E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

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 roon is a child but not your dependent	name of y										
Your first name and middle initial Last name							Your s	Your social security number					
ABHILASH				ıΑ					884-	884-13-4614			
If joint return, s	pouse's	first name and middle initial	Last na	me					Spouse	Spouse's social security number			
NAVYA			DEVA	RASETTY					719-24-9504				
Home address	(numbe	er and street). If you have a P.O. box, see	e instruction	ons.				Apt. no.	Presid	ential Elec	ction Campaign		
7601 OR	VALE	ROAD						8205		Check here if you, or your			
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete s	mplete spaces below. State			ZIP	code			ointly, want \$3 d. Checking a		
PLANO			T			X 75024			box below will not change				
Foreign country	y name		F	Foreign province/state/county Foreign province/state/county					e your ta	x or refun			
At any time du	ring 20	020, did you receive, sell, send, exc	hange, c	or otherwise acqui	re any	financial in	terest in	any virtual o	currency?	Yes	s 🔀 No		
Standard Deduction	_	eone can claim:		•			nt						
Age/Blindness	You:	Were born before January 2, 1	956	Are blind S	pouse	: Was	born be	efore January	2, 1956	☐ Is	blind		
Dependents	s (see	instructions):		(2) Social secui	ritv	(3) Relation	onship	(4) <b>✓</b> if	qualifies f	ualifies for (see instructions):			
If more		irst name Last name	number		,	to you		Child tax		1	other dependents		
than four													
dependents, see instruction													
and check	5 —												
here ▶ □													
	_1_	Wages, salaries, tips, etc. Attach	Form(s) \	N-2					. 1		103,671.		
Attach	2a	Tax-exempt interest	2a		b T	axable inte	rest		. 2	b			
Sch. B if required.	3a	Qualified dividends	3a		<b>b</b> Ordinary dividends				. 3	b			
	4a	IRA distributions	4a		b T	axable am	ount .		. 4	b			
	5a	Pensions and annuities	5a		b T	axable am	ount .		. 5	b			
Standard	6a	Social security benefits	6a		b T	axable am	ount .		. 6	b			
Deduction for— Single or	7	Capital gain or (loss). Attach Sche	dule D if	required. If not re	quired	, check he	e .	•		,			
Married filing	8	Other income from Schedule 1, lir	e9						. [	3	-5,350.		
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	and 8. This is your <b>total income</b>					▶ 9	)	98,321.		
Married filing	10	Adjustments to income:											
jointly or Qualifying	а	From Schedule 1, line 22											
widow(er), \$24,800	b	Charitable contributions if you take the standard deduction. See instructions 10b											
Head of	С	Add lines 10a and 10b. These are	e your <b>total adjustments to income</b>							)c			
household, \$18,650	11	Subtract line 10c from line 9. This is your <b>adjusted gross income</b>							▶ 1	1	98,321.		
If you checked	12	Standard deduction or itemized	deducti	ions (from Schedu	ıle A)				. 1	2	24,800.		
any box under Standard	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A							. 1	3			
Deduction, see instructions.	14	Add lines 12 and 13							. 1	4	24,800.		
	15	Taxable income. Subtract line 14	from lin	e 11. If zero or les	s, ente	er -0			. 1	5	73,521.		

Form 1040 (2020	0)									Page 2	
	16	Tax (see instructions). Check	if any from Form	ı(s): <b>1</b>	4 <b>2</b> 🗌 4972	3 🗌			. 16	8,428.	
	17	Amount from Schedule 2, lin	ie 3						. 17		
	18	Add lines 16 and 17							. 18	8,428.	
	19	Child tax credit or credit for	other dependen	ts					. 19		
	20	Amount from Schedule 3, lin	ie 7						. 20		
	21	Add lines 19 and 20							. 21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					. 22	8,428.	
	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 <b>total tax</b>						▶ 24	8,428.	
	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a	16	,02	5.		
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c	•						. 25d	16,025.	
	26	2020 estimated tax payment							. 26		
<ul> <li>If you have a L qualifying child,</li> </ul>	27	Earned income credit (EIC)				27					
attach Sch. EIC.   If you have	28	Additional child tax credit. A				28					
nontaxable	29	American opportunity credit				29					
combat pay, see instructions.	30	Recovery rebate credit. See		,		30					
	31	,				31					
	32	Amount from Schedule 3, line 13									
	33	Add lines 25d, 26, and 32. T	•							16,025.	
	34	If line 33 is more than line 24						•	. 34	7,597.	
Refund	35a					-	-	▶ [	_ —	7,597.	
Direct deposit?	⊳ b	Amount of line 34 you want <b>refunded to you.</b> If Form 8888 is attached, check here <b>\rightarrow</b> 35a 7,597.  Routing number 1 0 1 1 0 0 0 4 5 <b>\rightarrow</b> C Type:  C Checking Savings									
See instructions.	►d	Account number 5 1 8				S Crieci	Kilig,	Saviri	js		
	36					36					
Amarint		Amount of line 34 you want a							27		
Amount You Owe	37	Subtract line 33 from line 24		-					▶ 37		
For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for									
how to pay, see	00	2020. See Schedule 3, line 12e, and its instructions for details.  Estimated tax penalty (see instructions)									
instructions.	38										
Third Party		you want to allow another	•				□Vaa C		بيرمام ما ما	⊠ No	
Designee				Phone			☐ Yes. Co			△ NO	
		signee's me ▶		no.				onal Id oer (PII	entification N) ►		
Sign	Un	der penalties of perjury, I declare t	hat I have examine			hedules	and stateme	nts. an	d to the bes	st of my knowledge an	
		lief, they are true, correct, and com									
Here	Yo	ur signature		Date Your occupation					f the IRS se	nt you an Identity	
	k				- 1	Protection P see inst.) ▶	IN, enter it here				
Joint return?	<b>b</b> -				SOFTWARE ENGINEER						
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	Date	Date Spouse's occupation					nt your spouse an ection PIN, enter it her		
your records.				HOME MAKER					(see inst.)		
	———Ph	one no. (816)824-481	 6	Email address	ABHINALLA		TI, COM				
-		eparer's name	Preparer's signat		TATITINATION	Date		PTIN		Check if:	
Paid		•			GUPTA TALLAN		25/2021		082703	Self-employed	
Preparer									(678)965-9522		
Use Only		m's address > 2530 Pebb		n Cummin	a GA 30041				Firm's EIN	· · · · · · · · · · · · · · · · · · ·	
Co to warm for				Cammill			1.07/00/04 55 3		IIII S LIIV	Form <b>1040</b> (2020	
GO TO WWW.Irs.go	JV/FOR	n1040 for instructions and the late	st information.		BAA	REV	07/28/21 PRC	,		Form 1040 (2020	

## SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

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

ABHILASH NALLA & NAVYA DEVARASETTY

► 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

884-13-4614

Par	Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
<b>2</b> 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	-5,350.
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,	0	F 2F0
Par	line 8	9	-5,350.
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 <b>adjustments to income.</b> Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

## **SCHEDULE E**

Department of the Treasury

Internal Revenue Service (99)

(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

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

Your social security number

								884-13-4614			
Part	Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.										
Δ Dic											
	A Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions										
1a		each property (street, city, state, ZIF			· ·	• •	<del></del>	•	· · ·		<u>cs                                    </u>
A	<del>                                     </del>	TRE TIRUVURU ANDHRAPRADE		-	235						
B	BOSO BOTHER CERV	THE THROVORO TRADITION IN THE	1011	111 5212	333						
1b	Type of Property	2 For each rental real estate prop	nerty l	isted		Fair	Rental	Per	sonal	Use	0.07
	(from list below)	above, report the number of fa	ir rent	r rental and			Days	<b>Days</b>		QJV	
A	3	personal use days. Check the	<b>QJV</b> b o file a				365			0	
В		qualified joint venture. See inst	tructio	ns.	В						
С					С						
Type o	of Property:										
1 Sing	le Family Residence	3 Vacation/Short-Term Rental	5 La	nd	7	7 Self-	Rental				
2 Mult	ti-Family Residence	4 Commercial	6 Ro	yalties	8	3 Othe	r (describe)	)			
Incom	e:	Properties:			Α		В	3			С
3			3		(	550.					
4	Royalties received .		4								
Expen											
5			5			100.					
6	•	nstructions)	6			300.					
7	•	ance	7								
8			8								
9			9								
10	•	ssional fees	10								
11	_		11								
12		d to banks, etc. (see instructions)	12								
13			13			500.					
14	•		14		-	100.					
15			15								
16			16								
17			17 18								
18 19	Other (list)	or depletion	19								
20	` ′	ines 5 through 19	20		6 (	200					
	•	line 3 (rents) and/or 4 (royalties). If	20		0,0	000.					
21		nstructions to find out if you must									
	file <b>Form 6198</b>	ristructions to find out if you must	21		-5,3	350.					
22		estate loss after limitation, if any,			- / .	•					
~~	on <b>Form 8582</b> (see ins		22	(	-5,3	50. )	(		)(		)
23a	•	eported on line 3 for all rental prope				23a	1	6!	50.		,
b		eported on line 4 for all royalty prop				23b					
C		eported on line 12 for all properties				23c					
d											
е											
24		e amounts shown on line 21. <b>Do no</b>	<b>t</b> inclu	ude any lo	sses			.	24		
25	•	sses from line 21 and rental real estate		-		nter tota	al losses her	e .	25 (		5,350.)
26	Total rental real esta	ate and royalty income or (loss).	Comb	ine lines	24 and	d 25. E	nter the res	sult			
		V, and line 40 on page 2 do not									
		0), line 5. Otherwise, include this ar							26		-5,350.

NPA