Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

▶ Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

IIILEIIIAI	nevertue Service							
Subm	ission Identification Number (SID)							
Taxpaye	er's name	Social securi	ty numi	er				
AJA	Y KUMAR BIKKI	004-95	- -967	0				
Spouse		Spouse's social security number						
Doub	Too Date we left we attend Too Van Fratton Danish will all (Fatou			Un a!!	\			
Part	, ,	year you a	ire au	inorizi	ng.)			
	whole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income		1		69.	488.		
2	Total tax		2			347.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			372 <u>.</u>		
4	Amount you want refunded to you		4			525.		
5	Amount you owe		5		<u> </u>	<u> </u>		
Part		еер а сор	y of y	our r	eturr	1)		
return to send for any Agent to payme authori payme busines taxes to person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the interest of the institution account indicated taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminated the interest of the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the part of the income tax return (original or amended) I are not income tax return (original or amended) I are founds withdrawal Consent.	tter, or electriction of the ties. Treasury a cated in the ties to debit the authorizests must be processing of ayment. I fur	onic refransmisend its cax prepartion. The elite of the e	turn original designation, (I designation this a forevolved no designation designation) and the following the following designation of the following designation	ginato b) the ted Fi softwaccoun ke (ca later c payredge t	r (ERO) reason nancial vare for nt. This ncel) a than 2 nent of nat the		
					_			
	lyer's PIN: check one box only	5 DINI 5	9 (5 7	0			
×	I authorize GLOBAL TAXES LLC to enter or generate I	ř En		digits, b	out	as my		
	signature on the income tax return (original or amended) I am now authorizing.	ao	n't ente	r all zer	os			
	I will enter my PIN as my signature on the income tax return (original or amended) I am notify you are entering your own PIN and your return is filed using the Practitioner PIN metholelow.							
Yours	signature ▶ Date ▶							
Snous	se's PIN: check one box only							
Ороца	I authorize to enter or generate	ny DINI			Π.	as my		
	ERO firm name	_	ter five	digits, b		ao iiiy		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zer	os			
	I will enter my PIN as my signature on the income tax return (original or amended) I am notify you are entering your own PIN and your return is filed using the Practitioner PIN methology.							
Spous	e's signature ▶ Date ▶							
	Practitioner PIN Method Returns Only—continue below							
Part	III Certification and Authentication — Practitioner PIN Method Only							
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7	8 6	1 9	8	9		
		Don't ent	er all ze	ros	-			
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submiments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Ir	tting this reti	urn in a	accorda	ınce v			
ERO's	s signature ► Date ►							
	ERO Must Retain This Form — See Instructions							
	Don't Submit This Form to the IRS Unless Requested To D	o So						

E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

2020

OMB No. 1545-0074

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 reson is a child but not your depender	name of										
Your first name	and m	iddle initial	Last na	me					You	r so	cial security	y number	
AJAY KUMAR			BIKK	Ί					00	004-95-9670			
If joint return, s	pouse's	s first name and middle initial	Last na	me					Spo	use's	s social sec	curity number	
		er and street). If you have a P.O. box, see Nest Road	e instruction	ons.				Apt. no.			ntial Election	on Campaign	
		ce. If you have a foreign address, also co	omplete s	naces below	Sta	te	7IP	code	spo	use	if filing joint	tly, want \$3	
BOCA RA	_	oo. If you have a followin address, also o	omploto o	pacco bolow.	F			3496				Checking a	
Foreign countr				oreign province/stat			-	eign postal cod			ow will not on the contract of	change	
	,					-,					You	Spouse	
At any time du	ring 20	020, did you receive, sell, send, exc	hange, c	or otherwise acquir	e any	financial intere	est in	any virtual	currenc	y?	Yes	⊠ No	
Standard Deduction	_	eone can claim:		•		•							
Age/Blindness	You:	Were born before January 2,	1956	Are blind S	oouse	: Was bo	rn be	efore Januar	y 2, 195	56	☐ Is bli	nd	
Dependent	s (see	instructions):		(2) Social secur	itv	(3) Relationsh	nin	(4) 🗸 if	gualifie	s for	(see instruc	ctions):	
If more		irst name Last name		number	,	to you		Child tax		- 1		ner dependents	
than four													
dependents, see instruction													
and check	5 —]				
here ▶ □]				
	1	Wages, salaries, tips, etc. Attach	Form(s) \	N-2						1	8	31,200.	
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t			2b			
Sch. B if required.	3a	Qualified dividends	3a	11.	b 0	Ordinary divide	nds			3b		11.	
	4a	IRA distributions	4a		b T	axable amour	nt			4b			
	5a	Pensions and annuities	5a		b T	axable amour	ıt.			5b			
Standard	6a	Social security benefits	6a		b T	axable amour	ıt.			6b			
Deduction for—	7	Capital gain or (loss). Attach Sche	edule D if	required. If not re	quired	, check here		•		7		-3 , 000.	
Single or Married filing	8	Other income from Schedule 1, lin	ne 9 .							8		-8 , 723.	
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your total in	come				•	9	6	59,488.	
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	if you take the standard deduction. See instructions 10b										
Head of	С	Add lines 10a and 10b. These are	your tol	al adjustments to	inco	me			•	10c	;		
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted gross in	come				▶ [11	6	59,488.	
If you checked	12	Standard deduction or itemized	deduct	ions (from Schedu	le A)					12	1	L2,400.	
any box under Standard	13	Qualified business income deduc-	tion. Atta	ich Form 8995 or F	orm 8	8995-A				13			
Deduction, see instructions.	14	Add lines 12 and 13							. [14		2,400.	
	15	Taxable income. Subtract line 14	from lin	e 11. If zero or less	s, ente	er-0				15	5	57,088.	

Form 1040 (2020))									Page 2		
	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌			16	8,347.		
	17	Amount from Schedule 2, lin	-			_			17			
	18	Add lines 16 and 17							18	8,347.		
	19	Child tax credit or credit for	other dependen	ts					19			
	20	Amount from Schedule 3, lin	ne 7						20			
	21	Add lines 19 and 20							21			
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0					22	8,347.		
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 10 .				23	0.		
	24	Add lines 22 and 23. This is	your total tax					. ▶	24	8,347.		
	25	Federal income tax withheld	d from:							, ,		
	а	Form(s) W-2				25a	11	,872.				
	b	Form(s) 1099				25b		•				
	С	Other forms (see instruction				25c						
	d	Add lines 25a through 25c	,						25d	11,872.		
	26	2020 estimated tax paymen							26	11,011,		
 If you have a L qualifying child, 	27					27						
attach Sch. EIC.	28	Earned income credit (EIC)										
If you have nontaxable	29	American opportunity credit				29						
combat pay, see instructions.	30	Recovery rebate credit. See				30						
3cc manuchons.	31	Amount from Schedule 3, lin				31						
	32	Add lines 27 through 31. Th	32									
	33	· ·	33	11,872.								
	34	Add lines 25d, 26, and 32. These are your total payments								3,525.		
Refund	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here								3,525.		
Direct deposit?	⊳ b								35a	3,323.		
See instructions.	►d	Routing number 2 6 7 0 8 4 1 3 1 ▶ c Type: ☐ Checking ☒ Savings Account number 3 8 7 6 9 2 2 6 9 ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐										
	36	Amount of line 34 you want			ed tax	36						
Amount	37	-							37			
You Owe	31	Subtract line 33 from line 24		-								
For details on		Note: Schedule H and Sch 2020. See Schedule 3, line										
how to pay, see instructions.	38	Estimated tax penalty (see i	•			38						
Third Party Designee		you want to allow another					Yes. C	omplete	helow.	× No		
Doolgiloo		signee's		Phone		_		onal ident				
-		me ►		no. ►				ber (PIN)				
Sign		der penalties of perjury, I declare										
Here	bel	ief, they are true, correct, and con	plete. Declaration			ased on a	ll informati			, ,		
11010	Yo	ur signature		Date	Your occupation			- 1		nt you an Identity IN, enter it here		
laint vatuus 0					SOFTWARE .	ΔΝΔΤ.Υ	СT	- 1	e inst.)	IN, enter it here		
Joint return? See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat		01			nt your spouse an		
Keep a copy for	op.	ouco o cignataror ir a joint rotarri,	2011 aat alg		Орошоо о осощра					ection PIN, enter it here		
your records.									inst.) 🕨			
	Ph	one no.		Email address								
Paid	Pre	eparer's name	Preparer's signat	ture		Date		PTIN		Check if:		
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	1 02/2	8/2021	P0208	2703	Self-employed		
Preparer Use Only	Fin	m's name ▶ GLOBAL TA	XES LLC					Pho	one no. (678) 965-9522			
Use Office	Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Firm'							n's EIN ► 30-1017196				
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV 0)2/21/21 PR)		Form 1040 (2020)		

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

AJAY KUMAR BIKKI

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

► 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

004-95-9670

Par	t 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	-8,760.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ▶ Other Income from box 3 of 1099-Misc 37.	8	37.
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	-8,723.
Par	t II Adjustments to Income		
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.

2020

OMB No. 1545-0074

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service (99)

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

Name(s) shown on return

AJAY KUMAR BIKKI

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

Your social security number

004-95-9670

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 (sales price) (or other basis) Form(s) 8949, Part I, combine the result 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 35,419. 1,061,554. 1,134,858. **-37,885.** Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with 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 -37,885. 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 (or other basis) Form(s) 8949, Part II, (sales price) 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 9. 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 -37,884. • 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. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 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 21 3,000.) • (\$3,000), or if married filing separately, (\$1,500) **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? X 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.

Form **8949**

Department of the Treasury

Internal Revenue Service

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

2020
Attachment
Sequence No. 12A

Name(s) shown on return

AJAY KUMAR BIKKI

Social security number or taxpayer identification number

004-95-9670

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.

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.

X (A) Short-term transactions☐ (B) Short-term transactions☐ (C) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	•		•	e)
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below	Adjustment, it If you enter an enter a co See the sep	(h) Gain or (loss). Subtract column (e	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)		and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Securities LLC	09/28/20	02/14/20	863 , 609.	910,459.	W	32,206.	-14,644.
APEX CLEARING	10/10/20	03/14/20	124,051.	143,087.	W	2,667.	-16,369.
AMERITRADE	09/15/20	04/16/20	73,894.	81,312.	W	546.	-6,872.
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 6).	lude on your ne 2 (if Box B	1,061,554.	1,134,858.		35,419.	-37,885.	

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.

Form 8949 (2020) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

AJAY KUMAR BIKKI

Social security number or taxpayer identification number 0.04-9.5-9.670

Before you check Box D, E, or F 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 II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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 (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

	(E) Long-term transactions (F) Long-term transactions				is wasn't report	ed to the IF	RS	•
1 (a) Description of property	(a)	(b) Date acquired	(c)	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if you enter an enter a c See the sep	(h) Gain or (loss). Subtract column (e)	
	(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
APEX	CLEARING	04/04/20	01/16/19	9.	8.			1.
neç	tals. Add the amounts in columns gative amounts). Enter each tota nedule D. line 8b (if Box D above	al here and inc	lude on your					

Note: If you checked Box D 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.

9.

8.

above is checked), or line 10 (if Box F above is checked) ▶

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

Attachment Sequence No. **13**

Name(s) shown on return

Department of the Treasury

Internal Revenue Service (99)

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

Your social security number

	KUMAR BIKKI)4 - 95 -		
Part					-				• .		
	Schedule C. See instructions. If	you are an individual, repo	ort farı	m rental	ncome c	r loss f	rom Form 48	335 on	page 2,	line 40	
A Dic	d you make any payments in 2020 th	at would require you to	file F	orm(s) 1	099? S	ee insti	ructions .				es 🗵 No
B If "	Yes," did you or will you file require	d Form(s) 1099?									es 🗌 No
1a	Physical address of each property	(street, city, state, ZIP	code)							
Α	PLOT NO-257 SRINIVAS NA	AGER HYDARABAD I	ELA	NGANA	IN 50	0090					
В											
С											
1b	Type of Property 2 For each	ch rental real estate prop	erty I	isted		Fair	Rental	Per	sonal U	se	QJV
	(from list below) above,	report the number of fai al use days. Check the (neet the requirements to	r rent	al and			Days		Days		QUV
Α	3 if you n	neet the requirements to	file a	is a	Α		365		0		
В	qualifie	d joint venture. See inst	ructio	ns.	В						
С					С						
Туре	of Property:										
		on/Short-Term Rental	5 La	nd	7	Self-	Rental				
2 Mul	ti-Family Residence 4 Comm	ercial	6 Ro	yalties	8	3 Othe	r (describe))			
Incom		Properties:		Ī	Α		E				С
3	Rents received		3		4	450.					
4	Royalties received		4								
Expen											
5	Advertising		5								
6	Auto and travel (see instructions)		6								
7	Cleaning and maintenance		7		1,8	340.					
8	Commissions		8								
9	Insurance		9								
10	Legal and other professional fees		10								
11	Management fees		11		1,	720.					
12	Mortgage interest paid to banks, e		12								
13	Other interest	,	13								
14	Repairs		14		2,2	200.					
15	Supplies		15			250.					
16	Taxes		16								
17	Utilities		17		2,2	200.					
18	Depreciation expense or depletion		18								
19	Other (list)		19								
20	Total expenses. Add lines 5 through		20		9,2	210.					
21	Subtract line 20 from line 3 (rents)										
21	result is a (loss), see instructions t										
	file Form 6198		21		-8,	760.					
22	Deductible rental real estate loss	after limitation, if any			-						
=	on Form 8582 (see instructions)		22	(-8,7	60.)	()(,
23a	Total of all amounts reported on lir	ne 3 for all rental prope	rties			23a		4.	50.		
b	Total of all amounts reported on lir	· · ·				23b					
С	Total of all amounts reported on lir					23c					
d	Total of all amounts reported on lir	· · ·				23d					
е	Total of all amounts reported on lir	· · ·				23e		9,2	10.		
24	Income. Add positive amounts sh	· · ·	t inclu						24		
25	Losses. Add royalty losses from line			•		nter tota	al losses her	e .	25 (8,760.
26	Total rental real estate and roya							t			,
	here. If Parts II, III, IV, and line 4										
	Schedule 1 (Form 1040), line 5. Ot								26		-8,760.