| E1040 | | artment of the Treasury-Internal Revenue Servi S. Individual Income Tax | | (99) urn | 20 | 20 | OMB No. 1545 | -0074 | IRS Us | e Only | —Do not w | vrite or staple | in this space. | |
|--|----------|--|-----------|--------------------|----------------------------|---------|------------------|----------|------------------|--------|-------------|-----------------|-------------------|--|
| Filing Status Check only one box. | lf yo | Single Married filing jointly unchecked the MFS box, enter the n son is a child but not your dependent | ame of | - | separately buse. If you | . , | | | | , | | , 0 | . , . , | |
| Your first name | and m | iddle initial | Last na | ame | | | | | | | Your so | cial securi | ty number | |
| ASREETH | RED | DY | GUJJ | JULA | | | | | | | 355- | 39-392 | 9 | |
| lf joint return, s | pouse's | s first name and middle initial | Last na | ame | | | | | | | Spouse | 's social se | curity number | |
| Home address 770 FAII | | er and street). If you have a P.O. box, see DR | instructi | ions. | | | | | pt. no. . 723 | | Check I | here if you, | | |
| City, town, or p | ost offi | ce. If you have a foreign address, also co | mplete s | spaces be | low. | Sta | te | ZIP co | de | | | | ntly, want \$3 | |
| COPPELL | | | | | | T | X | 750 | 19 | | 0 | ow will not | Checking a change | |
| Foreign country | / name | | | Foreign p | rovince/stat | e/coun | ty | Foreig | n postal (| code | | x or refund | or refund. | |
| At any time du | ring 20 | 020, did you receive, sell, send, excł | nange, o | or otherv | vise acquir | re any | financial intere | est in a | ny virtu | al cu | rrency? | | X No | |
| Standard Deduction Age/Blindness | | eone can claim: | n or you | | dual-statu | | | rn befc | ore Janu | iary 2 | 2, 1956 | 🗌 ls bl | lind | |
| Dependent | s (see | instructions): | | (2) | Social secur | ritv | (3) Relationsh | | | | | r (see instru | uctions): | |
| If more | | irst name Last name | | | number | | | | Child tax credit | | | | her dependents | |
| than four | - | | | | | | | | | | | | | |
| dependents, | | | | | | | | | | | | | | |
| see instruction and check | 5 | | | | | | | | | | | | | |
| here 🕨 🗌 | | | | | | | | | | | | | | |
| | 1 | Wages, salaries, tips, etc. Attach F | orm(s) | W-2 . | | | | | | | . 1 | | 62,659. | |
| Attach | 2a | Tax-exempt interest | 2a | 2a | | | axable interes | t. | | | . 2b |) | | |
| Sch. B if required. | 3a | Qualified dividends | 3a | | | bC | Ordinary divide | nds . | | | . 3b |) | | |
| | 4a | IRA distributions | 4a | | | bΤ | axable amoun | t | | | . 4b |) | | |
| | 5a | Pensions and annuities | 5a | | | bТ | axable amoun | t | | | . 5b |) | | |
| Standard | 6a | Social security benefits | 6a | | | bТ | axable amoun | t | | | . 6b |) | | |
| Deduction for – Single or | 7 | Capital gain or (loss). Attach Schee | dule D i | f require | d. If not re | quired | , check here | | | | 7 | | | |
| Married filing | 8 | Other income from Schedule 1, lin | e9. | | | | | | | | . 8 | | -5,000. | |
| separately, \$12,400 | 9 | Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, | and 8. 1 | This is yo | our total in | come | | | | | ▶ 9 | | 57,659. | |
| Married filing | 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. Se | ee inst | ructions 10 | b | | | | | | |
| Head of | С | Add lines 10a and 10b. These are your total adjustments to income | | | | | | | ► <u>10</u> | c | | | | |
| household, \$18,650 | 11 | Subtract line 10c from line 9. This | is your | adjusteo | d gross in | come | | | | | ► <u>11</u> | | 57,659. | |
| If you checked | 12 | Standard deduction or itemized | deduct | t ions (fro | om Schedu | ile A) | | | | | . 12 | 2 | 12,400. | |
| any box under Standard | 13 | Qualified business income deduction | on. Atta | ach Forn | n 8995 or F | Form 8 | 995-A | | | | . 13 | 3 | | |
| Deduction, see instructions. | 14 | Add lines 12 and 13 | | | | | | | | | | | 12,400. | |
|) | 15 | Taxable income. Subtract line 14 | from lir | ne 11. lf : | zero or les | s, ente | er-0 | | | | . 15 | 5 | 45,259. | |

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

Form **1040** (2020)

| Form 1040 (2020 | D) | | | | | | | | | Page 2 |
|--------------------------------------|------|---|--------------------------|---------------------|---------------------|----------|----------------|--|-------------|-------------------------|
| | 16 | Tax (see instructions). Check | if any from Form | (s): 1 🗌 881 | 4 2 4972 | 3 | | | 16 | 5,751. |
| | 17 | Amount from Schedule 2, lin | ie3 | | | | | | 17 | |
| | 18 | Add lines 16 and 17 | | | | | | | 18 | 5,751. |
| | 19 | Child tax credit or credit for | other dependen | ts | | | | | 19 | |
| | 20 | Amount from Schedule 3, lin | | | | | | | | |
| | 21 | Add lines 19 and 20 | | | | | | | 21 | |
| | 22 | Subtract line 21 from line 18 | . If zero or less, | enter -0 | | | | | 22 | 5,751. |
| | 23 | Other taxes, including self-e | mployment tax, | from Schedule | e 2, line 10 . | | | | 23 | 0. |
| | 24 | Add lines 22 and 23. This is | your total tax | | | | | . 🕨 | 24 | 5,751. |
| | 25 | Federal income tax withheld | | | | | | | | |
| | а | Form(s) W-2 | | | | 25a | 7 | ,527 | • | |
| | b | Form(s) 1099 | | | | 25b | | | _ | |
| | С | Other forms (see instructions | s) | | | 25c | : | | | |
| | d | Add lines 25a through 25c | | | | | | | 25d | 7,527. |
| • If you have a | 26 | 2020 estimated tax payment | | | | | | | 26 | |
| qualifying child, attach Sch. EIC. | 27 | Earned income credit (EIC) | | | ^{No} . | 27 | | | | |
| If you have | 28 | Additional child tax credit. A | ttach Schedule | 8812 | | 28 | | | _ | |
| nontaxable combat pay, | 29 | American opportunity credit | from Form 8863 | 8, line 8 | | 29 | | 16 5,7 17 18 5,7 19 20 21 22 5,7 23 24 5,7 7,527. 26 <td></td> | | |
| see instructions. | 30 | Recovery rebate credit. See | instructions . | | | 30 | 1 | ,800 | | |
| | 31 | Amount from Schedule 3, lin | ie 13 | | | 31 | | | | |
| | 32 | Add lines 27 through 31. The | ese are your tota | al other paym | ents and refun | dable c | redits | . 🕨 | ► <u>32</u> | 1,800. |
| | 33 | Add lines 25d, 26, and 32. These are your total payments | | | | | | | | 9,327. |
| Refund | 34 | If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid | | | | | | | 34 | 3,576. |
| | 35a | | | | | | | | | 3,576. |
| Direct deposit? See instructions. | ►b | Routing number 1 1 1 | | | ► c Type: [| | king 🗌 S | Saving | s | |
| See instructions. | ►d | Account number 8 7 2 | 8 1 8 9 | 89 | | | | | | |
| | 36 | Amount of line 34 you want a | applied to your | 2021 estimate | ed tax 🕨 | 36 | | | | |
| Amount | 37 | Subtract line 33 from line 24 | . This is the amo | ount you owe | now | | | . 🕨 | · 37 | |
| You Owe | | Note: Schedule H and Sch | | | | I of the | taxes you | owe fo | or 🛛 | |
| For details on how to pay, see | | 2020. See Schedule 3, line 1 | | | | 1 | 1 | | | |
| instructions. | 38 | Estimated tax penalty (see in | | | | | | | | |
| Third Party | | you want to allow another | | | | | | | | |
| Designee | | structions | | | | . 🕨 | | • | | |
| | | signee's me ► | | Phone no. | | | | | | |
| Sign | | | hat I have examine | | l accompanying s | chedules | | | , | st of my knowledge and |
| - | | | plete. Declaration | of preparer (othe | r than taxpayer) is | | | | | |
| Here | Yo | ur signature | | Date | Your occupation | ı | | If · | | |
| | κ | | | | | | | | | IN, enter it here |
| Joint return? See instructions. | | | | | SOFTWARE | | NEER | | , | |
| Keep a copy for | Sp | ouse's signature. If a joint return, t | ooth must sign. | Date | Spouse's occup | ation | | | | |
| your records. | | | | | | | | | | |
| | Ph | one no. (817)987-918 | 6 | Email address | ASREETHHRE | EDDI9@ | GMAIL.CO | M | | |
| | | eparer's name | Preparer's signat | | | Date | | | | Check if: |
| Paid | SYAM | I PRIYA RAM SAGAR GUPTA TALLAM | SYAM PRIYA | RAM SAGAR | GUPTA TALLA | м 09/ | 23/2021 | P020 | 82703 | Self-employed |
| Preparer | | m's name GLOBAL TAX | | | | | | | | 678)965-9522 |
| Use Only | Firi | m's address ► 2530 Pebb | | n Cummin | g GA 30041 | 1 | | | | |
| Go to www.irs.ad | | n1040 for instructions and the late | | | BAA | | V 08/30/21 PRO | | | Form 1040 (2020) |
| | | | | | | | | | | () |

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| SCHE | DULE | 1 |
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| (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 |
|--------------------------------------|
| 2020 |
| Attachment Sequence No. 01 |

| Name(s) shown on Form 1040, 1040-SR, or 1040-NR | Your social security number | | | | |
|---|-----------------------------|--|--|--|--|
| ASREETH REDDY GUJJULA | 355-39-3929 | | | | |
| Part 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, line 8 | 9 | F 000 |
| Par | line 8 | 3 | -5,000. |
| 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 adjustments to income. Enter here and | | |
| | on Form 1040, 1040-SR, or 1040-NR, line 10a | 22 | |
| FOL Ma | perwork Reduction Act Notice, see your tax return instructions. BAA REV 08/30/21 PRO | Scnedul | e 1 (Form 1040) 2020 |

| SCHEDULE | Ε |
|-------------|---|
| (Eorm 1040) | |

OMB No. 1545-0074 \sim

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

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

Department of the Treasury ► Go to

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

| | | / | | | , | | 0.0.10 | , | | | |
|-----|-----|---------|-------|---------|--------|----------|--------|-----|--------|---------|-------|
| o v | vww | .irs.go | v/Scl | heduleE | for in | structio | ns and | the | latest | informa | tion. |

| 2020 |
|--------------------------------------|
| Attachment Sequence No. 13 |

Your social security number

| ASRE | ETH REDDY GUJJU | JLA | | | | | | | 3! | 55-39 | -39 | 29 | |
|--------|---------------------------|------------------------------------|-------------------|-----------------------|-------------|----------|----------|-------------------|---------------|-------------|---------|----------|--------|
| Part | Income or Loss | s From Rental Real E | state and Ro | yalties | Note: If | you are | e in the | e business o | f rent | ing pers | onal p | property | /, use |
| | Schedule C. See | instructions. If you are a | n individual, rep | ort farm | rental inco | ome or l | loss fr | om Form 48 | 335 or | n page 2 | 2, line | 40. | |
| A Dic | I you make any payme | ents in 2020 that would | l require you to | o file Fo | rm(s) 1099 | 9? See | instru | uctions . | | | | Yes | × No |
| B If " | Yes," did you or will yo | ou file required Form(| s) 1099? | | | | | | | | | Yes [| No |
| 1a | Physical address of e | each property (street, | city, state, ZIF | ^{>} code) | | | | | | | | | |
| Α | YOSUFGUDA HYDE | ERABAD TELANGAN | A IN 50004 | 45 | | | | | | | | | |
| В | | | | | | | | | | | | | |
| С | | | | | | | | | | | | | |
| 1b | Type of Property | 2 For each rental | real estate prop | perty lis | ted | | Fair | Rental | Per | sonal | Use | 0 | λΊΛ |
| | (from list below) | above report th | e number of fa | ir renta | and | | D | ays | | Days | | | 20 4 |
| Α | 3 | personal use da if you meet the | requirements to | o file as | a A | 4 | | 365 | | | 0 | | |
| В | | qualified joint ve | enture. See inst | truction | s. E | 3 | | | | | | | |
| С | | - | | | C | 0 | | | | | | | |
| Туре о | of Property: | | | | | | | | | | | | |
| 1 Sing | le Family Residence | 3 Vacation/Short | -Term Rental | 5 Lan | d | 7 | Self-F | Rental | | | | | |
| 2 Mult | ti-Family Residence | 4 Commercial | | 6 Roy | alties | 8 | Other | (describe) |) | | | | |
| Incom | e: | | Properties: | | A | 4 | | E | | | | С | |
| 3 | Rents received | | | 3 | | 60 | 0. | | | | | | |
| 4 | Royalties received . | | | 4 | | | | | | | | | |
| Expen | | | | | | | | | | | | | |
| 5 | Advertising | | | 5 | | | | | | | | | |
| 6 | Auto and travel (see in | | | 6 | | | | | | | | | |
| 7 | Cleaning and mainter | - | | 7 | | 1,00 | 0. | | | | | | |
| 8 | Commissions | | | 8 | | | | | | | | | |
| 9 | Insurance | | | 9 | | | | | | | | | |
| 10 | Legal and other profe | | | 10 | | | | | | | | | |
| 11 | Management fees . | | | 11 | | 20 | 0. | | | | | | |
| 12 | Mortgage interest pai | | | 12 | | | | | | | | | |
| 13 | Other interest | - | | 13 | | | | | | | | | |
| 14 | Repairs | | | 14 | | 1,20 | 0. | | | | | | |
| 15 | Supplies | | | 15 | | 1,20 | | | | | | | |
| 16 | Taxes | | | 16 | | , - | | | | | | | |
| 17 | Utilities | | | 17 | | 2,00 | 0. | | | | | | |
| 18 | Depreciation expense | | | 18 | | _, | | | | | | | |
| 19 | Other (list) | | | 19 | | | | | | | | | |
| 20 | Total expenses. Add | lines 5 through 19 | | 20 | | 5,60 | 0. | | | | | | |
| 21 | Subtract line 20 from | • | | | | | | | | | | | |
| 21 | result is a (loss), see | | | | | | | | | | | | |
| | file Form 6198 | | | 21 | - | -5,00 | 00. | | | | | | |
| 22 | Deductible rental real | l estate loss after limi | tation if any | | | | | | | | | | |
| | on Form 8582 (see in | | | 22 (| _! | 5,000 | 0.)(| | |)(| | | |
| 23a | Total of all amounts r | - | | | | | 23a | | 6 | 00. | | | |
| b | Total of all amounts r | • | | | | | 23b | | | | | | |
| c | Total of all amounts re | | | | | - | 23c | | | | | | |
| d | Total of all amounts r | - | | | | - | 23d | | | | | | |
| e | Total of all amounts r | • | | | | - | 23e | | 5,6 | 00. | | | |
| 24 | Income. Add positiv | | | | | | | | | 24 | | | |
| 25 | Losses. Add royalty lo | | | | - | | er tota | l losses her | е. | 25 (| | 5. | 000. |
| 26 | Total rental real esta | | | | | | | | | - (| | - 1 | |
| 20 | here. If Parts II, III, I | | | | | | | | | | | | |
| | Schedule 1 (Form 104 | | • | | | | | | 0.1 | 26 | | - 5 | .000. |

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2020