E1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		(99) <b>urn</b>	20	20	OMB No. 1545	5-0074	IRS Use	Only-	–Do not w	rite or staple	in this space.
Filing Status Check only one box.	lf yc	Single Arried filing jointly ou checked the MFS box, enter the n son is a child but not your dependent	ame of	-	separately buse. If you	. ,				<i>,</i>		, ,	low(er) (QW) ne qualifying
Your first name	e and m	iddle initial	Last na	ime							Your so	cial securi	ty number
SAIBABA			SUNI	DARASI	ETTY						067-	75-171	6
lf joint return, s	spouse's	s first name and middle initial	Last na	ime							Spouse's social security number		
Home address	`	er and street). If you have a P.O. box, see	instructi	ons.				, A	Apt. no.		Check ł	nere if you,	
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete s	paces be	elow.	Sta	te	ZIP co	ode				ntly, want \$3 Checking a
ROUND R	OCK					T	X	786	564		•	ow will not	0
Foreign countr	y name			Foreign p	rovince/stat	e/coun	ty	Foreig	gn postal co	ode	your tax	c or refund	_
							<b>C</b>				0	Vou	Spouse
At any time di	uring 20	020, did you receive, sell, send, exch				-		est in a	any virtua	I CUI	rrency?	Yes	X No
Standard Deduction	_	eone can claim:	•		•		a dependent						
Age/Blindnes	s You	: 🗌 Were born before January 2, 1	956	Are b	lind S	pouse	: 🗌 Was bo	rn befo	ore Janua	ry 2	, 1956	🗌 ls b	lind
Dependent	s (see	instructions):		(2)	Social secur	rity	(3) Relations	nip	(4) 🖌	if qu	ualifies fo	r (see instru	uctions):
If more		irst name Last name		number to you			Child tax cred				her dependents		
than four													
dependents, see instruction													
and check	13												
here 🕨 🗌													
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2 .							. 1		52,821.
Attach	2a	Tax-exempt interest	2a			bТ	axable interes	t.			2b	)	
Sch. B if required.	<u>3a</u>	Qualified dividends	3a			bC	Ordinary divide	nds .			3b	,	
	) 4a	IRA distributions	4a			bΤ	axable amour	nt			4b	,	
	5a	Pensions and annuities	5a			bΤ	axable amour	nt			. 5b	)	
Standard	6a	Social security benefits	6a			bΤ	axable amour	nt			6b	,	
<ul> <li>Deduction for –</li> <li>Single or</li> </ul>	7	Capital gain or (loss). Attach Schee	dule D i	f require	d. If not re	quired	, check here		<b>)</b>		7		-2,500.
Married filing	8	Other income from Schedule 1, lin	e9.								8		-4,370.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. 1	This is yo	our <b>total in</b>	come				. 1	▶ 9		45,951.
<ul> <li>Married filing</li> </ul>	10	Adjustments to income:											
Jointly or Qualifying	а	From Schedule 1, line 22					10	а					
widow(er), \$24,800	b	Charitable contributions if you take	the star	ndard de	duction. S	ee inst	ructions 10	b		300	).		
<ul> <li>Head of</li> </ul>	с	Add lines 10a and 10b. These are	your <b>to</b>	tal adjus	stments to	o incol	me			. 1	► <u>10</u>	c	300.
household, \$18,650	11	Subtract line 10c from line 9. This	is your	adjuste	d gross in	come				. 1	► <u>11</u>		45,651.
<ul> <li>If you checked</li> </ul>	12	Standard deduction or itemized	deduct	ions (fro	om Schedu	ile A)					12	:	12,400.
any box under Standard	13	Qualified business income deduction	ion. Atta	ach Forn	n 8995 or I	Form 8	995-A				13	;	
Deduction, see instructions.	14	Add lines 12 and 13											12,400.
	<sup>′′</sup> 15	Taxable income. Subtract line 14	from lir	ne 11. lf :	zero or les	s, ente	er-0				15		33,251.
													1040 (

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

Form **1040** (2020)

Form 1040 (2020	))										Page <b>2</b>
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b>	4972	3			16	3,796.
	17	Amount from Schedule 2, lir	ne3						- 	. 17	
	18	Add lines 16 and 17								18	3,796.
	19	Child tax credit or credit for	other dependen	ts						19	
	20	Amount from Schedule 3, lir	ne7							20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0						22	3,796.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line <sup>-</sup>	10.				23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>						1	▶ 24	3,796.
	25	Federal income tax withheld	from:								
	а	Form(s) W-2					25a	8	3,008	3.	
	b	Form(s) 1099					25b				
	с	Other forms (see instruction	s)				25c	:			
	d	Add lines 25a through 25c								25d	8,008.
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20	19 retur	n				26	
qualifying child,	27	Earned income credit (EIC)			<sup>1</sup>	Nọ .	27				
attach Sch. EIC.	28	Additional child tax credit. A	ttach Schedule	8812			28				
nontaxable combat pay,	29	American opportunity credit	from Form 8863	8, line 8			29				
see instructions.	30	Recovery rebate credit. See	instructions .				30	1	L,800	).	
	31	Amount from Schedule 3, lir	ne 13				31				
	32	Add lines 27 through 31. The	ese are your <b>tot</b> a	al other paym	ents and	d refund	able c	redits .	I	▶ 32	1,800.
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments					1	▶ 33	9,808.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is t	the amou	unt you	overpaid		. 34	6,012.
neiuliu	35a	Amount of line 34 you want	refunded to you	<b>J.</b> If Form 8888	3 is attac	hed, che	eck her	e	. 🕨 🗌	35a	6,012.
Direct deposit?	►b	Routing number 1 1 1			► c Ty		Chec		Saving	is 👘	
See instructions.	►d	Account number 8 9 5	1 6 7 8	7 7					-		
	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 <b>amo</b>	ount vou owe	now .				)	▶ 37	
You Owe		Note: Schedule H and Sch		•						or	
For details on		2020. See Schedule 3, line 1		,	•			taxoo you	0110 1		
how to pay, see instructions.	38	Estimated tax penalty (see in	nstructions) .			. 🕨	38				
Third Party	Do	you want to allow another					? See				
Designee		tructions	•					🗌 Yes. C	omplet	te below.	X No
		signee's		Phone						entification	
		ne 🕨		no. 🕨					ber (PIN	/	
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com									
Here		· · ·				cupation		i an informati			nt you an Identity
	, TO	ur signature		Date	Your oc	cupation					IN, enter it here
Joint return?					SOFT	WARE	ENGI	NEER	(s	ee inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse	's occupa	tion				nt your spouse an
Keep a copy for your records.	<b>,</b>										ection PIN, enter it here
your rocordo.									(5	ee inst.) 🕨	
		one no.	Dura and 1 1	Email address							Ob a shaife
Paid		parer's name	Preparer's signat		a		Date		PTIN		Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA	TALLAN	4   02/	21/2021	<u> </u>	082703	Self-employed
Use Only		m's name ► GLOBAL TA									(678)965-9522
	Firi	m's address ► 2530 Pebb	le Creek L	n Cummin	g GA	30041			F	irm's EIN 🖡	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		B	AA	RE	V 02/15/21 PR	0		Form <b>1040</b> (2020)

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.

OMB No. 1545-0074
2020
Attachment Sequence No. <b>01</b>

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
SAIBABA SUNDARASETTY	067-75-1716
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	-4,370.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ►		
-		8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	-4,370.
Par	line 8       . <th>3</th> <th>-4,370.</th>	3	-4,370.
10		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 <b>adjustments to income.</b> Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 02/15/21 PRO		e 1 (Form 1040) 2020

# 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.

OMB No. 1545-0074

20

Attachment Sequence No. 12

20

Internal Revenue Service (99) Name(s) shown on return

Department of the Treasury

SAIBABA SUNDARASETTY

Your social security number

067-75-1716

Did yo	u dispose of	any investm	nent(s) in a	qualified o	opportunity f	und during	g the tax y	ear?	_ Yes	🗡 No	
If "Yes	s," attach Foi	rm 8949 and	see its inst	tructions f	or additiona	l requirem	ents for re	porting y	your gain	or loss.	

#### Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions)

lines This	nstructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	<b>(g)</b> Adjustment to gain or loss Form(s) 8949, F line 2, columr	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked					
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked	0.	2,500.			-2,500.
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1		5			
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	6	( )			
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	7	-2,500.			

#### Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions)

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	<b>(g)</b> Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		11			
12	Net long-term gain or (loss) from partnerships, S corporat		12			
13	Capital gain distributions. See the instructions	13				
14	Long-term capital loss carryover. Enter the amount, if any           Worksheet in the instructions	14	( )			
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	15				

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	<b>16</b> -2,500.
	• If line 16 is a <b>gain,</b> 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is <b>zero</b> , 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 <b>both</b> gains?	
	<b>No.</b> Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	<ul> <li>Are lines 18 and 19 both zero or blank and are you not filing Form 4952?</li> <li>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.</li> </ul>	
	☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or     (\$3,000), or if married filing separately, (\$1,500)	<b>21</b> ( 2,500.
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.	
	X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 02/15/21 PRO

Schedule D (Form 1040) 2020

Form	8949	
Form	0373	

### **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.



Internal Revenue Service Name(s) shown on return

Department of the Treasury

Name(s) snown on return	Social security number or taxpayer identification number					
SAIBABA SUNDARASETTY	067-75-1716					

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(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

X (C) Short-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	(c) Date sold or	(d) Proceeds	(e) I Cost or other basis. See the <b>Note</b> below and see <i>Column</i> (e) in the separate instructions	If you enter an enter a co	any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)		(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
GOPI KRISHNA CHALLA - bad debt statement attached	11/14/20	12/31/20	0.	2,500.			-2,500.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked). or line 3 (if Box (	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	0.	2,500.			-2,500.

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

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

SCHEDULE E	
(Form 1040)	

Department of the Treasury

Internal Revenue Service (99)

### **Supplemental Income and Loss**

OMB No. 1545-0074

20

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

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

20 Attachment Sequence No. 13 ► Go to www.irs.gov/ScheduleE for instructions and the latest information.

Name(s)	shown on return							Your soci	al securit	y number
SAIB	ABA SUNDARASETI	Y						067-7	5-171	6
Part	Income or Loss	s From Rental Real Estate and Ro	yalties	s Note	: If you	are in th	e business o	f renting pe	rsonal pr	operty, use
	Schedule C. See	instructions. If you are an individual, rep	ort farr	n rental i	ncome	or loss fi	rom Form 48	<b>35</b> on page	e 2, line 4	0.
A Dic	d you make any payme	nts in 2020 that would require you to	o file F	orm(s) 1	099? 5	See instr	ructions .		. 🗆 Y	(es 🛛 No
		ou file required Form(s) 1099?								res 🗌 No
1a		each property (street, city, state, ZI								
Α		ARAMAIAH THO KANDUKUR, 1			DT AN	DHRA	PRADESH	IN 523	105	
В										
С										
1b	Type of Property	2 For each rental real estate pro	norty li	stad		Fair	Rental	Persona	l Use	• • • •
	(from list below)	above, report the number of fa	air renta	al and		C	Days	Day	s	QJV
Α	3	above, report the number of fa personal use days. Check the if you meet the requirements to	QJV box only		Α	365		0		
В		qualified joint venture. See ins	tructio	ns.	B		303		0	
	+				C					
-	of Property:				•					
	gle Family Residence	3 Vacation/Short-Term Rental	5 Jar	hd		7 Self-	Rental			
	ti-Family Residence	4 Commercial		valties			r (describe)			
ncom	,	Properties:			Α		B			С
3			3			350.	1	,		•
4			4							
Expen			-							
5			5							
6		nstructions)	6							
7						920.				
8	•		8							
9			9							
10		essional fees	10							
11	•		11			800.				
12	-	id to banks, etc. (see instructions)	12							
13			13							
14			14			640.				
15	Supplies		15			760.				
16	Taxes		16							
17	Utilities		17		1,	600.				
18	Depreciation expense	e or depletion	18							
19	Other (list) 🕨		19							
20	Total expenses. Add	lines 5 through 19	20		4,	720.				
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If								
	result is a (loss), see	instructions to find out if you must								
	file Form 6198		21		-4,	370.				
22		I estate loss after limitation, if any,								
	on Form 8582 (see in		22	(	-4,3	370.)	(	)	(	)
23a		eported on line 3 for all rental prope				23a		350.		
b		eported on line 4 for all royalty prop				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		4,720.		
24		e amounts shown on line 21. Do no		-				. 24		
25		sses from line 21 and rental real estate							(	4,370.)
26		ate and royalty income or (loss).								
		V, and line 40 on page 2 do not								1 270
	Schedule 1 (Form 104	40), line 5, Otherwise, include this a	mount	in the t	otal on	une 41	on page 2	26	1	-4,370.

For Paperwork Reduction Act Notice, see the separate instructions.

### Nonbusiness Bad Debt Explanation Statement

Name(s) SAIBABA SUNDARASE	Social Security Number 067-75-1716				
Form/Line: Form	8949	Lin	ne 1		
Explanation of:	Nonbusiness Bad Debt				
Description of Amount: \$2,500	debt: BAD DEBTS				
Date debt became due: 12/31/2020					
Name of debtor: GOPI KRISHNA CHALLA					
Relationship to debtor: FRIEND					
Efforts to collect:					
EFFORTS HAS BEEN PLACED TO RECOVER THE DEBT					
Why decided debt was worthless:					
GOPI KRISHNA CHALLA LEFT THE COUNTRY					