| 1040 | -NR Department of the U.S. Nonre | Treasury—Internal I | Revenue Service Income Tax | (99 Return | 20 | 20 | OMB No. | . 1545-0074 | | se Only-Do not write taple in this space. | | |
|--|---|---------------------------------|-------------------------------------|------------------------------------|-----------|----------------------------------|---|--------------------------------|--|---|--|--|
| Filing Status Check only one box. | | filing separately (| MFS) (formerly Mar | _ | _ | ving widov | w(er) (QW | ") | | | | |
| | and middle initial | | ast name | | | | | (see ins | Your identifying number (see instructions) | | | |
| SANDEEP K Home address (304 SE RA | AINDDLA a P.O. box, see inst | NDDLA O. box, see instructions. | | | | | 470-61-9283 Check if: X Individua Estate or | | | | | |
| BENTONVIL | st office. If you have a foreign LE AR 72712 | | | | | ZIP code | | | | | | |
| Foreign country name Fo | | | oreign province/state/county Foreig | | | | | de | | | | |
| At any time duri | ng 2020, did you receive, se | ll, send, exchange | e, or otherwise acqu | uire any fin | ancial in | terest in a | any virtua | I currency? | | Yes X No | | |
| | | | | | | | | | | | | |
| Dependents (see instructions): | (1) First name | Last name | , , , | (2) Dependent's identifying number | | 3) Dependent's lationship to you | | (4) ✓ if qua Child tax cred | 1 | for (see instr.): Credit for other dependents | | |
| If more than four dependents, see | | | | | | | | | | | | |

Income Effectively Connected With U.S. Trade or Business

instructions and check here ▶ □

| 1a | Wages, salaries, tips, etc. Attach Form(s) \ | N-2 | | | | | 1a | 54,165. |
|-----|---|---------------------------------|-----------|---------|------------|--------|-----|---------|
| b | Scholarship and fellowship grants. Attach | Form(s) 1042-S or required | statem | ent. Se | e instruct | ions . | 1b | |
| С | Total income exempt by a treaty from Sc | hedule OI (Form 1040-NR), | Item | | | | | |
| | L, line 1(e) | | . | 1c | | | | |
| 2a | Tax-exempt interest 2a | b Taxa | able inte | erest . | | | 2b | |
| 3a | Qualified dividends 3a | b Ordi | inary div | vidends | s | | 3b | |
| 4a | IRA distributions 4a | b Taxa | able am | ount . | | | 4b | |
| 5a | Pensions and annuities 5a | b Taxa | able am | ount . | | | 5b | |
| 6 | Reserved for future use | | | | | | 6 | |
| 7 | Capital gain or (loss). Attach Schedule D (l | Form 1040) if required. If no | t require | ed, che | eck here . | | 7 | 64. |
| 8 | Other income from Schedule 1 (Form 1040 | O), line 9 | | | | | 8 | -5,125. |
| 9 | Add lines 1a, 1b, 2b, 3b, 4b, 5b, 7, and 8. | This is your total effectivel | y conn | ected | income . | . ▶ | 9 | 49,104. |
| 10 | Adjustments to income: | | | | | | | |
| а | From Schedule 1 (Form 1040), line 22 | | . | 10a | | | | |
| b | Charitable contributions for certain resider | nts of India. See instructions | s. | 10b | | 300. | | |
| С | Scholarship and fellowship grants exclude | ed | | 10c | | | | |
| d | Add lines 10a through 10c. These are you | r total adjustments to inco | ome . | | | . ▶ | 10d | 300. |
| 11 | Subtract line 10d from line 9. This is your a | adjusted gross income . | | | | . ▶ | 11 | 48,804. |
| 12 | Itemized deductions (from Schedule A (I | ** | | | | | | |
| | deduction. See instructions | | l Dedr | ı US/ | India . | reaty | 12 | 12,400. |
| 13a | Qualified business income deduction. Atta | ach Form 8995 or Form 899 | 5-A | 13a | | | | |
| b | Exemptions for estates and trusts only. Se | e instructions | | 13b | | | | |
| С | Add lines 13a and 13b | | | | | | 13c | |
| 14 | Add lines 12 and 13c | | | | | | 14 | 12,400. |
| 15 | Taxable income. Subtract line 14 from lin | e 11. If zero or less, enter -0 | 0 | | | | 15 | 36.404. |

BAA

| Form 1040-NR (| 2020) | | | | | | | | Page 2 |
|----------------------------|--|---|------------------------|--------------------------------------|--------------------|---------------------------------------|--------------------|----------|-------------------------------------|
| | 16 | Tax (see instructions). Check if | any from Form | (s): 1 88 | 314 2 49 | 72 3 🗌 | | 16 | 4,174. |
| | 17 | Amount from Schedule 2 (Form | n 1040), line 3 | | | · · · · · · · · · · · · · · · · · · · | | 17 | 0. |
| | 18 | Add lines 16 and 17 | | | | | | 18 | 4,174. |
| | 19 | Child tax credit or credit for ot | | | | | | 19 | |
| | 20 | Amount from Schedule 3 (Form | n 1040), line 7 | | | | | 20 | |
| | 21 | Add lines 19 and 20 | | | | | | 21 | |
| | 22 | Subtract line 21 from line 18. I | f zero or less, | enter -0 | | ., | | 22 | 4,174. |
| | 23a | Tax on income not effectively from Schedule NEC (Form 104 | • | | | 23a | | | |
| | b | Other taxes, including self-emline 10 | | | | 23b | | | |
| | С | Transportation tax (see instruc | tions) | | | 23c | | | |
| | d | Add lines 23a through 23c . | | | | | | 23d | |
| | 24 | Add lines 22 and 23d. This is y | our total tax | | | | ▶ | 24 | 4,174. |
| | 25 | Federal income tax withheld fr | om: | | | | | | |
| | а | Form(s) W-2 | | | | 25a 6 | 5,722. | | |
| | b | Form(s) 1099 | | | | 25b | | | |
| | С | Other forms (see instructions) | | | | 25c | | | |
| | d | Add lines 25a through 25c . | | | | | | 25d | 6,722. |
| | е | Form(s) 8805 | | | | | | 25e | |
| | f | Form(s) 8288-A | | | | | | 25f | |
| | g | Form(s) 1042-S | | | | | | 25g | |
| | 26 | 2020 estimated tax payments | and amount a | pplied from 20 | 019 return | | | 26 | |
| | 27 | Reserved for future use | | | | 27 | | | |
| | 28 | Additional child tax credit. Atta | ach Schedule 8 | 8812 (Form 10 | 40) | 28 | | | |
| | 29 | Credit for amount paid with Fo | orm 1040-C | | | 29 | | | |
| | 30 | Reserved for future use | | | | 30 | | | |
| | 31 | Amount from Schedule 3 (Form | n 1040), line 1 | 3 | | 31 | | | |
| | 32 | Add lines 28 through 31. Thes | e are your tota | al other paym | ents and refund | able credits | ▶ | 32 | |
| | 33 | Add lines 25d, 25e, 25f, 25g, 2 | 26, and 32. The | ese are your t o | otal payments | | ▶ | 33 | 6,722. |
| Refund | 34 | If line 33 is more than line 24, | subtract line 2 | 4 from line 33. | This is the amou | ınt you overpaid | | 34 | 2,548. |
| | 35a | Amount of line 34 you want re | funded to you | ı. If Form 8888 | 3 is attached, che | eck here | . ▶ | 35a | 2,548. |
| Direct deposit? | ▶b | Routing number 0 4 2 | 0 0 0 0 |) 1 3 | ▶ c Type: | Checking | Savings | | |
| See instructions. | ▶ d | Account number 1 3 0 | 1 2 4 7 | 7 7 4 5 | 2 7 | | | | |
| | ►e | If you want your refund check enter it here. | | | | | | | |
| | 36 | Amount of line 34 you want ap | plied to your | 2021 estimat | ed tax . 🕨 | 36 | | | |
| Amount | 37 | Amount you owe. Subtract lir | ne 33 from line | 24. For detail | s on how to pay, | see instructions | • | 37 | |
| You Owe | 38 Estimated tax penalty (see instructions) | | | | | | | | |
| Third Party Designee | Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions | | | | | | | below. | ⊠ No |
| (Other than paid preparer) | Designee's Phone Personal identifice name ► Personal identifice number (PIN) | | | | | | | cation _ | |
| Sign Here | Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statemer belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information | | | | n of which | preparer | has any knowledge. | | |
| Tiere | Your | signature | | Date Your occupation SOFTWARE ENGI: | | | Prote | | nt you an Identity N, enter it here |
| - | Dhar | 2 no | | Email add: | | CINGTING EK | (300) | 1131.) | |
| | Phone | e no. urer's name | Preparer's si | Email addres | 99 | Date | PTIN | 1. | Check if: |
| Paid | • | SMANIKUMARAPPANA | | KUMARAPP | ΔΝΔ | 04/16/2021 | P02090 | | Self-employed |
| Preparer | | s name ► GLOBAL TAXES | | TOPIANAPP | עדאע | 0-1/10/2021 | <u> </u> | | 6)727-7157 |
| Use Only | | s address > 2530 Pebble | | n Cummin | G GZ 300/1 | | | | 0-1017196 |
| l | | · ~~~, ~~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ | ~ CTGEV T | ııı Cullilli LII | A GW DOOFT | | , U | | |

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) ► Go to www.irs.gov/Form1040NR for instructions and the latest information. ▶ Attach to Form 1040-NR.

| Attachment Sequence No. 7B | 202 | U |
|--------------------------------------|-----|----|
| | | 7B |

Name shown on Form 1040-NR Your identifying number SANDEEP KUMAR BAINDDLA 470-61-9283

| LITTOI | amount of moonie and | er the appropriate rate of tax. See instructions. | | | | (d) Other | (specify) | | | |
|---|---|--|------------------------------|--------|-----------------------------|---------------------|-------------------------|--|---|--|
| | Nature of Income | | | | (a) 10% | (b) 15% | (c) 30% | % | T | |
| 1 | Dividends and divide | nd equivalents: | | | | | | ,,, | 70 | |
| а | Dividends paid by U. | • | | 1a | | | | | | |
| b | | reign corporations | | 1b | | | | | | |
| С | | ayments received with respect to section 871(m) transa | - 1 | 1c | | | | | | |
| 2 | Interest: | | İ | | | | | | | |
| а | Mortgage | | | 2a | | | | | | |
| b | | orations | | 2b | | | | | | |
| С | | | T | 2c | | | | | | |
| 3 | Industrial royalties (p | atents, trademarks, etc.) | [| 3 | | | | | | |
| 4 | Motion picture or TV | copyright royalties | [| 4 | | | | | | |
| 5 | Other royalties (copy | rights, recording, publishing, etc.) | | 5 | | | | | | |
| 6 | | e and natural resources royalties | | 6 | | | | | | |
| 7 | Pensions and annuiti | es | | 7 | | | | | | |
| 8 | Social security benefits | | | 8 | | | | | | |
| 9 | | | | 9 | | | | | | |
| 10 | Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0 | | | | | | | | | |
| а | a Winnings | | | | | | | | | |
| b | b Losses | | | 10c | | | | | | |
| 11 | Gambling winnings—Residents of countries other than Canada. Note: Losses not allowed | | | 11 | | | | | | |
| 12 | Other (specify) ▶ | | | | | | | | | |
| | | | | 12 | | | | | | |
| 13 | • | 12 in columns (a) through (d) | + | 13 | | | | | | |
| 14 | | ate of tax at top of each column | | 14 | | | | | | |
| 15 | Tax on income not ef | fectively connected with a U.S. trade or business. Add | | | | | | R, line 23a ► 15 | | |
| | | Capital Gains and Lo | sses F | rom | Sales or Excha | inges of Proper | ty | T | | |
| Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not effectively connected with a U.S. business. Do not include a gain | | | (b) Date acquired mm/dd/yyyy | | (c) Date sold mm/dd/yyyy | (d) Sales price | (e) Cost or other basis | (f) LOSS If (e) is more than (d), subtract (d) from (e). | (g) GAIN If (d) is more than (e), subtract (e) from (d). | |
| | | | | | | | | | | |
| or loss | on disposing of a U.S. real | | | | | | | | | |
| gains ai | nd losses on Schedule D | | | | | | | | | |
| (Form 1 | 040). property sales or | | | | | | | | | |
| exchan | ges that are effectively | | | | | | | | | |
| on Sche | ted with a U.S. business edule D (Form 1040), | | | | | | | <u>(</u>) | | |
| Form 4 | 797, or both. | 18 Capital gain. Combine columns (f) and (g) of | t line 17. | . Ente | er the net gain her | e and on line 9 abo | ove. If a loss, ente | r-0 ▶ 18 | | |

SCHEDULE OI (Form 1040-NR)

Other Information

► Go to www.irs.gov/Form1040NR for instructions and the latest information.
 ► Attach to Form 1040-NR.

► Answer all questions.

OMB No. 1545-0074

2020
Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service (99)

| | snown on Form 1040-NR IDEEP KUMAR BAINDDLA | | | 470-61-9283 | | | | | | | |
|-----|---|-------------------------|--|-------------------|----------------------|--------------|--|--|--|--|--|
| | | | TNDT 7 | | | | | | | | |
| A | Of what country or countries were you a citizen or national | al during the tax year | ·O India | | | | | | | | |
| В | In what country did you claim residence for tax purposes | s during the tax year | r: IIIQIA | г | | ⊠ No | | | | | |
| С | Have you ever applied to be a green card holder (lawful p | L | _ Yes | △ NO | | | | | | | |
| D | Were you ever: | Г | ٦,, | V | | | | | | | |
| | A U.S. citizen? | | | ⊠ No | | | | | | | |
| 2 | A green card holder (lawful permanent resident) of the Un | L | _ Yes | ⊠ No | | | | | | | |
| _ | If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. If you had a visa on the last day of the tax year, enter your visa type. If you did not have a visa, enter your U.S. | | | | | | | | | | |
| Е | immigration status on the last day of the tax yearF1 | | _ | ⊠ No | | | | | | | |
| F | Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? | | | | | | | | | | |
| _ | If you answered "Yes," indicate the date and nature of the change ▶ | | | | | | | | | | |
| G | List all dates you entered and left the United States during | - | | | | | | | | | |
| | Note: If you are a resident of Canada or Mexico AND cor | | | | | | | | | | |
| | check the box for Canada or Mexico and skip to item H | | | ☐ Mexico | | | | | | | |
| | Date entered United States Date departed United States mm/dd/yy mm/dd/yy | es E | Date entered United States mm/dd/yy | | ed United n/dd/yy | d States | | | | | |
| | Ппп/аа/уу | _ | ППП/СССТУУ | 11111 | i/uu/yy | | | | | | |
| | | _ | | | | | | | | | |
| | | \dashv | | | | | | | | | |
| | | | | | | | | | | | |
| н | Give number of days (including vacation, nonworkdays, and | | ero procent in the United S | Statos durina: | | | | | | | |
| п | | | | | | | | | | | |
| ı | 2018 , 2019 Did you file a U.S. income tax return for any prior year? . | , and 2 | .020 | | Yes | ⊠ No | | | | | |
| • | If "Yes," give the latest year and form number you filed ► | | | | _ 163 | <u>~ 140</u> | | | | | |
| J | Are you filing a return for a trust? | | | | Yes | ⊠ No | | | | | |
| • | If "Yes," did the trust have a U.S. or foreign owner under | | | | _ 100 | <u></u> | | | | | |
| | U.S. person, or receive a contribution from a U.S. person' | ? | | [| Yes | ☐ No | | | | | |
| K | Did you receive total compensation of \$250,000 or more | | | | Yes | ⊠ No | | | | | |
| | If "Yes," did you use an alternative method to determine t | | | | Yes | ☐ No | | | | | |
| L | Income Exempt From Tax-If you are claiming exempting | | • | | foreign | country, | | | | | |
| | complete (1) through (3) below. See Pub. 901 for more inf | | | , | J | , | | | | | |
| 1 | . Enter the name of the country, the applicable tax treaty arti | | | claimed the treat | y benefi | t, and the | | | | | |
| | amount of exempt income in the columns below. Attach For | m 8833 if required. S | See instructions. | | | | | | | | |
| | (a) Country | (b) Tax treaty article | | , , | | | | | | | |
| | | | claimed in prior tax ye | ars income in o | current ta | ax year | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | (a) Total Enter this amount on Form 1040 ND line to De not enter it on line to as line the | | | | | | | | | | |
| , | (e) Total. Enter this amount on Form 1040-NR, line 1c. Do not enter it on line 1a or line 1b ▶ | | | | | | | | | | |
| 2 | . Were you subject to tax in a foreign country on any of the | | | | _ Yes □ Yes | ∐ No ⊠ No | | | | | |
| ٤ | . Are you claiming treaty benefits pursuant to a Competent | | | L | _ res | △ NO | | | | | |
| B.6 | If "Yes," attach a copy of the Competent Authority determ | iii alion letter to you | r return. | | | | | | | | |
| М | Check the applicable box if: | oomo frans valles | own loosted in the LLC | d Ctatas as of | otiv ale | onne et! | | | | | |
| | This is the first year you are making an election to treat in with a U.S. trade or business under section 871(d). See in | structions | | | | ▶ □ | | | | | |
| 2 | You have made an election in a previous year that has | | | | | | | | | | |
| | States as effectively connected with a U.S. trade or busin | ess under section 8 | 71(d). See instructions . | | | ▶ □ | | | | | |

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

2020
Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

SANDEEP KUMAR BAINDDLA

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

470-61-9283

| 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 | -5,125. |
| 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 | -5,125. |
| 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)

Department of the Treasury

Internal Revenue Service (99)

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

2020

Attachment Sequence No. **12**

Name(s) shown on return Your social security number 470-61-9283 SANDEEP KUMAR BAINDDLA 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) Form(s) 8949, Part I, combine the result (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 13. -25. 1,022. 1,060. Totals for all transactions reported on Form(s) 8949 with Box B checked 5,889. 5,800. 89. 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 64. 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 64. • 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), 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.

Form **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.

2020 Attachment Sequence No. 12A

OMB No. 1545-0074

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

Part I

Social security number or taxpayer identification number

470-61-9283

SANDEEP KUMAR BAINDDLA

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 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 (sales price) from column (d) and disposed of 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 02/06/20 02/07/20 1,022. 1,060. W 13. -25.2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

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.

1,022.

-25.

13.

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) ▶

1,060.

Form **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

2020
Attachment
Sequence No. 12A

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

Part I

Social security number or taxpayer identification number

470-61-9283

SANDEEP KUMAR BAINDDLA

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.

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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.

5,889.

89.

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) ▶

5,800.

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**

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

Department of the Treasury

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

Your social security number

| | EEP KUMAR BAINDDLA | | | | | | | | 70-61- | | | |
|--------|---|---|----------------|-----------------|----------|-----------|-------------------------|--------------|-----------|----------|------------|------------|
| Part | Income or Loss From R | ental Real Estate and Roy | altie | s Note: | If you a | are in th | e business o | f rent | ing perso | onal pro | operty, us | е |
| | Schedule C. See instruction | ns. If you are an individual, repo | ort farr | m rental ir | ncome o | r loss fr | om Form 48 | 35 or | n page 2, | line 40 |). | |
| A Did | d you make any payments in 202 | 20 that would require you to | file F | orm(s) 10 | 099? Se | ee instr | uctions . | | | Y | es 🛛 N | lo |
| B If " | Yes," did you or will you file rec | quired Form(s) 1099? | | | | | | | | □ Y | es 🗌 N | lo |
| 1a | Physical address of each prop | | | | | | | | | | | |
| Α | AS RAO NAGAR HYDERAE | | | • | | | | | | | | |
| В | | | | | | | | | | | | |
| С | | | | | | | | | | | | |
| 1b | Type of Property 2 For | r each rental real estate prop | ertv l | isted | | Fair | Rental | Per | sonal L | Jse | 0.11/ | |
| | (from list below) abo | ove, report the number of fai | r rent | al and | | D | ays | | Days | | QJV | |
| A | 1 per | rsonal use days. Check the Cou meet the requirements to | JV b file a | ox only is a | Α | | 210 | | C | | | |
| В | | alified joint venture. See insti | ructio | ns. | В | | | | | | | |
| С | | | | | С | | | | | | | |
| Type | of Property: | | | | | | | | | | | |
| | | cation/Short-Term Rental | 5 La | nd | 7 | 7 Self-l | Rental | | | | | |
| | - | | | yalties | | | r (describe) | 1 | | | | |
| Incom | | Properties: | | [| A | <u> </u> | <u>. (а.оооло)</u> В | | | | С | |
| 3 | Rents received | | 3 | | | 320. | | | | | - | |
| 4 | Royalties received | | 4 | | | | | | | | | |
| Exper | | | - | | | | | | | | | |
| 5 | Advertising | | 5 | | | | | | | | | |
| 6 | Auto and travel (see instruction | | 6 | | | | | | | | | |
| 7 | Cleaning and maintenance . | * | 7 | | 1.2 | 212. | | | | | | |
| 8 | Commissions | | 8 | | | | | | | | | |
| 9 | Insurance | | 9 | | | | | | | | | |
| 10 | Legal and other professional fe | | 10 | | | | | | | | | |
| 11 | Management fees | | 11 | | | | | | | | | |
| 12 | Mortgage interest paid to bank | | 12 | | | | | | | | | |
| 13 | Other interest | | 13 | | | | | | | | | |
| 14 | Repairs | | 14 | | 1 - | 125. | | | | | | |
| 15 | Supplies | | 15 | | | 256. | | | | | | |
| 16 | Taxes | | 16 | | | | | | | | | |
| 17 | Utilities | | 17 | | 1 9 | 352. | | | | | | |
| 18 | Depreciation expense or deple | | 18 | | | 332. | | | | | | |
| 19 | Other (list) | | 19 | | | | | | | | | |
| 20 | Total expenses. Add lines 5 th | rough 10 | 20 | | 5 4 | 145. | | | | | | |
| | Subtract line 20 from line 3 (re | | | | ٠,٠ | | | | | | | |
| 21 | result is a (loss), see instruction | | | | | | | | | | | |
| | file Form 6198 | ons to mid out if you must | 21 | | -5,2 | 125 | | | | | | |
| 22 | Deductible rental real estate lo | nes after limitation if any | | | ٠,٠ | | | | | | | |
| ~~ | on Form 8582 (see instruction | | 22 | (| -5 1 | 25 | (| |)(| | | ١ |
| 23a | | | | | | | | 3 | 20. | | | , |
| b | | | | | | 23b | | | | | | |
| C | | | | | | | | | | | | |
| d | | | | | | | | | | | | |
| e | | | | | | | | 5,4 | 45 | | | |
| 24 | Income. Add positive amount | | incl | | | 200 | | J, 1 | 24 | | | |
| 25 | Losses. Add royalty losses from | | | - | | ter tota | al losses her | e | 25 (| | 5,125 | <u>-</u> |
| | • • | | | | | | | | | | J, 14. | <i>, ,</i> |
| 26 | Total rental real estate and I here. If Parts II, III, IV, and Ii | | | | | | | | | | | |
| | Schedule 1 (Form 1040), line 5 | | | | | | | | 26 | | -5,12 | 25. |