			
	19	Child tax credit or credit for other dependen	nts				19				
	20	Amount from Schedule 3, line 7					20				
	21	Add lines 19 and 20					21				
	22	Subtract line 21 from line 18. If zero or less,					22	5,762.			
	23	Other taxes, including self-employment tax,					23	0.			
	24	Add lines 22 and 23. This is your total tax		,			24	5,762.			
	25	Federal income tax withheld from:						377521			
	а	Form(s) W-2			25a	5,743					
	b	Form(s) 1099			25b	,,,,	_				
	c	Other forms (see instructions)			25c		\dashv				
	d	Add lines 25a through 25c					25d	6,743.			
		2020 estimated tax payments and amount a					26	0,743.			
 If you have a L qualifying child, 	26	Earned income credit (EIC)			1 1		20				
attach Sch. EIC.	27				27		-				
If you have nontaxable	28	Additional child tax credit. Attach Schedule			28		\dashv				
combat pay,	29	American opportunity credit from Form 8863	•		29						
see instructions.	30	Recovery rebate credit. See instructions .			30		_				
	31	Amount from Schedule 3, line 13									
	32	Add lines 27 through 31. These are your tot	32								
	33	Add lines 25d, 26, and 32. These are your to		6,743.							
Refund	34	If line 33 is more than line 24, subtract line 2					34	981.			
	35a	Amount of line 34 you want refunded to you	35a	981.							
Direct deposit? See instructions.	►b	Routing number 0 8 1 0 0 0 0	S								
coo mondonono.	▶ d	Account number 3 5 5 0 0 7 0									
	36	Amount of line 34 you want applied to your	2021 estimate	ed tax ►	36						
Amount	37	Subtract line 33 from line 24. This is the am	ount you owe	now		▶	37				
You Owe For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for									
how to pay, see		2020. See Schedule 3, line 12e, and its instr									
instructions.	38	Estimated tax penalty (see instructions) .		<u> ▶</u>	38						
Third Party		you want to allow another person to dis						₩.			
Designee		structions			_			X No			
		signee's me ▶	Phone no. ▶			sonal ider nber (PIN)	ntification				
Cian		der penalties of perjury, I declare that I have examine		t accompanying sch				st of my knowledge and			
Sign			er has any knowledge.								
Here	Yo	ur signature	Date	Your occupation	he IRS se	nt you an Identity					
				,		- 1		IN, enter it here			
Joint return?				SOFTWARE 1	ENGINEER	(se	(see inst.) ▶				
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupat	tion	I	f the IRS sent your spouse an				
your records.	,				I	dentity Protection PIN, enter it here (see inst.)					
		one no	Email address		O O O CMATT C						
-		one no. (816)419-5471 eparer's name Preparer's signa	Email address	CHSALIA39	99@GMAIL.C	PTIN		Check if:			
Paid				רווריה תיתווי∧			02702	Self-employed			
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	KAIN SAGAR	GUPIA TALLAM	1 09/15/2021		82703				
Use Only		m's name ► GLOBAL TAXES LLC	n (1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	~ (7 20041				no. (678)965-9522			
		m's address ▶ 2530 Pebble Creek I	ıı Cummın				m's EIN 🕨				
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information.		BAA	REV 07/28/21 PR	0		Form 1040 (2020)			

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

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

SATYANARAYANA CHELLUBOINA

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

Attachment Sequence No. 01 Your social security number

675-08-2001

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2 a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-5,000.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ▶		
		8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR,		
Par	t II Adjustments to Income	9	-5,000.
	•		
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions)		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

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

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

2020

OMB No. 1545-0074

Attachment Sequence No. **12**

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

SATYANARAYANA CHELLUBOINA

Your social security number 675-08-2001

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 7,716. 8,274. -558. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -558. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

15

Schedule D (Form 1040) 2020 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -558. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 558.) 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

8949

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074 Attachment Sequence No. 12A

Department of the Treasury Internal Revenue Service

SATYANARAYANA CHELLUBOINA

statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your

Social security number or taxpayer identification number Name(s) shown on return 675-08-2001 Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute broker and may even tell you which box to check. Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss). (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired disposed of (sales price) from column (d) and and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions Robinhood Securities LLC | 01/01/20 | 04/17/20 7,716. 8,274. -558.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶ 7,716. 8,274. -558.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

SCHEDULE E

(Form 1040)

Supplemental Income and Loss

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

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

OMB No. 1545-0074

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

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

Attachment Sequence No. 13

SATY	ANARAYANA CHELL	JUBOINA						6	75-08	-2003	L		
Part	Income or Loss	From Rental Real Estate and Ro	yaltie	s Note: I	f you a	are in th	e business c	of rent	ing pers	onal pr	operty,	use	
	Schedule C. See	instructions. If you are an individual, rep	ort far	m rental inc	ome c	or loss fi	om Form 48	335 oı	n page 2	, line 40).		
A Dic	l you make any payme	nts in 2020 that would require you to	file F	orm(s) 109	99? S	ee instr	uctions .			П	es X	No	
B If "Yes," did you or will you file required Form(s) 1099?											es 🗌	No	
1a		each property (street, city, state, ZIF											
Α	RAMESWARAM, SAKHINETIPALLI EAST GODAVARI ANDHRA PRADESH IN 533251												
В	, ,												
С													
1b	Type of Property	2 For each rental real estate pro	nerty I	isted		Fair	Rental	Personal Use					
	(from list below)	above report the number of fa	iir rent	rental and			ays	Days			QJV		
Α	3	personal use days. Check the if you meet the requirements to	ox only—	Α		365	0		n		1		
В	<u> </u>	qualified joint venture. See instructions.										<u></u>	
					B C							<u>, </u>	
	of Property:	<u> </u>										7	
	le Family Residence	3 Vacation/Short-Term Rental	5 la	nd	-	7 Self-	Rental						
_	ti-Family Residence	4 Commercial		valties			r (describe)	١					
Incom		Properties:	1	A			<u>L (describe</u>				С		
3		•	3			650.		,					
4			4			030.							
			-										
Expen 5			5										
		structions)	6										
6	,	•	7			900							
7		nance	8		'	800.							
8													
9			9										
10		ssional fees	10										
11			11										
12		d to banks, etc. (see instructions)	12										
13			13										
14			14	,									
15			15			850.							
16			16										
17			17	-,									
18	Depreciation expense or depletion												
19	Other (list)												
20	Total expenses. Add lines 5 through 19				5,	650.							
21		line 3 (rents) and/or 4 (royalties). If											
		instructions to find out if you must			_								
	file Form 6198		21		-5,	000.							
22		estate loss after limitation, if any,											
	on Form 8582 (see in	•	22	(-	-5,0	00.)	()()	
23a		eported on line 3 for all rental prope				23a		6	50.				
b		eported on line 4 for all royalty prop	erties			23b							
С		eported on line 12 for all properties				23c							
d		eported on line 18 for all properties				23d							
е		eported on line 20 for all properties				23e		5,6					
24	·	e amounts shown on line 21. Do no		-					24				
25	Losses. Add royalty lo	sses from line 21 and rental real estate	losse	s from line	22. Eı	nter tota	al losses her	е.	25 (5,0	00.)	
26	Total rental real esta	ate and royalty income or (loss).	Comb	ine lines 2	24 and	d 25. E	nter the re	sult					
		V, and line 40 on page 2 do not											
	Schedule 1 (Form 102	10) line 5. Otherwise include this a	mount	in the tot	al on	line 41	on page 2		26		-5-	000.	