

**Filing Status**  
 Single     Married filing separately (MFS)(formerly Married)     Qualifying widow(er) (QW)  
 Check only one box. If you checked the QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

Your first name and middle initial: **ACHALA**    Last name: **MALLELA**    Your identifying number (see instructions): **117-53-1615**

Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no.    Check if:  Individual  Estate or Trust  
**2124 FOX HILL DR**    **10**

City, town, or post office. If you have a foreign address, also complete spaces below. State    ZIP code  
**Grand Blanc**    **MI**    **48439**

Foreign country name    Foreign province/state/county    Foreign postal code

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?     Yes     No

| Dependents (see instructions):   | (1) First name | Last name | (2) Dependent's identifying number | (3) Dependent's relationship to you | (4) Check if qualifies for (see instr.): |                             |
|--|----------------|-----------|------------------------------------|-------------------------------------|--|-----------------------------|
|  |                |           |                                    |                                     | Child tax credit                         | Credit for other dependents |
| If more than four dependents, see instructions and check here ▶ <input type="checkbox"/> |                |           |                                    |                                     | <input type="checkbox"/>                 | <input type="checkbox"/>    |
|  |                |           |                                    |                                     | <input type="checkbox"/>                 | <input type="checkbox"/>    |
|  |                |           |                                    |                                     | <input type="checkbox"/>                 | <input type="checkbox"/>    |
|  |                |           |                                    |                                     | <input type="checkbox"/>                 | <input type="checkbox"/>    |

|   |  |               |              |
|---|--|---------------|--------------|
| <b>Income Effectively Connected With U.S. Trade or Business</b>   | <b>1 a</b> Wages, salaries, tips, etc. Attach Form(s) W-2 . . . . .  | <b>1a</b>     | <b>4,259</b> |
|   | <b>b</b> Scholarship and fellowship grants. Attach Form(s) 1042-S or required statement. See instructions . . . . .                    | <b>1b</b>     |              |
|   | <b>c</b> Total income exempt by a treaty from Schedule OI (Form 1040-NR), Item L, line 1(e) . . . . .                                  | <b>1c</b>     |              |
|   | <b>2a</b> Tax-exempt interest . . . . .  | <b>2a</b>     |              |
|   | <b>2b</b> Taxable interest . . . . .   | <b>2b</b>     |              |
|   | <b>3a</b> Qualified dividends . . . . .  | <b>3a</b>     |              |
|   | <b>3b</b> Ordinary dividends . . . . .   | <b>3b</b>     |              |
|   | <b>4a</b> IRA distributions . . . . .  | <b>4a</b>     |              |
|   | <b>4b</b> Taxable amount . . . . .   | <b>4b</b>     |              |
|   | <b>5a</b> Pensions and annuities . . . . .   | <b>5a</b>     |              |
|   | <b>5b</b> Taxable amount . . . . .   | <b>5b</b>     |              |
|   | <b>6</b> Reserved for future use . . . . .   | <b>6</b>      |              |
|   | <b>7</b> Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here . . ▶ <input type="checkbox"/> | <b>7</b>      |              |
|   | <b>8</b> Other income from Schedule 1 (Form 1040), line 9 . . . . .  | <b>8</b>      |              |
|   | <b>9</b> Add lines 1a, 1b, 2b, 3b, 4b, 5b, 7, and 8. This is your <b>total effectively connected income</b> . . . . ▶                  | <b>9</b>      | <b>4,259</b> |
| <b>10</b> Adjustments to income:  |  |               |              |
| <b>a</b> From Schedule 1 (Form 1040), line 22 . . . . .   | <b>10a</b>   |               |              |
| <b>b</b> Charitable contributions for certain residents of India. See instructions . . . . .  | <b>10b</b>   |               |              |
| <b>c</b> Scholarship and fellowship grants excluded . . . . .   | <b>10c</b>   |               |              |
| <b>d</b> Add lines 10a through 10c. These are your <b>total adjustments to income</b> . . . . . ▶   | <b>10d</b>   | <b>0</b>      |              |
| <b>11</b> Subtract line 10d from line 9. This is your <b>adjusted gross income</b> . . . . . ▶  | <b>11</b>  | <b>4,259</b>  |              |
| <b>12</b> <b>Itemized deductions</b> (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction. See instructions . . . . . <b>U.S.-India Tax Treaty</b> . . . . . | <b>12</b>  | <b>12,400</b> |              |
| <b>13a</b> Qualified business income deduction. Attach Form 8995 or Form 8995-A . . . . .   | <b>13a</b>   |               |              |
| <b>b</b> Exemptions for estates and trusts only. See instructions . . . . .   | <b>13b</b>   |               |              |
| <b>c</b> Add lines 13a and 13b . . . . .  | <b>13c</b>   |               |              |
| <b>14</b> Add lines 12 and 13c . . . . .  | <b>14</b>  | <b>12,400</b> |              |
| <b>15</b> <b>Taxable income.</b> Subtract line 14 from line 11. If zero or less, enter -0- . . . . .  | <b>15</b>  |               |              |

|                                   |   |     |     |
|-----------------------------------|---|-----|-----|
| 16                                | Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>   | 16  | 0   |
| 17                                | Amount from Schedule 2 (Form 1040), line 3  | 17  |     |
| 18                                | Add lines 16 and 17   | 18  | 0   |
| 19                                | Child tax credit or credit for other dependents   | 19  |     |
| 20                                | Amount from Schedule 3 (Form 1040), line 7  | 20  |     |
| 21                                | Add lines 19 and 20   | 21  |     |
| 22                                | Subtract line 21 from line 18. If zero or less, enter -0-   | 22  | 0   |
| 23 a                              | Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15   | 23a |     |
| b                                 | Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 10  | 23b |     |
| c                                 | Transportation tax (see instructions)   | 23c |     |
| d                                 | Add lines 23a through 23c   | 23d |     |
| 24                                | Add lines 22 and 23d. This is your <b>total tax</b>   | 24  | 0   |
| 25                                | Federal income tax withheld from:   |     |     |
| a                                 | Form(s) W-2   | 25a | 202 |
| b                                 | Form(s) 1099  | 25b |     |
| c                                 | Other forms (see instructions)  | 25c |     |
| d                                 | Add lines 25a through 25c   | 25d | 202 |
| e                                 | Form(s) 8805  | 25e |     |
| f                                 | Form(s) 8288-A  | 25f |     |
| g                                 | Form(s) 1042-S  | 25g |     |
| 26                                | 2020 estimated tax payments and amount applied from 2019 return   | 26  |     |
| 27                                | Reserved for future use   | 27  |     |
| 28                                | Additional child tax credit. Attach Schedule 8812 (Form 1040)   | 28  |     |
| 29                                | Credit for amount paid with Form 1040-C   | 29  |     |
| 30                                | Reserved for future use   | 30  |     |
| 31                                | Amount from Schedule 3 (Form 1040), line 13   | 31  |     |
| 32                                | Add lines 28 through 31. These are your <b>total other payments and refundable credits</b>  | 32  | 0   |
| 33                                | Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your <b>total payments</b>  | 33  | 202 |
| <b>Refund</b>                     |   |     |     |
| 34                                | If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>  | 34  | 202 |
| 35a                               | Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here  | 35a | 202 |
| Direct deposit? See instructions. | ▶ b Routing number <u>XXXXXXXXXX</u> ▶ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings<br>▶ d Account number <u>XXXXXXXXXX</u><br>▶ e If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here. |     |     |
| 36                                | Amount of line 34 you want <b>applied to your 2021 estimated tax</b>  | 36  |     |
| <b>Amount You Owe</b>             |   |     |     |
| 37                                | <b>Amount you owe.</b> Subtract line 33 from line 24. For details on how to pay, see instructions   | 37  |     |
| 38                                | Estimated tax penalty (see instructions)  | 38  |     |

**Third Party Designee** (Other than paid preparer)

Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions  Yes. Complete below.  No

Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

**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 **RESEARCH ASSIATANCE** If the IRS sent you an Identity Protection PIN, enter it here (see inst.)▶

Phone no. **616-920-4024** Email address **ACHALA.MALLELA@GMAIL.COM**

**Paid Preparer Use Only**

Preparer's name **SYAM PRIYA RAM SAGAR GUPTA TALLAM** Preparer's signature ▶ Date **02-12-2021** PTIN **P02082703** Check if:  Self-employed

Firm's name ▶ **GLOBAL TAXES LLC** Phone no. ▶

Firm's address ▶ **2530 PEBBLE CREEK LN** Firm's EIN ▶  
**Cumming, GA 30041**