# **£1040**

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	<b>X</b> 5	Single Married filing jointly	Marrie	d filing separately (	MFS)	☐ Head o	f hous	ehold (HC	)H) [	Qua	lifying wid	ow(er) (QW)	
Check only one box.	•	ou checked the MFS box, enter the roon is a child but not your depender	,	our spouse. If you	check	red the HOH	or QV	/ box, ent	er the	child's	name if th	ne qualifying	
Your first name	and m	iddle initial	Last nar	ast name							Your social security number		
DEEPTHI PRIYANKA				NURU						889-38-3679			
If joint return, spouse's first name and middle initial Last				ne					:	Spouse's social security number			
	•	er and street). If you have a P.O. box, see	instructio	ons.				Apt. no.				on Campaign	
15217 NI				11 201						Check here if you, or your spouse if filing jointly, want \$3			
		ce. If you have a foreign address, also co	omplete sp	' I				code	1	to go to this fund. Checking a			
BELLEVUI			1-	WA			+				box below will not change your tax or refund.		
Foreign country	/ name			Foreign province/state/county			Fore	Foreign postal code		You Spouse			
At any time du	ring 20	020, did you receive, sell, send, exc	hange, o	r otherwise acquire	any	financial inte	rest in	any virtu	al curr	ency?	Yes	⊠ No	
Standard	Som	eone can claim: You as a de	ependent	☐ Your spous	se as	a dependent							
Deduction		Spouse itemizes on a separate retu	rn or you	were a dual-status	alien	l							
Age/Blindness	You:	: Were born before January 2, 1	1956	Are blind Sp	ouse	: Was b	orn be	fore Janu	ary 2,	1956	☐ Is bl	lind	
Dependents	s (see	instructions):		(2) Social securit	у	(3) Relations	ship	(4)	if qua	ualifies for (see instructions):			
If more	(1) F	irst name Last name		number		to you		Child tax cred		dit	Credit for ot	her dependents	
than four													
dependents, see instructions													
and check													
here ▶ □													
	_1_	Wages, salaries, tips, etc. Attach	Form(s) V	V-2						1	1.	14,173.	
Attach	2a	Tax-exempt interest	2a		b T	axable intere	st			<b>2</b> b	,		
Sch. B if required.	3a	Qualified dividends	3a		<b>b</b> C	rdinary divid	ends			3b	,		
	4a	IRA distributions	4a		b T	axable amou	nt .			4b	,		
	5a	Pensions and annuities	5a		<b>b</b> Taxable amount			t		5b	)		
Standard	6a	Social security benefits	6a		b T	axable amou	nt .			6b	)		
Deduction for—	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □						7					
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, line 9								8	-:	11,464.	
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	, and 8. This is your <b>total income</b>						. ▶	9	1	02,709.	
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 stan	dard deduction. Se	e insti	ructions 1	0b						
• Head of	С	Add lines 10a and 10b. These are	your <b>tot</b>	al adjustments to	incor	ne			. ▶	100			
household, \$18,650	11	Subtract line 10c from line 9. This is your adjusted gross income						11	. 10	02,709.			
• If you checked	12	Standard deduction or itemized	•	-						12		12,400.	
any box under Standard	13	Qualified business income deduct		•	,	995-A				13			
Deduction, see instructions.	14	Add lines 12 and 13						14		12,400.			
See manuchoris.	15	Taxable income. Subtract line 14	from line	e 11. If zero or less	, ente	r-0				15		90,309.	

Form 1040 (2020	))									Page	2
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			16	15,758	_
	17	Amount from Schedule 2, lin	ne 3						17		
	18	Add lines 16 and 17							18	15,758	
	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	. If zero or less,	enter -0					22	15,758	
	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	15,758	
	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a	18,1	L28.			
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c	,						25d	18,128	
If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20	19 return				26		
qualifying child,	27	Earned income credit (EIC)				27					
attach Sch. EIC.   If you have	28	Additional child tax credit. A				28					
nontaxable	29	American opportunity credit	from Form 8863	8. line 8 .     .		29					
combat pay, see instructions.	30	Recovery rebate credit. See		•		30					
	31	Amount from Schedule 3, lin				31					
	32	Add lines 27 through 31. The						. •	32		
	33	Add lines 25d, 26, and 32. T	,						33	18,128	_
	34	If line 33 is more than line 24							34	2,370	
Refund	35a					•	-	 ▶ □	35a	2,370	_
Direct deposit?	<b>⊳</b> b								OJA	2,370	_
See instructions.	►d	Account number 1 3 8			1 3 2 8	J OHECKING		virigs			
	36	Amount of line 34 you want a				36					
Amount		·							37		_
You Owe	37	Subtract line 33 from line 24		•					31		
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					es. Com	nloto b	olow	⊠ No	
Designee		signee's		Phone		🗆 1		al identifi		∠ NO	
		me ►		no.				(PIN)			П
Sign	Un	der penalties of perjury, I declare t	hat I have examine	ed this return and	l accompanying sch	edules and s	tatements	, and to	the bes	t of my knowledge a	nd
	be	lief, they are true, correct, and com	plete. Declaration	of preparer (other	than taxpayer) is ba	ased on all inf	ormation o	of which	prepare	er has any knowledge	<b>}.</b>
Here	Yo	ur signature		Date Your occupation						nt you an Identity	
	<b>k</b>					1	Protection PIN, enter it here				
Joint return?				SOFTWARE ENGINEER				+ `	nst.) ►	<u> </u>	╝
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion			f the IRS sent your spouse an dentity Protection PIN, enter it her		
your records.							1	(see inst.)			
	———Ph	one no.		Email address							_
		eparer's name	Preparer's signat	l .		Date	P	TIN		Check if:	_
Paid		SSMANIKUMARAPPANA	RVSSMANIK		JA	03/27/2	2021 P	02090	332	Self-employed	
Preparer								646)727-715	_		
Use Only		m's address ► 2530 Pebb		n Cummin	a GA 30041				s EIN ▶		_
Go to want ire a						DEV 00/10	/04 DDO	1		Form <b>1040</b> (20	_
GO TO WWW.IIS.go	JV/I-Off	n1040 for instructions and the late	or illiorridilori.		BAA	REV 03/13	/21 PKU			rom 1040 (20	∠∪)

### **SCHEDULE 1** (Form 1040)

**Additional Income and Adjustments to Income** 

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

DEE	PTHI PRIYANKA MUSUNURU	889-38	3-367	9
Par	t I 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 Sched	ule E	5	-11,464.
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 line 8	· I	9	-11,464.
Par	t II Adjustments to Income			
10	Educator expenses		10	
11	Certain business expenses of reservists, performing artists, and fee-basis governing	ment		
10	officials. Attach Form 2106		11 12	
12	Health savings account deduction. Attach Form 8889		13	
13	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
14 15	Deductible part of self-employment tax. Attach Schedule SE			
15 16	Self-employed SEP, SIMPLE, and qualified plans		15	
16	Self-employed health insurance deduction		16	
17	Penalty on early withdrawal of savings		17	
	Alimony paid		18a	
	Recipient's SSN			
	Date of original divorce or separation agreement (see instructions)	I	10	
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 on Form 1040, 1040-SR, or 1040-NR, line 10a	I	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

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

Attachment Sequence No. 13

Name(s) shown on return Your social security number DEEPTHI PRIYANKA MUSUNURU 889-38-3679 Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions . . . . . Physical address of each property (street, city, state, ZIP code) Α GUNTUR DISTRICT VIJAYAWADA ANDHRA PRADESH IN 522501 В C 1b Fair Rental **Personal Use** Type of Property For each rental real estate property listed QJV above, report the number of fair rental and personal use days. Check the **QJV** box only if you meet the requirements to file as a (from list below) **Days Days** 365 0 Α Α qualified joint venture. See instructions. В В С С Type of Property: Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: **Properties:** Α 3 Rents received . 3 320. 4 Royalties received . . . . . . 4 Expenses: Advertising . . . . . . 5 5 6 Auto and travel (see instructions) . . . 6 7 Cleaning and maintenance . . . 7 2,964. 8 8 Commissions. . . . . . 9 9 Insurance . . . . . . . . . . 10 Legal and other professional fees . . . 10 11 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. . . . . . . . . 14 Repairs. . . . . . . . 14 2,800. 15 2,658. 15 Supplies . Taxes . . . . . . 16 16 17 17 3,362. 18 Depreciation expense or depletion . . 18 19 19 Total expenses. Add lines 5 through 19 . . . . . 20 20 11,784. 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 -11,464. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . -11,464.) 320 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b 23c **c** Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 11,784. Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 11,464. 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 26 -11,464.

## Form **8582**

**Passive Activity Loss Limitations** 

See separate instructions.

Attach to Form 1040, 1040-SR, or 104

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

OMB No. 1545-1008

2020

Attachment

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

DEEPTHI PRIYANKA MUSUNURU

► Go to www.irs.gov/Form8582 for instructions and the latest information.

Attachment Sequence No. **858** Identifying number

889-38-3679

Par	t I 2020 Passive Activity Loss		
	Caution: Complete Worksheets 1, 2, and 3 before completing Part I.		
Renta	al Real Estate Activities With Active Participation (For the definition of active participation, see		
Spec	ial Allowance for Rental Real Estate Activities in the instructions.)		
1a	Activities with net income (enter the amount from Worksheet 1, column (a)) . 1a 0.		
b	Activities with net loss (enter the amount from Worksheet 1, column (b))   1b   ( 11,464.)	,	
С	Prior years' unallowed losses (enter the amount from Worksheet 1, column (c)) 1c (	,	
d	Combine lines 1a, 1b, and 1c	1d	-11,464.
Comi	mercial Revitalization Deductions From Rental Real Estate Activities		
2a	Commercial revitalization deductions from Worksheet 2, column (a) 2a ( )		
b	Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)		
C	Add lines 2a and 2b	2c	( )
All O	ther Passive Activities		
3a	Activities with net income (enter the amount from Worksheet 3, column (a)) . 3a		
b	Activities with net loss (enter the amount from Worksheet 3, column (b)) 3b (		
С	Prior years' unallowed losses (enter the amount from Worksheet 3, column (c)) 3c (	,	
d	Combine lines 3a, 3b, and 3c	3d	
4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your		
	return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c.		
	Report the losses on the forms and schedules normally used	4	-11,464.
	If line 4 is a loss and: • Line 1d is a loss, go to Part II.		
	<ul> <li>Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.</li> </ul>		
	<ul> <li>Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III ar</li> </ul>	_	
	ion: If your filing status is married filing separately and you lived with your spouse at any time during the	year,	do not complete
	I or Part III. Instead, go to line 15.		
Part	·		
	Note: Enter all numbers in Part II as positive amounts. See instructions for an example.		
5	Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4	5	11,464.
6	Enter \$150,000. If married filing separately, see instructions	-	
7	Enter modified adjusted gross income, but not less than zero. See instructions 7 114,173.	-	
	Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on		
•	line 10. Otherwise, go to line 8.		
8	Subtract line 7 from line 6		15 014
9	Multiply line 8 by 50% (0.50). <b>Do not</b> enter more than \$25,000. If married filing separately, see instructions	9	17,914.
10	Enter the <b>smaller</b> of line 5 or line 9	10	11,464.
Dout	If line 2c is a loss, go to Part III. Otherwise, go to line 15.	-t- A	ativiti a a
Part			cuvilles
44	<b>Note:</b> Enter all numbers in Part III as positive amounts. See the example for Part II in the instruction Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.	11	
11 12	Enter the loss from line 4	12	
13		13	
14	Reduce line 12 by the amount on line 10	14	
Part		14	
15	Add the income, if any, on lines 1a and 3a and enter the total	15	0.
16	Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions	13	0.
10	to find out how to report the losses on your tax return	16	11,464.

BAA

Caution: The worksheets must be filed to				/ for your	record	S.			
Worksheet 1—For Form 8582, Lines 1	<b>a, 1b, and 1c</b> (se	e instructio	ns)						
Name of activity	Currer	nt year		Prior years		Overall g		ain or loss	
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)		(c) Unallowed loss (line 1c)		(d)	) Gain	(e) Loss	
GUNTUR DISTRICT	0.		64.					11,464.	
Total. Enter on Form 8582, lines 1a, 1b,	0	11,4	64						
and 1c	a and 2b (see ins	structions)	01.						
Name of activity	(a) Current deductions (	year	/ear		<b>(b)</b> Prior year llowed deductions (l		(c)	Overall loss	
Total. Enter on Form 8582, lines 2a and 2b									
Worksheet 3—For Form 8582, Lines 3	<b>a, 3b, and 3c</b> (se	e instructio	ons)	1					
None of activity	Currer	it year	P		Prior years		Overall gain or loss		
Name of activity	(a) Net income (line 3a)	(b) Net loss (line 3b)		(c) Unallowed loss (line 3c)		(d)	) Gain	(e) Loss	
<b>Total.</b> Enter on Form 8582, lines 3a, 3b, and 3c		_							
Worksheet 4—Use This Worksheet if a		own on Fo	rm 8	582, Line	e 10 or	<b>14.</b> See	instructi	ons.	
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	6	<b>(b)</b> R			Special wance	(d) Subtract column (c) from column (a)	
GUNTUR DISTRICT	E Ln 22	11,4	64.	1.000	00000	11,464.		0.	
Total	11,4		64.	1.00		11,464.		0.	
Worksheet 5—Allocation of Unallowed	,								
Name of activity	Form or schedu and line number to be reported ( (see instruction	er on (a) Lo		oss (b		) Ratio (c		c) Unallowed loss	
Total						1 00			