

Filing Status Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW)
 Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

Your first name and middle initial DINESH BABU	Last name BALMURI	Your social security number 835-18-7676
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. 6422 LOVE DR		Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. IRVING	State TX	
Foreign country name	Foreign province/state/county	
Apt. no.		ZIP code 75039
Foreign postal code		

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? Yes No

Standard Deduction **Someone can claim:** You as a dependent Your spouse as a dependent
 Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** Were born before January 2, 1956 Are blind **Spouse:** Was born before January 2, 1956 Is blind

	(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see instructions):
					Child tax credit
If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

	1 Wages, salaries, tips, etc. Attach Form(s) W-2		1	72,306.
Attach Sch. B if required.	2a Tax-exempt interest	2a		
	3a Qualified dividends	3a		
	4a IRA distributions	4a		
	5a Pensions and annuities	5a		
	6a Social security benefits	6a		
	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>		7	1,108.
	8 Other income from Schedule 1, line 9		8	-5,720.
	9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ▶		9	67,694.
Standard Deduction for— • Single or Married filing separately, \$12,400 • Married filing jointly or Qualifying widow(er), \$24,800 • Head of household, \$18,650 • If you checked any box under <i>Standard Deduction</i> , see instructions.	10 Adjustments to income:			
	a From Schedule 1, line 22	10a	2,000.	
	b Charitable contributions if you take the standard deduction. See instructions	10b		
	c Add lines 10a and 10b. These are your total adjustments to income ▶		10c	2,000.
	11 Subtract line 10c from line 9. This is your adjusted gross income ▶		11	65,694.
	12 Standard deduction or itemized deductions (from Schedule A)		12	12,400.
	13 Qualified business income deduction. Attach Form 8995 or Form 8995-A		13	
	14 Add lines 12 and 13		14	12,400.
	15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-		15	53,294.

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	7,511.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	7,511.
19	Child tax credit or credit for other dependents	19	
20	Amount from Schedule 3, line 7	20	
21	Add lines 19 and 20	21	
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	7,511.
23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	0.
24	Add lines 22 and 23. This is your total tax	24	7,511.
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	10,045.
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	10,045.
26	2020 estimated tax payments and amount applied from 2019 return	26	
27	Earned income credit (EIC) NO	27	
28	Additional child tax credit. Attach Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Recovery rebate credit. See instructions	30	1,800.
31	Amount from Schedule 3, line 13	31	
32	Add lines 27 through 31. These are your total other payments and refundable credits	32	1,800.
33	Add lines 25d, 26, and 32. These are your total payments	33	11,845.

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	4,334.
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	4,334.
b	Routing number 0 2 1 2 0 0 3 3 9		
c	Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number 3 8 1 0 4 1 1 3 2 5 4 6		
36	Amount of line 34 you want applied to your 2021 estimated tax	36	

Amount You Owe

37	Subtract line 33 from line 24. This is the amount you owe now	37	
Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.			
38	Estimated tax penalty (see instructions)	38	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. No

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation SOFTWARE ENGINEER	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
Phone no.	Email address		

Paid Preparer Use Only

Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM	Preparer's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM	Date 04/14/2021	PTIN P02082703	Check if: <input type="checkbox"/> Self-employed
Firm's name GLOBAL TAXES LLC	Firm's address 2530 Pebble Creek Ln Cumming GA 30041			Phone no. (678) 965-9522
Firm's EIN				30-1017196

- If you have a qualifying child, attach Sch. EIC.
- If you have nontaxable combat pay, see instructions.

**SCHEDULE 1
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

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

OMB No. 1545-0074

2020
Attachment
Sequence No. **01**

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

Your social security number
835-18-7676

Part 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	-5,720.
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	-5,720.

Part 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 ▶ _____		
c	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	2,000.
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	2,000.

SCHEDULE D
(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

2020

Attachment
Sequence No. **12**

Department of the Treasury
Internal Revenue Service (99)

▶ **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.**

Name(s) shown on return

DINESH BABU BALMURI

Your social security number

835-18-7676

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? **Yes** **No**

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
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	42,112.	41,015.	11.	1,108.
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back				1,108.

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 lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
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 Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13 Capital gain distributions. See the instructions				13
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 ()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on the back				15

Part III Summary

<p>16 Combine lines 7 and 15 and enter the result</p> <ul style="list-style-type: none"> • 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 line 22. • 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. 	16	1,108.
<p>17 Are lines 15 and 16 both gains?</p> <p><input type="checkbox"/> Yes. Go to line 18.</p> <p><input checked="" type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.</p>		
<p>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 ▶</p>	18	
<p>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 ▶</p>	19	
<p>20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952?</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.</p>		
<p>21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:</p> <ul style="list-style-type: none"> • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) } <p>Note: When figuring which amount is smaller, treat both amounts as positive numbers.</p>	21 ()	
<p>22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?</p> <p><input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.</p> <p><input checked="" type="checkbox"/> No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.</p>		

Sales and Other Dispositions of Capital Assets

Department of the Treasury
Internal Revenue Service

▶ 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.

Name(s) shown on return

Social security number or taxpayer identification number

DINESH BABU BALMURI

835-18-7676

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.

Part I 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.

- (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

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	Robinhood Securities LLC	01/01/20	12/31/20	41,881.	40,764.	W	11.	1,128.
	APEX CLEARING	01/01/20	12/31/20	231.	251.			-20.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your 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) ▶

	42,112.	41,015.	11.	1,108.
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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.

SCHEDULE E
(Form 1040)

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

2020

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Attachment
Sequence No. **13**

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

Name(s) shown on return

Your social security number

DINESH BABU BALMURI

835-18-7676

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.

A Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions Yes No

B If "Yes," did you or will you file required Form(s) 1099? Yes No

1a	Physical address of each property (street, city, state, ZIP code)				
A	2-56/1/23, GREEN HOMES THEEGALAGUTTAPALLE KARIMNAGAR, TELANGANA IN 505001				
B					
C					
1b	Type of Property (from list below)	2 For each rental real estate property listed 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 qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	3		365	0	<input type="checkbox"/>
B					<input type="checkbox"/>
C					<input type="checkbox"/>

Type of Property:

- 1 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:		A	B	C
3	Rents received	3		470.		
4	Royalties received	4				
Expenses:						
5	Advertising	5				
6	Auto and travel (see instructions)	6				
7	Cleaning and maintenance	7		1,000.		
8	Commissions.	8				
9	Insurance	9				
10	Legal and other professional fees	10				
11	Management fees	11		1,250.		
12	Mortgage interest paid to banks, etc. (see instructions)	12				
13	Other interest.	13				
14	Repairs.	14		1,460.		
15	Supplies	15		1,280.		
16	Taxes	16				
17	Utilities	17		1,200.		
18	Depreciation expense or depletion	18				
19	Other (list) ▶	19				
20	Total expenses. Add lines 5 through 19	20		6,190.		
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		-5,720.		
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		(-5,720.)	()	()
23a	Total of all amounts reported on line 3 for all rental properties	23a			470.	
b	Total of all amounts reported on line 4 for all royalty properties	23b				
c	Total of all amounts reported on line 12 for all properties	23c				
d	Total of all amounts reported on line 18 for all properties	23d				
e	Total of all amounts reported on line 20 for all properties	23e			6,190.	
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		(5,720.)		
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				-5,720.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2020

Tuition and Fees Deduction

▶ **Attach to Form 1040 or 1040-SR.**
▶ **Go to www.irs.gov/Form8917 for the latest information.**

Name(s) shown on return DINESH BABU BALMURI	Your social security number 835-18-7676
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Use this form for qualified tuition and fees paid in 2018, 2019, or 2020, and later years if legislation extends the deduction (see instructions). File a separate Form 8917 for each year after 2017 for which you qualify to take the deduction.

You **can't** take both an education credit from Form 8863 and the tuition and fees deduction from this form for the **same student** for the same tax year.

- Before you begin:**
- ✓ To see if you qualify for this deduction, see *Who Can Take the Deduction* in the instructions below.
 - ✓ If you file Form 1040 or 1040-SR, figure any write-in adjustments.
 - For 2018: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040), line 36.
 - For 2019: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22.
 - For 2020 and later years: Figure any write-in adjustments for Schedule 1 (Form 1040 or 1040-SR); see the Instructions for Forms 1040 and 1040-SR.

1	(a) Student's name (as shown on page 1 of your tax return)	(b) Student's social security number (as shown on page 1 of your tax return)	(c) Adjusted qualified expenses (see instructions)				
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">First name</td> <td style="width: 50%; padding: 2px;">Last name</td> </tr> <tr> <td style="padding: 2px;">DINESH BABU</td> <td style="padding: 2px;">BALMURI</td> </tr> </table>	First name	Last name	DINESH BABU	BALMURI	835-18-7676	7,200.
First name	Last name						
DINESH BABU	BALMURI						
2	Add the amounts on line 1, column (c), and enter the total		7,200.				
3	Enter the amount from your "total income" line of Form 1040 or 1040-SR		67,694.				
4	<ul style="list-style-type: none"> • For 2018: Enter the total of the amounts on your 2018 Schedule 1 (Form 1040), lines 23 through 33, plus any write-in adjustments you entered on the dotted line next to Schedule 1 (Form 1040), line 36. • For 2019 and 2020: Enter the total of the amounts on your 2019 Schedule 1 (Form 1040 or 1040-SR), lines 10 through 20, plus any write-in adjustments you entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22. • For later years: See www.irs.gov/Form8917 to find out if the line references above for 2019 have changed 						
5	Subtract line 4 from line 3.* If the result is more than \$80,000 (\$160,000 if married filing jointly), stop ; you can't take the deduction for tuition and fees <small>* If you're filing Form 2555, 2555-EZ, or 4563, or you're excluding income from Puerto Rico, see <i>Effect of the Amount of Your Income on the Amount of Your Deduction</i> in Pub. 970 to figure the amount to enter on line 5.</small>		67,694.				
6	Tuition and fees deduction. Is the amount on line 5 more than \$65,000 (\$130,000 if married filing jointly)? <input checked="" type="checkbox"/> Yes. Enter the smaller of line 2, or \$2,000. } <input type="checkbox"/> No. Enter the smaller of line 2, or \$4,000. }		2,000.				

Also enter this amount on line 21 of the 2019 and 2020 Schedule 1 (Form 1040 or 1040-SR), or line 34 of the 2018 Schedule 1 (Form 1040). See www.irs.gov/Form8917 to find out if the line references above for 2019 have changed.

Nonresident & part-year resident Wisconsin income tax

For the year Jan. 1-Dec. 31, 2020, or other tax year beginning _____, 2020 ending _____, 20__.

Check here if this is an amended return [] Complete form using BLACK INK

NOTE

DO NOT STAPLE

PAPER CLIP withholding statements here

Personal information section including name (BALMURI, DINESH BABU), social security number (835187676), address (6422 LOVE DR, IRVING, TX 75039), and filing status (Single).



Resident status section with checkboxes for Full-year resident, Nonresident of Wisconsin (state TX), and Part-year resident.

Note: Complete residence questionnaire, page 61

PAPER CLIP check or money order here

Income tax table with 16 rows. Columns include Income description, Federal column (A), and Wisconsin column (B). Total federal income is 67,694.00 and total Wisconsin income is 50,566.00.

I-0501 (R. 02-21)

Adjustments to Income		A. Federal column	B. Wisconsin column
17	Educator expenses (see page 25) . . . . .	.00	.00
18	Certain business expenses of reservists, performing artists, and fee-basis government officials (see page 25) . . . . .	.00	.00
19	Health savings account deduction (see page 26) . . . . .	.00	.00
20	Moving expenses for members of the Armed Forces (see page 26) . . . . .	.00	.00
21	Deductible part of self-employment tax (see page 26) . . . . .	.00	.00
22	Self-employed SEP, SIMPLE, and qualified plans (see page 26) . . . . .	.00	.00
23	Self-employed health insurance deduction (see page 27) . . . . .	.00	.00
24	Penalty on early withdrawal of savings (see page 28) . . . . .	.00	0.00
25	Alimony paid (see page 28) . . . . .	.00	.00
26	IRA deduction (see page 29) . . . . .	.00	.00
27	Student loan interest deduction (see page 29) . . . . .	.00	.00
28	Tuition and fees (see page 29)	Not deductible for Wisconsin	
29	Other adjustments (see page 29). Enclose Schedule M if line 29b has an amount . . . . .	.00	.00
30	Total adjustments to income. Add lines 17 through 29 . . . . .	.00	0.00
Adjusted Gross Income			
31	Wisconsin income. Subtract line 30, column B from line 16, column B		50566.00
32	Federal income. Subtract line 30, column A from line 16, column A	67694.00	
33	Divide line 31 by line 32. Carry the decimal to four places. If amount on line 31 is more than amount on line 32, fill in 1.0000. (See page 30) . . . . .		.7470

Tax Computation			
34	Fill in the larger of Wisconsin income from line 31, column B or federal income from line 32, column A. But , if Wisconsin income from line 31 is zero or less, fill in 0 (zero)	34	67694.00
35a	If you (or your spouse) can be claimed as a dependent on anyone else's return, check here and see the "Exception" in the instructions for line 35c on page 31	35a	<input type="checkbox"/>
35b	Aliens (see page 31 to determine if you must check line 35b)	35b	<input type="checkbox"/>
35c	Find the standard deduction for amount on line 32 using table on page 50	35c	4833.00
36	Subtract line 35c from line 34. If line 35c is more than line 34, fill in 0 (zero)	36	62861.00
37	Exemptions (Caution: see page 31)		
a	Fill in exemptions allowed <u>1</u> x \$700	37a	700.00
b	Check if 65 or older <input type="checkbox"/> You + <input type="checkbox"/> Spouse = <input type="checkbox"/> x \$250	37b	.00
c	Add lines 37a and 37b	37c	700.00
38	Subtract line 37c from line 36. If line 37c is more than line 36, fill in 0 (zero)	38	62161.00
39	Tax (see table on page 52)	39	3376.00
40	Itemized deduction credit. Complete Schedule 1 (page 4, Form 1NPR)	40	.00
41	School property tax credits (part-year and full-year residents only)		
a	Rent paid in 2020—heat included <u>.00</u> } Find credit from table page 35	41a	.00
	Rent paid in 2020—heat not included <u>.00</u> }		
b	Property taxes paid on home in 2020 <u>.00</u> } Find credit from table page 36	41b	.00
42	Add credits on lines 40, 41a, and 41b	42	.00
43	Subtract line 42 from line 39. If line 42 is more than line 39, fill in 0 (zero)	43	3376.00
44	Fill in ratio from line 33	44	.7470
45	Multiply line 43 by ratio on line 44	45	2522.00



Name(s) shown on Form 1NPR DINESH BABU BALMURI	Your social security number 835187676
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46	Fill in amount from line 45	46	2522.00
47	Armed forces member credit. (Full-year Wisconsin residents only)	47	.00
48	Working families tax credit. (Full-year Wisconsin residents only)	48	.00
49	Married couple credit. Complete Schedule 2 (page 4, Form 1NPR)	49	.00
50	Nonrefundable credits from Schedule CR, line 34. Enclose Schedule CR	50	.00
51	Net income tax paid to another state. Enclose Schedule OS	51	.00
52	Add lines 47 through 51	52	.00
53	Subtract line 52 from line 46. If line 52 is more than line 46, fill in 0 (zero). This is your net tax	53	2522.00
54	Sales and use tax due on internet, mail order, or other out-of-state purchases (see page 39) If you certify that no sales or use tax is due, check here <input checked="" type="checkbox"/>	54	.00
55	Donations (decreases refund or increases amount owed)		
	a Endangered resources .00	e Military family relief .00	
	b Cancer research .00	f Second Harvest/Feeding Amer. .00	
	c Veterans trust fund .00	g Red Cross WI Disaster Relief .00	
	d Multiple sclerosis .00	h Special Olympics Wisconsin .00	
	Total (add lines a through h) →		55i .00
56	Penalties on IRAs, other retirement plans, MSAs, etc. (see page 41)	56	.00
57	Other penalties (see page 41)	57	.00
58	Add lines 53 through 57	58	2522.00

Payments and Credits

59	Wisconsin income tax withheld. Enclose readable withholding statements	59	2954.00
60	2020 Wisconsin estimated tax paid and amount applied from 2019 return	60	.00
61	Earned income credit. (Full-year Wisconsin residents only)		
	Number of qualifying children ▶		
	Federal credit ▶ .00 x % =	61	.00
62	Farmland preservation credit. a. Schedule FC, line 17	62a	.00
	b. Schedule FC-A, line 13	62b	.00
63	Repayment credit	63	.00
64	Homestead credit. (Full-year Wisconsin residents only)	64	.00
65	Eligible veterans and surviving spouses property tax credit	65	.00
66	Refundable credits from Schedule CR, line 40	66	.00
67	AMENDED RETURN ONLY – amount previously paid (see page 47)	67	.00
68	Add lines 59 through 67	68	2954.00
69	AMENDED RETURN ONLY – amount previously refunded (see page 47)	69	.00
70	Subtract line 69 from line 68	70	2954.00



Refund or Amount You Owe

Table with 5 rows: 71 Amount overpaid 432.00, 72 Refunded to you 432.00, 73 Applied to tax 0.00, 74 Amount you owe .00, 75 Underpayment interest .00

Third Party Designee: Do you want to allow another person to discuss this return with the department (see page 49)? Yes No. Includes fields for name, phone, and PIN.

Under penalties of law, I declare that this return and all attachments are true, correct, and complete to the best of my knowledge and belief.

Sign here: Your signature, Spouse's signature (if filing jointly, BOTH must sign), Date

Mail your return to: Wisconsin Department of Revenue. (if tax is due) PO Box 268 Madison WI 53790-0001. (if refund or no tax due) PO Box 59 Madison WI 53785-0001

Schedule 1 - Wisconsin Itemized Deduction Credit (see line 40 instructions)

Table with 9 rows: Medical and dental expenses, Interest paid, Gifts to charity, Casualty losses, Add lines 1 through 4, Wisconsin standard deduction, Subtract line 6 from line 5, Rate of credit is .05 (5%), Multiply line 7 by line 8.

Schedule 2 - Married Couple Credit May be claimed only when both spouses have earned income taxable by Wisconsin.

Table with 8 rows: Wages, salaries, tips, etc., Net profit or (loss) from self-employment, Combine lines 1 and 2, Add amounts on Form 1NPR, Subtract line 4 from line 3, Compare the amount in columns (A) and (B), Rate of credit is .03 (3%), Multiply line 6 by line 7.



Schedule I

Adjustments to Convert 2020 Federal Adjusted Gross Income and Itemized Deductions to the Amounts Allowable for Wisconsin

2020

Wisconsin
Department of Revenue

Enclose with Wisconsin Form 1 or Form 1NPR

Name(s) shown on Form 1 or Form 1NPR

Your social security number

DINESH BABU BALMURI

835187676

PART I – Federal Adjusted Gross Income

(Read instructions before completing Schedule I)

1	Fill in your 2020 federal adjusted gross income from line 11 of federal Form 1040 or 1040-SR	1	<u>65694.00</u>
2	Additions (enter all amounts as positive numbers):		
<u>a</u>	Deduction for tuition and fees	2a	<u>2000.00</u>
<u>b</u>	Discharge of indebtedness on principal residence	2b	<u>.00</u>
<u>c</u>	Federal depreciation and sec. 179 expense	2c	<u>.00</u>
<u>d</u>	Federal capital losses from line 7 of federal Form 1040 or 1040-SR	2d	<u>.00</u>
<u>e</u>	Federal ordinary losses from line 4 of federal Schedule 1 (Form 1040 or 1040-SR)	2e	<u>.00</u>
<u>f</u>	Wisconsin capital gains from line 7 of revised federal Form 1040 or 1040-SR	2f	<u>.00</u>
<u>g</u>	Wisconsin ordinary gains from line 4 of revised federal Schedule 1 (Form 1040 or 1040-SR)	2g	<u>.00</u>
<u>h</u>	Other _____	2h	<u>.00</u>
<u>i</u>	Other _____	2i	<u>.00</u>
<u>j</u>	Other _____	2j	<u>.00</u>
<u>k</u>	Total additions - Add lines 2a through 2j	2k	<u>2000.00</u>
3	Add lines 1 and 2k (see instructions)	3	<u>67694.00</u>
4	Subtractions (enter all amounts as positive numbers):		
<u>a</u>	Health savings account adjustment	4a	<u>.00</u>
<u>b</u>	Wisconsin depreciation and sec. 179 expense	4b	<u>.00</u>
<u>c</u>	Wisconsin capital losses from line 7 of revised federal Form 1040 or 1040-SR	4c	<u>.00</u>
<u>d</u>	Wisconsin ordinary losses from line 4 of revised federal Schedule 1 (Form 1040 or 1040-SR)	4d	<u>.00</u>
<u>e</u>	Federal capital gains from line 7 of federal Form 1040 or 1040-SR	4e	<u>.00</u>
<u>f</u>	Federal ordinary gains from line 4 of federal Schedule 1 (Form 1040 or 1040-SR)	4f	<u>.00</u>
<u>g</u>	Other _____	4g	<u>.00</u>
<u>h</u>	Other _____	4h	<u>.00</u>
<u>i</u>	Other _____	4i	<u>.00</u>
<u>j</u>	Total subtractions - Add lines 4a through 4i	4j	<u>.00</u>
5	Federal adjusted gross income as computed under the Internal Revenue Code in effect for Wisconsin (see instructions to determine the amount to fill in on line 5). Fill in here and on line 1 of Wisconsin Form 1 or line 32 of Form 1NPR. (Note: The above figures must also be used to complete Columns A and B for each of the lines 1 through 30 of Form 1NPR)	5	<u>67694.00</u>



PART II – Itemized Deductions

(Complete this part only for those federal itemized deductions which may be used in computing the Wisconsin itemized deduction credit.)

Who must complete Part II

This part should be completed only by individuals claiming the Wisconsin itemized deduction credit. Whenever adjustments have been made in Part I, federal itemized deductions which are based on federal adjusted gross income are affected. Part II must be completed to report the difference in the amount of the deduction based on the revised federal adjusted gross income. Part II must also be completed whenever specific items require adjustment.

1 Adjustments:	COL. I	COL. II
Description	Amount per 2020 federal return	Amount determined under IRC in effect for Wisconsin
<u>a</u> Medical Expense Deduction 1a	.00	.00
<u>b</u> Interest 1b	.00	.00
<u>c</u> Gifts to Charity 1c	.00	.00
<u>d</u> Other (<i>explain</i>) _____ 1d	.00	.00
<u>e</u> Other (<i>explain</i>) _____ 1e	.00	.00

The amounts in Col. II should be used to compute the Wisconsin itemized deduction credit (Schedule 1 of Form 1 or Form 1NPR).



Schedule WD

Wisconsin
Department of Revenue

Capital Gains and Losses

◆ Enclose with Wisconsin Form 1 or 1NPR ◆

2020

Name(s) shown on Form 1 or Form 1NPR

DINESH BABU BALMURI

Your social security number

835-18-7676

Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less

Note: Round all amounts (use a minus sign (-) for negative amounts)	(d) Proceeds (sales price)	(e) Cost or other basis	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or loss Subtract column (e) from column (d) and combine the result with column (g)
1a Amount from line 1a of Schedule D	.00	.00		.00
1b Amount from line 1b of Schedule D	42112.00	41015.00	11.00	1108.00
2 Amount from line 2 of Schedule D	.00	.00	.00	.00
3 Amount from line 3 of Schedule D	.00	.00	.00	.00
4 Short-term gain from Form 6252 and short-term gain or loss from Forms 4684, 6781, and 8824			4	.00
5 Net short-term gain or loss from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			5	.00
6 Adjustment from Wisconsin Schedule T (see Basis Difference in instructions)			6	.00
7 Short-term capital loss carryover from 2019 Wisconsin Schedule WD, line 34. Enter amount as a negative number			7	.00
8 Net short-term capital gain or loss. Combine lines 1a through 7 in column (h)			8	1108.00

Part II Long-Term Capital Gains and Losses – Assets Held More Than One Year

Note: Round all amounts (use a minus sign (-) for negative amounts)	(d) Proceeds (sales price)	(e) Cost or other basis	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or loss Subtract column (e) from column (d) and combine the result with column (g)
9a Amount from line 8a of Schedule D	.00	.00		.00
9b Amount from line 8b of Schedule D	.00	.00	.00	.00
10 Amount from line 9 of Schedule D	.00	.00	.00	.00
11 Amount from line 10 of Schedule D	.00	.00	.00	.00
12 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or loss from from Forms 4684, 6781, and 8824			12	.00
13 Net long-term gain or loss from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			13	.00
14 Capital gain distributions			14	.00
15 Adjustment from Wisconsin Schedule T (see Basis Difference in instructions)			15	.00
15a Adjustment from Wisconsin Schedule QI. Enter amount as a negative number			15a	.00
16 Long-term capital loss carryover from 2019 Wisconsin Schedule WD, line 39. Enter amount as a negative number			16	.00
17 Net long-term capital gain or loss. Combine lines 9a through 16 in column (h)			17	.00

Go on to Part III →



Name DINESH BABU BALMURI	Social Security Number 835-18-7676
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Part III Summary of Parts I and II (see instructions) - use a minus sign (-) for negative amounts.

18 Combine lines 8 and 17, and fill in the net gain or loss here (if line 18 is a loss, go to line 28)	18	1108.00
19 Fill in the smaller of line 17 or 18, or -0- if a loss or no entry on line 17	19	0.00
20 Fill in 30% of line 19	20	0.00
21 Fill in the amount of long-term capital gain from the sale of farm assets listed on Form 8949 and taxable to Wisconsin plus gain from the sale of farm assets that is included on line 12 or 13 of Schedule WD. If zero, skip lines 22 through 25 and fill in the amount from line 20 on line 26	21	.00
22 Gain included in line 17. Do not include any losses in this amount	22	.00
23 Divide line 21 by line 22. Carry the decimal to 4 places	23	
24 Multiply line 19 by the decimal amount on line 23	24	.00
25 Fill in 30% of line 24	25	.00
26 Add lines 20 and 25	26	0.00
27 Subtract line 26 from line 18	27	1108.00
28 If line 18 shows a loss, fill in the smaller of:		
(a) The loss on line 18,		
(b) \$500, or		
(c) Wisconsin ordinary income (see instructions)	28	.00

Note: When figuring whether a, b, or c is smaller, treat all numbers as if they are positive. If filing Form 1, complete Part IV. If filing Form 1NPR, fill in amount from line 27 or 28 on line 7, column B, of Form 1NPR.

Part IV Computation of Wisconsin Adjustment to Income (Do not complete this part if you are filing on Form 1NPR)

29 Adjustment (see instructions for Part IV and Schedule I adjustments)		
a Fill in gain from line 7 of federal Form 1040 or 1040-SR, or gain from line 2f of Schedule I, if filed (if a loss, fill in -0-)	29a	1108.00
b Fill in gain from Part III, line 27, (if blank, fill in -0-)	29b	.00
c If line 29b is more than 29a, subtract line 29a from line 29b. Fill in amount on line 2 of Schedule AD (Form 1)	29c	.00
d If line 29b is less than 29a, subtract line 29b from line 29a. Fill in amount on line 5 of Schedule SB (Form 1)	29d	.00
e Fill in loss from line 7 of federal Form 1040 or 1040-SR, as a positive amount or the loss from line 4c of Schedule I, if filed (if a gain, fill in -0-)	29e	0.00
f Fill in loss from Part III, line 28 as a positive amount	29f	.00
g If line 29f is more than 29e, subtract line 29e from line 29f. Fill in amount on line 5 of Schedule SB (Form 1)	29g	.00
h If line 29f is less than 29e, subtract line 29f from line 29e. Fill in amount on line 2 of Schedule AD (Form 1)	29h	.00

Part V Computation of Capital Loss Carryovers from 2020 to 2021 (Complete this part if the loss on line 18 is more than the loss on line 28.)

30 Fill in loss shown on line 8 as a positive amount. If none, fill in -0- and skip lines 31 through 34	30	.00
31 Fill in gain shown on line 17. If that line is blank or shows a loss, fill in -0-	31	.00
32 Subtract line 31 from line 30	32	.00
33 Fill in the smaller of line 28 or line 32, treating both as positive amounts	33	.00
34 Subtract line 33 from line 32. This is your short-term capital loss carryover from 2020 to 2021	34	.00
35 Fill in loss from line 17 as a positive amount. If none, fill in -0- and skip lines 36 through 39	35	.00
36 Fill in gain shown on line 8. If that line is blank or shows a loss, fill in -0-	36	.00
37 Subtract line 36 from line 35	37	.00
38 Subtract line 33 from line 28, treating both as positive amounts. (Note: If you skipped lines 31 through 34, fill in amount from line 28 as a positive amount.)	38	.00
39 Subtract line 38 from line 37. This is your long-term capital loss carryover from 2020 to 2021	39	.00

