Form <b>8879</b>
(Rev. January 2021)
Department of the Treesure

#### Department of the Treasury Internal Revenue Service

#### **IRS e-file Signature Authorization**

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

T.....

Taxpayer's name	Social security number
YASWANTH KRISHNA CHAKKA	775-35-6260
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, (Enter	er year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
<b>1</b> Adjusted gross income	<b>1</b> 61,881.
<b>2</b> Total tax	<b>2</b> 0.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>3</b> 7,924.
4 Amount you want refunded to you	<b>4</b> 7,924.
5 Amount you owe	5

#### Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

#### Taxpayer's PIN: check one box only

X	Lauthorize	GLOBAL TAXES LLC	to enter or generate my PIN
100	I ddthonzo		

	as					
	5	6	2	6	0	

my

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

#### Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature 🕨	Date 🕨	
Practitioner PIN Metho	d Returns Only—continue below	
Part III Certification and Authentication – Practi	ioner PIN Method Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your f	ve-digit self-selected PIN. 5 8 7 2 7 8 6 1 9 8 9	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >	Date 🕨							
ERO Must Retain This Don't Submit This Form to the								
Fee Demonstrale Deduction Act Not	in a second and water water and the star set in a		DEV/ 00/07/04 DDO	Form 8870 (Day 01 0001)				

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

E <b>104(</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		<sup>(99)</sup> 20	20	OMB No. 1545	5-0074	IRS Use On	ly—Do not v	write or staple	e in this space.
Filing Status Check only one box.	lf yo	Single  Married filing jointly Sou checked the MFS box, enter the n son is a child but not your dependent	ame of	ed filing separate your spouse. If yo				. ,		, 0	dow(er) (QW) he qualifying
Your first name	e and m	iddle initial	Last na	me					Your se	ocial secur	ity number
YASWANT	H KR	ISHNA	CHAK	KΑ					775-	35-626	50
If joint return, s	spouse's	s first name and middle initial	Last na	me					Spouse	e's social se	ecurity number
22680 C	RICK	er and street). If you have a P.O. box, see ET HILL CT						Apt. no.	Check	here if you	ion Campaign , or your ntly, want \$3
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete s	paces below.	Sta	ate	ZIP co				. Checking a
ASHBURN					V	A	201	.48		low will no	•
Foreign countr	y name		F	Foreign province/st	ate/cour	nty	Forei	gn postal code	your ta	x or refund	_
						financial interv				Vou	Spouse
At any time du	uring 20	020, did you receive, sell, send, exch	hange, c	or otherwise acqu	lire any	Tinancial Intere	est in a	any virtual c	urrency?	Yes	🗙 No
Standard Deduction		<b>neone can claim:</b>	•	· ·		a dependent					
Age/Blindnes	s You:	: Were born before January 2, 1	956 🗌	Are blind	Spouse	e: 🗌 Was bo	rn bef	ore January	2, 1956	🗌 ls b	blind
Dependent If more		instructions): irst name Last name		(2) Social sec number	urity	(3) Relationsl to you	nip	(4) ✔ if Child tax		or (see instru Credit for o	uctions): ther dependents
than four											
dependents,											
see instruction and check	s —										
here 🕨 🗌											
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1		69,911.
Attach	2a	Tax-exempt interest	2a		b	Taxable interes	t.		. 21	2 C	
Sch. B if	3a	Qualified dividends	3a		b (	Ordinary divide	nds .		. 31	o 🛛	
required.	4a	IRA distributions	4a		b	Taxable amour	ıt		. 41	o 🛛	
	5a	Pensions and annuities	5a		b	Taxable amour	ıt		. 51	<b>b</b>	
Standard	6a	Social security benefits	6a		b	Taxable amour	ıt		. 61	<b>b</b>	
Deduction for-	7	Capital gain or (loss). Attach Sche	dule D if	f required. If not r	equired	d, check here		🕨	7	,	
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, lin	e9.						. 8	;	-7,750.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8. T	his is your <b>total</b> i	income	•			▶ 9	)	62,161.
Married filing	10	Adjustments to income:									
jointly or Qualifying	а	From Schedule 1, line 22				10	a				
widow(er), \$24,800	b	Charitable contributions if you take	the star	ndard deduction.	See ins <sup>.</sup>	tructions 10	b	28	30.		
Head of	с	Add lines 10a and 10b. These are	your <b>tot</b>	al adjustments	to inco	me			▶ 10	c	280.
household, \$18,650	11	Subtract line 10c from line 9. This							▶ 1	1	61,881.
<ul> <li>If you checked</li> </ul>	12	Standard deduction or itemized	deduct	ions (from Sched	dule A)				. 12	2	12,400.
any box under <i>Standard</i>	13	Qualified business income deducti				8995-A			. 1:		
Deduction, see instructions.	14	Add lines 12 and 13							. 14	4	12,400.
	15	Taxable income. Subtract line 14	from lin	e 11. If zero or le	ss, ent	er-0			. 1	5	49,481.
					-						1010

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

Form **1040** (2020)

Form 1040 (2020	))										Page <b>2</b>
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 2	4972	3			16	6,675.
	17	Amount from Schedule 2, lir	ne3							17	
	18	Add lines 16 and 17								18	6,675.
	19	Child tax credit or credit for	other dependen	ts						19	
	20	Amount from Schedule 3, lir	ne7							20	6,675.
	21	Add lines 19 and 20								21	6,675.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0						22	0.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 1	0.				23	0.
	24	Add lines 22 and 23. This is	your total tax						. 1	24	0.
	25	Federal income tax withheld	from:								
	а	Form(s) W-2					25a	7	,924		
	b	Form(s) 1099					25b				
	с	Other forms (see instruction	s)				25c				
	d	Add lines 25a through 25c								25d	7,924.
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20	)19 returr	ı				26	
qualifying child,	27	Earned income credit (EIC)					27				
attach Sch. EIC.	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	instructions .	· 			30				
	31	Amount from Schedule 3, lir					31				
	32	Add lines 27 through 31. The					ble cr	edits	. )	▶ 32	
	33	Add lines 25d, 26, and 32. T									7,924.
	34	If line 33 is more than line 24	-							34	7,924.
Refund	35a	Amount of line 34 you want					-	-		_	7,924.
Direct deposit?	►b	Routing number 0 2 1			► c Ty		Chec		Saving		.,
See instructions.	►d	Account number 7 5 7							ouving		
	36	Amount of line 34 you want a			ed tax	• •	36	T			
Amount	37	Subtract line 33 from line 24								37	
You Owe	57			•							
For details on		<b>Note:</b> Schedule H and Sch 2020. See Schedule 3, line 1				sent all c	of the	taxes you	owe to	pr	
how to pay, see instructions.	38	Estimated tax penalty (see in					38				
Third Party		you want to allow another									
Designee		tructions	•					Yes. Co	omplet	e below.	× No
Decignee		signee's		Phone					•	ntification	
		me ►		no. 🕨					ber (PIN		
Sign		der penalties of perjury, I declare t									
Here		ief, they are true, correct, and com	plete. Declaration of			•	ased on	all information			, ,
	Yo	ur signature		Date	Your occ	cupation					nt you an Identity IN, enter it here
Joint return?					SOFT	WARE E	TDIA	νττο		ee inst.)	
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign	Date		s occupati				,	nt your spouse an
Keep a copy for			our maar olgn.	Duto		oooupun					ection PIN, enter it here
your records.									(s	ee inst.) 🕨	
		one no.		Email address							
Paid	Pre	eparer's name	Preparer's signat	ure			Date		PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA '	TALLAM	02/	10/2021	P020	82703	Self-employed
Preparer	Firi	m's name ► GLOBAL TA	XES LLC						PI	none no. (	678)965-9522
Use Only	Fin	n's address ► 2530 Pebb	le Creek L	n Cummin	g GA 3	30041			Fi	rm's EIN 🕨	→ 30-1017196
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BA		REV	/ 02/07/21 PRC	)		Form <b>1040</b> (2020)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

## Additional Income and Adjustments to Income

OMB No. 1545-0074

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

soc	ial security number
	Attachment Sequence No. <b>01</b>
	2020

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security
YASWANTH KRISHNA CHAKKA	775-35-6260

## Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	0.
<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	-7,750.
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	-7,750.
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	
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 02/07/21 PRO	Schedu	le 1 (Form 1040) 2020

SCHEDULE	2
(Form 1040)	

Department of the Treasury

### **Additional Taxes**

OMB No. 1545-0074 2020

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

Department of the Treasury Internal Revenue Service						
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number			
YASWANTH KRISH	NA CHAKKA	775	5-35-6260			
Part I Tax						

I a			
1	Alternative minimum tax. Attach Form 6251	1	0.
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 .	3	0.
Par	t II Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	
5	Unreported social security and Medicare tax from Form: $\mathbf{a} \Box 4137$ $\mathbf{b} \Box 8919$ .	5	
6	Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required	6	
7a	Household employment taxes. Attach Schedule H	7a	
b	Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required	7b	
8	Taxes from: <b>a</b> 🗌 Form 8959 <b>b</b> 🗌 Form 8960		
	c 🗌 Instructions; enter code(s)	8	
9	Section 965 net tax liability installment from Form 965-A 9		
10	Add lines 4 through 8. These are your <b>total other taxes.</b> Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b	10	
For Pa	aperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/07/21 PRO	Schedu	le 2 (Form 1040) 2020

# **Additional Credits and Payments**

OMB No. 1545-0074

2020

	Attach to Form 1040, 1040-SR, or 1040-NR.
<b>.</b> .	

Department of the Treasury         ► Attach to Form 1040, 1040-SR, or 1040-NR.           Internal Revenue Service         ► Go to www.irs.gov/Form1040 for instructions and the latest information.				ttachment equence No. 03
Name	(s) shown on Form 1040, 1040-SR, or 1040-NR	Your so		ecurity number
YAS	WANTH KRISHNA CHAKKA	775-	35-62	260
Par	rt I Nonrefundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses. Attach Form 2441		2	
3	Education credits from Form 8863, line 19		3	
4	Retirement savings contributions credit. Attach Form 8880		4	
5	Residential energy credits. Attach Form 5695		5	
6	Other credits from Form: <b>a</b> ⊠ 3800 <b>b</b> ⊡ 8801 <b>c</b> □		6	6,675.
7	Add lines 1 through 6. Enter here and on Form 1040, 1040-SR, or 1040-N	R, line 20	7	6,675.
Par	t II Other Payments and Refundable Credits			
8	Net premium tax credit. Attach Form 8962		8	
9	Amount paid with request for extension to file (see instructions)		9	
10	Excess social security and tier 1 RRTA tax withheld		10	
11	Credit for federal tax on fuels. Attach Form 4136		11	
12	Other payments or refundable credits:			
а	Form 2439			
b	Qualified sick and family leave credits from Schedule(s) H andForm(s) 720212b			
С	Health coverage tax credit from Form 8885    .    .    .    12c			
d	Other: 12d			
е	Deferral for certain Schedule H or SE filers (see instructions) . 12e			
f	Add lines 12a through 12e		12f	
13	Add lines 8 through 12f. Enter here and on Form 1040, 1040-SR, or 1040-	NR, line 31	13	
For Pa	aperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/0	7/21 PRO	Schedu	le 3 (Form 1040) 2020

	EDULE E			Supplemen	ital Ind	come a	and L	.0SS			OMB	No. 1545-00
(Form	1040)	(From	rental I	real estate, royalties, partn	erships,	S corpor	ations,	estates,	trusts, REM	/IICs, etc.)	9	<b>20</b>
Departm	ent of the Treasury			Attach to Form 1	1040, 104	0-SR, 104	40-NR,	or 1041.			Attach	
	Revenue Service (99)		►G	o to www.irs.gov/Schedule	E for ins	tructions	and t	ne latest	information	ı.	Seque	ence No. 13
Name(s	) shown on return									Your soc	ial securit	y number
YASW	ANTH KRISH	-									5-626	-
Part				Rental Real Estate and	-					0.	•	
	Schedule	C. See	instructi	ons. If you are an individual,	report fa	m rental	income	e or loss f	rom Form 4	835 on page	e 2, line 4	0.
	, ,			020 that would require yo		· · ·						íes 🛛 N
B If '	Yes," did you o	r will yo	ou file r	equired Form(s) 1099? .							. 🗆 <b>\</b>	íes 🗌 N
1a	Physical addr	ess of e	each pr	operty (street, city, state,	ZIP cod	e)						
Α	BRODIPET	5/18	GUNTU	JR TELANGANA IN 5	2202							
В												
С												
1b	Type of Prop	oerty	<b>2</b> F	or each rental real estate	property	listed		Faiı	<sup>r</sup> Rental	Persona	I Use	QJV
	(from list be	elow)	a	bove, report the number of	of fair ren	tal and			Days	Day	S	QUV
Α	3		if	bove, report the number of personal use days. Check t you meet the requirement	ts to file	as a	Α		365		0	
В			c	ualified joint venture. See	instructio	ons.	В					
С							С					
Туре	of Property:											
1 Sing	gle Family Resid	dence	3 \	/acation/Short-Term Rent	tal 5 La	and		7 Self-	Rental			
2 Mul	ti-Family Reside	ence	4 0	Commercial	6 R	oyalties		8 Othe	er (describe	)		
Incon	ne:			Propertie	es:		Α		E	3		С
3	Rents received	1 k			3			350.				
4												
Exper												
5	Advertising .				5							
6	Auto and trave	el (see ir	nstructi	ons)	6			350.				
7	Cleaning and r	mainter	nance		7			650.				
8	Commissions.				8							
0	Incurrence				0							

Exper	ISES:					
5	Advertising	5				
6	Auto and travel (see instructions)	6	350.			
7	Cleaning and maintenance	7	650.			
8	Commissions	8				
9	Insurance	9				
10	Legal and other professional fees	10				
11	Management fees	11	650.			
12	Mortgage interest paid to banks, etc. (see instructions)	12				
13	Other interest	13	4,500.			
14	Repairs	14	650.			
15	Supplies	15	650.			
16	Taxes	16				
17	Utilities	17	650.			
18	Depreciation expense or depletion	18				
19	Other (list)	19				
20	Total expenses. Add lines 5 through 19	20	8,100.			
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	-7,750.			
22	Deductible rental real estate loss after limitation, if any,					
	on Form 8582 (see instructions)	22	· · ·		)	( )
23a	Total of all amounts reported on line 3 for all rental proper		<b>23</b> a		50.	
b	Total of all amounts reported on line 4 for all royalty prope					
С	Total of all amounts reported on line 12 for all properties					
d	Total of all amounts reported on line 18 for all properties					
е	Total of all amounts reported on line 20 for all properties			8,1	00.	
24	Income. Add positive amounts shown on line 21. Do not				24	
25	Losses. Add royalty losses from line 21 and rental real estate	losse	s from line 22. Enter to	al losses here .	25	(7,750.)
26	Total rental real estate and royalty income or (loss).					
	here. If Parts II, III, IV, and line 40 on page 2 do not a					
	Schedule 1 (Form 1040), line 5. Otherwise, include this an	noun	t in the total on line 4	l on page 2 .	26	-7,750.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2020

OMB No. 1545-0074

🗌 Yes 🛛 No

🗌 Yes 🗌 No

## **General Business Credit**

OMB No. 1545-0895 200**20** 

Form	<b>3800</b>			
Departr	ment of the Treasury Revenue Service (99)	<ul> <li>Go to www.irs.gov/Form3800 for instructions and the latest information.</li> <li>You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.</li> </ul>	Å	2020 Attachment Sequence No. 22
Name(	s) shown on return	Identify	ing nu	mber
YAS	WANTH KRISH	NA CHAKKA 775-	35-6	260
Par	(See ins	Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT) tructions and complete Part(s) III before Parts I and II.)		
1		ess credit from line 2 of all Parts III with box A checked	1	7,500.
2		y credits from line 2 of all Parts III with box B checked 2		
3		icable passive activity credits allowed for 2020. See instructions	3	
4	checked. See	of general business credit to 2020. Enter the amount from line 2 of Part III with box C instructions for statement to attach	4	
_		x if the carryforward was changed or revised from the original reported amount		🕨 🗋
5	checked. See	general business credit from 2021. Enter the amount from line 2 of Part III with box D instructions	5	
6	Add lines 1, 3,		6	7,500.
Par		4, and 5	U	7,500.
7	Regular tax be			
	<ul> <li>Individuals.</li> </ul>	Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, line edule 2 (Form 1040), line 2		
		s. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the ne of your return	7	6,675.
8		d trusts. Enter the sum of the amounts from Form 1041, Schedule G, 1b; or the amount from the applicable line of your return		
0	• Individuals. I	Enter the amount from Form 6251, line 11	8	0.
		trusts. Enter the amount from Schedule I (Form 1041), line 54		
9 10a	Add lines 7 an Foreign tax cr		9	6,675.
b c		ble credits (see instructions)         . <th< td=""><td>10c</td><td>с 0.</td></th<>	10c	с 0.
11	Net income ta	ax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	6,675.
12	Net regular ta	<b>12</b> 6,675.		
13		0.25) of the excess, if any, of line 12 over \$25,000. See <b>13</b> 0.		
14	Tentative mini	mum tax:		
		Enter the amount from Form 6251, line 9		
	<ul> <li>Estates and</li> </ul>	trusts. Enter the amount from Schedule I (Form 1041),		
15		ter of line 13 or line 14	15	0.
16	•	5 from line 11. If zero or less, enter -0	16	6,675.
17		<b>Iler</b> of line 6 or line 16	17	6,675.
	C corporation reorganization	<b>ns:</b> See the line 17 instructions if there has been an ownership change, acquisition, or		
For P	aperwork Reduct	ion Act Notice, see separate instructions. BAA REV 02/07/21 PRO		Form <b>3800</b> (2020)
		DO NOT FILE		

Form 3	8800 (2020)		Page <b>2</b>
Par			
Note	: If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -	0- on	line 26.
18	Multiply line 14 by 75% (0.75). See instructions	18	
19	Enter the greater of line 13 or line 18	19	
20	Subtract line 19 from line 11. If zero or less, enter -0	20	
21	Subtract line 17 from line 20. If zero or less, enter -0	21	
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	
23	Passive activity credit from line 3 of all Parts III with box B checked 23		
24	Enter the applicable passive activity credit allowed for 2020. See instructions	24	
25	Add lines 22 and 24	25	
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0.
27	Subtract line 13 from line 11. If zero or less, enter -0	27	6,675.
28	Add lines 17 and 26	28	6,675.
29	Subtract line 28 from line 27. If zero or less, enter -0	29	0.
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	
31 32	Reserved   .   <	31	c
33	Enter the applicable passive activity credits allowed for 2020. See instructions	33	
34	Carryforward of business credit to 2020. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34	🕨 🗌
35	Carryback of business credit from 2021. Enter the amount from line 5 of Part III with box D checked. See instructions	35	
36	Add lines 30, 33, 34, and 35	36	
37	Enter the <b>smaller</b> of line 29 or line 36	37	0.
38	Credit allowed for the current year. Add lines 28 and 37.		
	Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return.		
	Individuals. Schedule 3 (Form 1040), line 6		
	Estates and trusts. Form 1041, Schedule G, line 2b	38	6,675.
	DONO REV 02/07/21 PRO		Form <b>3800</b> (2020)

Form 380				Page <b>3</b>
Name(s) s	hown on return		Identifying nur	
	NTH KRISHNA CHAKKA		775-35-6	260
Part II		ructio	ns)	
•	ete a separate Part III for each box checked below. See instructions.			
	General Business Credit From a Non-Passive Activity <b>E</b> Reserved			
	General Business Credit From a Passive Activity <b>F</b> Reserved			-
	General Business Credit Carryforwards G 🗌 Eligible Small Busin	less Cr	edit Carrytorward	S
	General Business Credit Carrybacks			
	u are filing more than one Part III with box A or B checked, complete and attach first an a arts III with box A or B checked. Check here if this is the consolidated Part III			
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	n any line where the credit is from more than one source, a separate Part III is needed for each ough entity.		claiming the credit rom a pass-through entity.	appropriate amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Reserved	1b		
С	Increasing research activities (Form 6765)	1c		
d	Low-income housing (Form 8586, Part I only)	1d		
е	Disabled access (Form 8826)*	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	<b>1</b> i		
j	Small employer pension plan startup costs and auto-enrollment (Form 8881)	1j		
k	Employer-provided child care facilities and services (Form 8882)*	1k		
I	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1p		
q r	Energy efficient appliance (carryforward only)	1q 1r		
s t	Alternative fuel vehicle refueling property (Form 8911)	1s 1t		C
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
х	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		7,500.
Z	Qualified plug-in electric vehicle (carryforward only)	1z		
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		7,500.
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
с	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586, Part II)	4d		
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	<b>4</b> i		
j	Employer credit for paid family and medical leave (Form 8994)	4j		
Z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		7,500.

6251 Form Department of the Treasury Internal Revenue Service (99)

11

### **Alternative Minimum Tax—Individuals**

► Go to www.irs.gov/Form6251 for instructions and the latest information. Attach to Form 1040, 1040-SR, or 1040-NR.

2020

OMB No. 1545-0074

Attachment Sequence No. 32

Name(s)	shown on Form 1040, 1040-SR, or 1040-NR	Your soci	al secu	rity number
YASW	ANTH KRISHNA CHAKKA	775-3	85-6	260
Part	I Alternative Minimum Taxable Income (See instructions for how to complete each	ch line.)		
1	Enter the amount from Form 1040 or 1040-SR, line 15, if more than zero. If Form 1040 or 1040-SR, is zero, subtract lines 12 and 13 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR an the result here. (If less than zero, enter as a negative amount.)		1	49,481.
2a	If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amoun Form 1040 or 1040-SR, line 12		2a	12,400.
b	Tax refund from Schedule 1 (Form 1040), line 1 or line 8		2b	( 0.)
с	Investment interest expense (difference between regular tax and AMT)		2c	
d	Depletion (difference between regular tax and AMT)		2d	
е	Net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount		2e	
f	Alternative tax net operating loss deduction		2f	( )
g	Interest from specified private activity bonds exempt from the regular tax		2g	
h	Qualified small business stock, see instructions		2h	0.
i	Exercise of incentive stock options (excess of AMT income over regular tax income)		2i	
j	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)		2j	
k	Disposition of property (difference between AMT and regular tax gain or loss)		2k	
I	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)		21	
m	Passive activities (difference between AMT and regular tax income or loss)		2m	0.
n	Loss limitations (difference between AMT and regular tax income or loss)		2n	
ο	Circulation costs (difference between regular tax and AMT)		20	
р	Long-term contracts (difference between AMT and regular tax income)		2p	
q	Mining costs (difference between regular tax and AMT)		2q	
r	Research and experimental costs (difference between regular tax and AMT)		2r	
S	Income from certain installment sales before January 1, 1987		2s	( )
t	Intangible drilling costs preference		2t	
3	Other adjustments, including income-based related adjustments	•	3	
4	Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and I more than \$745,200, see instructions.)		4	61,881.
Part			4	01,001.
5	Exemption.			
0	IF your filing status is AND line 4 is not over THEN enter on line 5			
	Single or head of household \$ 518,400 \$ 72,900			
	Married filing jointly or qualifying widow(er) 1,036,800			
	Married filing separately		5	72,900.
	If line 4 is <b>over</b> the amount shown above for your filing status, see instructions.	• •	-	, 2, 900.
6	Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7,	9 and		
Ũ	11, and go to line 10		6	0.
7	• If you are filing Form 2555, see instructions for the amount to enter.		-	
	• If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; <b>or</b> you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.		7	
	• All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.			
8	Alternative minimum tax foreign tax credit (see instructions)		8	
9	Tentative minimum tax. Subtract line 8 from line 7		9	0.
10	Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J completing this line (see instructions)	edule J	10	

0.

11

	251 (2020)		Page 2
Part	Tax Computation Using Maximum Capital Gains Rates           Complete Part III only if you are required to do so by line 7 or by the Foreign Earned Income Tax Worksh	oot in t	the instructions
			the instructions.
12	Enter the amount from Form 6251, line 6. If you are filing Form 2555, enter the amount from line 3 of the worksheet in the instructions for line 7	12	
13	Enter the amount from line 4 of the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions		
	for Forms 1040 and 1040-SR or the amount from line 13 of the Schedule D Tax Worksheet in the		
	Instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see	10	
4.4	instructions). If you are filing Form 2555, see instructions for the amount to enter	13	
14	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555, see instructions for the amount to enter	14	
15	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from		
	line 13. Otherwise, add lines 13 and 14, and enter the <b>smaller</b> of that result or the amount from line 10 of		
	the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see instructions for the amount to enter	15	
16	Enter the <b>smaller</b> of line 12 or line 15	16	
17		17	
18	If line 17 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise,		
	multiply line 17 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result	18	
19	Enter:		
	• \$80,000 if married filing jointly or qualifying widow(er),		
	<ul> <li>\$40,000 if single or married filing separately, or</li> <li>\$53,600 if head of household.</li> </ul>	19	
20	Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 14 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not		
	complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero		
	or less, enter -0 If you are filing Form 2555, see instructions for the amount to enter	20	
21	Subtract line 20 from line 19. If zero or less, enter -0	21	
22	Enter the <b>smaller</b> of line 12 or line 13	22	
23 24	Enter the smaller of line 21 or line 22. This amount is taxed at 0%	23 24	
24		24	
	• \$441,450 if single		
. 1	• \$248,300 if married filing separately	25	С
	<ul> <li>\$496,600 if married filing jointly or qualifying widow(er)</li> </ul>		
	• \$469,050 if head of household		
26	Enter the amount from line 21	26	
27	Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from		
	line 21 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero		
	or less, enter -0 If you are filing Form 2555, see instructions for the amount to enter	27	
28	Add line 26 and line 27	28	
29	Subtract line 28 from line 25. If zero or less, enter -0	29	
30	Enter the smaller of line 24 or line 29	30	
31 32	Multiply line 30 by 15% (0.15)	31	
32	Add lines 23 and 30	32	
33		33	
34	Multiply line 33 by 20% (0.20)	34	
	If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35.		
35	Add lines 17, 32, and 33	35	
36	Subtract line 35 from line 12	36	
37	Multiply line 36 by 25% (0.25)	37	
38	Add lines 18, 31, 34, and 37	38	
39	If line 12 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 12 by 26% (0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result	39	
40	Enter the <b>smaller</b> of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this		
	amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7	40	

REV 02/07/21 PRO Form **6251** (2020)



### **Qualified Plug-in Electric Drive Motor Vehicle Credit**

(Including Qualified Two-Wheeled Plug-in Electric Vehicles)

► Attach to your tax return.

► Go to www.irs.gov/Form8936 for instructions and the latest information.

OMB No. 1545-2137

Attachment Sequence No. 69

Identifying number

775-35-6260

Name(s) shown on return

#### YASWANTH KRISHNA CHAKKA

Note:

• Use this form to claim the credit for certain plug-in electric vehicles.

Claim the credit for certain alternative motor vehicles on Form 8910.

Part	Part I Tentative Credit									
	separate column for each vehicle. If you need more colum dditional Forms 8936 and include the totals on lines 12 and		<b>(a)</b> Vehicle 1 2020	(b) Vehicle 2						
1	Year, make, and model of vehicle	1	TESLA MODEL Y							
2	Vehicle identification number (see instructions)	2	5YJYGDEE9LF057796							
3	Enter date vehicle was placed in service (MM/DD/YYYY)	3	10/08/2020							
4a	If the vehicle is a two-wheeled vehicle, enter the cost of the vehicle. If the vehicle has at least four wheels, see instructions	4a	7,500.							
b	Phase-out percentage (see instructions)	4b	100.00 %	%						
с	Tentative credit. Multiply line 4a by line 4b	4c	7,500.							

Next: If you did NOT use your vehicle for business or investment purposes and did not have a credit from a partnership or S corporation, skip Part II and go to Part III. All others, go to Part II.

Part	Part II Credit for Business/Investment Use Part of Vehicle									
5	Business/investment use percentage (see instructions)	5	100.00	) %	%					
6	Multiply line 4c by line 5. If the vehicle has at least four wheels, leave lines 7 through 10 blank and go to line 11	6	7,5	00.						
7	Section 179 expense deduction (see instructions) .	7								
8	Subtract line 7 from line 6	8								
9	Multiply line 8 by 10% (0.10)	9								
10	Maximum credit per vehicle	10	2	2,500	2,500					
11	For vehicles with four or more wheels, enter the amount from line 6. If the vehicle is a two-wheeled vehicle, enter the smaller of line 9 or line 10	7,5	00.							
12	Add columns (a) and (b) on line 11		12	7,500.						
13	Qualified plug-in electric drive motor vehicle credit from p (see instructions)	13								
14	Business/investment use part of credit. Add lines S corporations, stop here and report this amount on Sch amount on Form 3800, Part III, line 1y	14	7,500.							

Note: Complete Part III to figure any credit for the personal use part of the vehicle.

Form 8936 (Rev. 1-2021)

#### Part III Credit for Personal Use Part of Vehicle

			<b>(a)</b> Ve	nicle 1		(b) Vehicle 2
15	If you skipped Part II, enter the amount from line 4c. If you completed Part II, subtract line 6 from line 4c. If the vehicle has at least four wheels, leave lines 16 and 17 blank and go to line 18	15			0.	
6	Multiply line 15 by 10% (0.10)	16				
17	Maximum credit per vehicle. If you skipped Part II, enter \$2,500. If you completed Part II, subtract line 11 from line 10	17				
8	For vehicles with four or more wheels, enter the amount from line 15. If the vehicle is a two-wheeled vehicle, enter the smaller of line 16 or line 17	18			0.	
9	Add columns (a) and (b) on line 18				19	(
0	Enter the amount from Form 1040, 1040-SR, or 1040-NR,	ine 18			20	6,675
1	Personal credits from Form 1040, 1040-SR, or 1040-NR (se	e instru	ictions) .		21	
2	Subtract line 21 from line 20				22	6,675
3	<b>Personal use part of credit.</b> Enter the <b>smaller</b> of line Schedule 3 (Form 1040), line 6. Check box <b>c</b> on that line a next to that box. If line 22 is smaller than line 19, see instru	nd ente	r "8936" in tl	ne space	23	C





VA 20148



YASWANTH	KRI	CHAKKA

#### 22680 CRICKET HILL CT

ASHBURN

SSN - You CH	AK	775356260	Vendor ID 1555		xxxxx <b>Л</b>
SSN - Spouse					•
Fed Adj Gross Income (FAGI)	1.	61881.	Withholding (VA) - You	19A.	2989.
Additions	2.		Withholding (VA) - Spouse	19B.	
Subtotal	3.	61881.	Estimated Payments	20.	
Age Deduction - You	4A.		2019 Overpayment	21.	
Age Deduction - Spouse	4B.		Extension Payments	22.	
Soc Sec & Tier 1 Railroad	5.		Credit - Low-Income or EIC	23.	
State Income Tax Overpayment	6.		Credit - Schedule OSC	24.	
Subtractions	7.		Credits - Schedule CR	25.	
Subtotal Subtractions	8.		Total Payments / Credits	26.	2989.
Total VA Adj Gross Income (VAC	GI) 9.	61881.	Tax You Owe	27.	
Itemized Deductions - VA Sch A	. 10.		Tax Overpayment	28.	1.
Standard Deduction	11.	4500.	Overpayment Credited to Next Ye	ar 29.	
Exemptions	12.	930.	VAC - Virginia 529 / ABLEnow	30.	
Deductions	13.		VAC - Other Contributions	31.	
Subtotal (Deductions & Exempt	ions) 14.	5430.	Addition to Tax, Penalty & Interes	t 32.	
VA Taxable Income	15.	56451.	Sales and Use Tax	33.	
Amount of Tax	16.	2988.	Amount You Owe		
Spouse Tax Adjustment (STA)	17.		Will Pay by Credit/Debit Card N Your Refund		1.
VAGI - Spouse	17A.				
Net Amount of Tax	18.	2988.	Bank Routing #	С	021202337
L	-		Bank Account #	7577	27099

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775356260





Filing Status, Age & License In	formation	Additional Filing Information	٦						
Filing Status	1	Locality	570						
Federal Head of Household		Name or Filing Status Change							
DOB - You	09221993	Address Change							
VA Driver's License ID - You		VA Return Not Filed Last Year							
VA Driver's License - Iss. Date -	You	Dependent on Another's Return							
Spouse Name (Filing Status 3 O	inly)	Farmer / Fisherman / Merchant Seaman							
		Amended							
DOB - Spouse VA Driver's License ID - Spouse		Reason Code							
VA Driver's License - Iss. Date -		Overseas on Due Date							
		Federal EIC & Amount							
Exemptions (A) You 1	Exemptions (B) 65 & Over - You	Deceased Indicator							
Spouse	65 & Over - Spouse	No Sales & Use Tax Due Indicator	Х						
Dependents	Blind - You	Obtain Electronic 1099G							
Total (A)	Blind - Spouse	ID Theft PIN							
	Total (B)								
I (We), the undersigned, declare under pe	Contact Information I (We), the undersigned, declare under penalty of law that I (we) have examined this return & to the best of my (our) knowledge, it is a true, correct & complete return. If you are requesting direct deposit of your refund by providing bank information on your return, you are certifying that the information provided is for a domestic account within the territorial jurisdiction of the United States.								

Signature - You Dat	e Phone - You	2015520783
Signature - Spouse Dat	e Phone - Spouse	
Signature - Preparer <u>SYAM PRIYA RAM SAGAR GUPTA TALLAM</u> Dat	e 021021 Phone - Preparer	6789659522
The Tax Department may discuss my/our return with my/our prepare	er. Preparer Information	7 P02082703
File by May 1, 2021	GLOBAL TAXES LLC	1
Include Page 1, Page 2 and all supporting 760CG documents.	2530 PEBBLE CREEK LI CUMMING	GA 30041 Page 2 of 2

### **2020 Schedule INC/CG** 775356260

Report all W-2s, 1099s & VK-1s with VA Withholding

YASWANTH KRI CHAKKA



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Г					Г
775356260	W	919.	461491143	30461491143F001	20090.
775356260	W	2070.	452480355	WTH1024757002	49821.

Total VA Withholding	SSN	VA Withholding
You	775356260	2989.
Spouse		
Total # of W-2s,1099s & VK-1s	02	

To avoid delays - be sure to enter all information, including the Employer's FEIN.

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1555

## Virginia Individual Income Tax e-File Signature Authorization

#### DO NOT SEND THIS VA-8879 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

Virginia Submission Identification Number (SID)							
Your Name	B Your Social Sec	urity Number					
YASWANTH KRISHNA CHAKKA	775-35-626	5					
Spouse's Name	A Spouse's Social						
Part I Tax Return Information	A Spouse	B Yourself					
1. Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)		61881.					
2. Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		61881.					
3. Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		56451.					
4. Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		2988.					
5. Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		2989.					
6. Amount you Owe (Form 760CG, Line 35; Form 760PY, Line 35; Form 763, Line 35)							
7. Refund (Form 760CG, Line 36; 760PY, Line 36; Form 763, Line 36)		1.					
Part II Declaration of Taxpayer and Signature Authorization Under penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying s							
December 31, 2020, and to the best of my knowledge and belief, it is true, correct and complete. I further declare that the information I provided to my Electronic Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security number or individual tax identification number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If I am filing a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Provider to transmit my complete return to Virginia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, the direct deposit of my refund or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.							
Taxpayer's e-File PIN: check one box only							
I authorize the ERO named below to enter my e-File PIN 5 6 2 6 0 as my signature on my 2020 e-fil Do not enter all zeros	ed Virginia individual inco	ome tax return.					
GLOBAL TAXES LLC							
ERO Firm Name I will enter my e-File PIN as my signature on my 2020 e-filed Virginia individual income tax return. Check this box and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	only if you are entering	your own e-File PIN					
Your Signature Date							
Spouse's e-File PIN: check one box only							
I authorize the ERO named below to enter my e-File PIN as my signature on my 2020 e-fil Do not enter all zeros	ed Virginia individual inco	ome tax return.					
ERO Firm Name							
I will enter my e-File PIN as my signature on my 2020 e-filed Virginia individual income tax return. Check this box and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	only if you are entering	your own e-File PIN					
Spouse's Signature Date							
Part III Certification and Authentication – Practitioner PIN Method Only							
ERO's EFIN/PIN: Enter your six-digit EFIN followed by your five digit self-selected PIN. 5 8 7 2 7 8 6	1989						
Do not enter all zeros I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2020 Virginia individual income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Virginia's publication Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2020). EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.							
above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Electronic Filers of Individual Income Tax Returns (Tax Year 2020). EROs may sign the form using a rubber stamp, mec	Virginia's publication Ha	ndbook for					

SCHEDULE E			Supplemental Income and Loss									OMB No. 1545-0074		
(Form	1040)	(From re	om rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)									<b>20</b>		
Donartm	nent of the Treasury		► Atta	ch to Form 1040	), 1040	-SR, 104	0-NR,	or 1041.						
	Revenue Service (99)		► Go to www.irs.g	ov/ScheduleE f	or inst	ructions	and th	e latest i	nformation	<b>.</b>	Attach Seque	ence No. <b>13</b>		
Name(s	) shown on return									Your soci	al securit	y number		
YASV	VANTH KRISH	NA CHAK	KKA							775-3	5-626	0		
Par			rom Rental Real		-		-			÷ .				
	Schedule	C. See inst	tructions. If you are a	an individual, rep	ort farr	n rental i	ncome	or loss fr	om Form 4	835 on page	2, line 4	0.		
A Di	d you make any	payments	in 2020 that would	d require you to	o file F	orm(s) 1	099? \$	See instr	uctions .		. 🗆 Y	res 🛛 No		
B If	"Yes," did you o	or will you	file required Form	s) 1099?							. 🗆 Y	res 🗌 No		
1a			ch property (street											
Α	BRODIPET	5/18 GU	JNTUR TELANGA	ANA IN 5220	02									
В														
С														
1b	Type of Pro	perty 2	2 For each rental	real estate pro	perty l	sted		Fair	Rental	Persona	l Use	QJV		
	(from list be	elow)	2 For each rental above, report the personal use data	he number of fa	ir rent	al and		C	ays	Day	s	QUV		
Α	3		if you meet the	requirements to	o file a	sa	Α		365		0			
В			qualified joint v	enture. See inst	tructio	ns.	В							
С							С							
Туре	of Property:													
1 Sin	gle Family Resid	dence	3 Vacation/Shor	t-Term Rental	5 La	nd		7 Self-	Rental					
2 Mu	Iti-Family Reside	ence	4 Commercial		6 Ro	yalties		8 Othe	r (describe	)				
Incon	ne:			Properties:			Α		E	3		С		
3	Rents received	1t			3			350.						
4	Royalties recei	ived			4									
Expe	nses:													
5	Advertising .				5									
6	Auto and trave	el (see inst	ructions)		6			350.						
7	Cleaning and r	maintenan			7			650.						
8	Commissions.				8									

	2 Multi-Family Residence 4 Commercial		6 Royalties 8 Other (describe)						
Income: Properties:			A		В			С	
3	Rents received		3	3	50.				
4	Royalties received .		4						
Expenses:									
5	Advertising		5						
6	Auto and travel (see in	nstructions)	6	3	50.				
7	Cleaning and maintenance		7	6	50.				
8	Commissions		8						
9	Insurance		9						
10	Legal and other professional fees		10						
11	Management fees		11	6	50.				
12	Mortgage interest paid	d to banks, etc. (see instructions)	12						
13	Other interest		13	4,5	00.				
14	Repairs		14		50.				
15	Supplies		15	6	50.				
16	Taxes		16						
17	Utilities		17	6	50.				
18	Depreciation expense	or depletion	18						
19			19						
20	Total expenses. Add lines 5 through 19		20	8,1	00.				
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If							
		nstructions to find out if you must							
	file Form 6198		21	-7,750.					
22		estate loss after limitation, if any,							
		structions)	22		· · ·		)(		)
23a	Total of all amounts reported on line 3 for all rental prope				23a	35	0.		
b	Total of all amounts reported on line 4 for all royalty proper				23b		_		
С	Total of all amounts reported on line 12 for all properties				23c		_		
d	Total of all amounts reported on line 18 for all properties						_		
е	Total of all amounts reported on line 20 for all properties <b>23e</b> 8, .								
24	Income. Add positive amounts shown on line 21. Do not include any losses						24		
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here .						25 (		7,750.)
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								
		0), line 5. Otherwise, include this an	moun	t in the total on li	ne 41	on page 2 .	26		-7,750.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2020