

Department of the Treasury-Internal Revenue Service

Amended U.S. Individual Income Tax Return

(Rev. Ja			u ule	latest mor	mation	ı.		
		2017 🗌 2016						
Other	year. Enter one: calendar year 2020 or fiscal y	ear (month and year e	endec	l):				
Your fire	t name and middle initial	Last name				Your socia	I security	y number
NARA	AYANA RAO	KATTA	675-63-2862					52
lf joint re	eturn, spouse's first name and middle initial	Last name				Spouse's s	ocial se	curity number
Current	home address (number and street). If you have a P.O. box, see instru	uctions.		Apt. no.		Your phone	number	
	6 BRISTOL CREEK DR			201		(770)		324
	vn or post office, state, and ZIP code. If you have a foreign address,	also complete spaces belo	w. See			(770)	555 1	.521
	RISVILLE NC 27560							
	country name	Foreign province/stat		tv		Fore	ign posta	al code
roroigii			0,00011	Ly .			ign poor	
chang status	ded return filing status. You must check one box eving your filing status. Caution: In general, you can't c from a joint return to separate returns after the due d gle \Box Married filing jointly \Box Married filing separate	hange your filing late.	ret	18 return turn, leave	s only blank.	, exempt See instru). If an ctions.	pending a 2019 Deusehold (HOH)
	checked the MFS box, enter the name of spouse. If	• • •						
	n is a child but not your dependent. ►	,		,				1 1 1 1 3
	Use Part III on the back to explain any	changes		A. Original reported previously a	or as	B. Net cha amount of ir or (decrea	ncrease ise)-	C. Correct amount
Incor	ne and Deductions			(see instrue	ctions)	explain in l	Part III	
1	Adjusted gross income. If a net operating loss						.1.6	
•	included, check here		1		387.	2,	216.	80,603.
2	Itemized deductions or standard deduction		2		400.		0.	12,400.
3	Subtract line 2 from line 1		3	65,	987.	2,	216.	68,203.
4a	Exemptions (amended 2017 or earlier returns or complete Part I on page 2 and enter the amount from		4a					
b	Qualified business income deduction (amended 2018	or later returns only)	4b		0.		0.	0.
5	Taxable income. Subtract line 4a or 4b from line 3.	If the result is zero						
	or less, enter -0		5	65,	987.	2,	216.	68,203.
Tax L	iability							
6	Tax. Enter method(s) used to figure tax (see instruction	ions):						
	QDCGTW		6	10,2	296.		405.	10,701.
7	Credits. If a general business credit carryback is includ	led, check here 🕨 🗌	7		0.		0.	0.
8	Subtract line 7 from line 6. If the result is zero or less	s, enter -0	8	10,2	296.		405.	10,701.
9	Health care: individual responsibility (amended 201	8 or earlier returns						
	only). See instructions		9		Ο.		0.	
10	Other taxes		10		0.		0.	0.
11	Total tax. Add lines 8, 9, and 10		11	10,	296.		405.	10,701.
Paym								<u> </u>
12	Federal income tax withheld and excess social secu	rity and tier 1 RRTA				1	1	
	tax withheld. (If changing, see instructions.)		12	12,	223.		0.	12,223.
13	Estimated tax payments, including amount applied fro	m prior year's return	13		0.		0.	0.
14	Earned income credit (EIC)		14		0.		0.	0.
15	Refundable credits from: Schedule 8812 Form(s)							
	8863 8885 8962 or other (specify):		15	1.	462.	-:	222.	1,240.
16	Total amount paid with request for extension of time							
	tax paid after return was filed						16	0.
17	Total payments. Add lines 12 through 15, column C,						17	13,463.
	nd or Amount You Owe							
18	Overpayment, if any, as shown on original return or a	as previously adjusted	d by t	he IRS			18	3,389.
19	Subtract line 18 from line 17. (If less than zero, see in		-				19	10,074.
20	Amount you owe. If line 11, column C, is more than	-					20	627.
21	If line 11, column C, is less than line 19, enter the dif						21	<u> </u>
22	Amount of line 21 you want refunded to you			-			22	0.
23	Amount of line 21 you want applied to your (enter you			tax 23	.			
		·· /- 0000						

Part I Exemptions and Dependents

Complete this part **only** if any information relating to exemptions (to dependents if amending your 2018 or later return) has changed from what you reported on the return you are amending. This would include a change in the number of exemptions (of dependents if amending your 2018 or later return).

CAUTION	For amended 2018 or later returns only, leave lines 24, 28, and 29 blank. Fill in all other applicable lines. Note: See the Forms 1040 and 1040-SR, or Form 1040A, instructions for the tax year being amended. See also the Form 1040-X instructions.		A. Original number of exemptions or amount reported or as previously adjusted	B. Net change	C. Correct number or amount
24	Yourself and spouse. Caution: If someone can claim you as a dependent, you can't claim an exemption for yourself. If amending your 2018 or later return, leave line blank	24			
25	Your dependent children who lived with you	25			
26	Your dependent children who didn't live with you due to divorce or separation	26			
27	Other dependents	27			
28	Total number of exemptions. Add lines 24 through 27. If amending your2018 or later return, leave line blank	28			
29	Multiply the number of exemptions claimed on line 28 by the exemption amount shown in the instructions for line 29 for the year you are amending. Enter the result here and on line 4a on page 1 of this form. If amending your 2018 or later return, leave line blank	29			

30 List ALL dependents (children and others) claimed on this amended return. If more than 4 dependents, see inst. and 🗸 here 🕨 🗌

Dependents (see instructio	ns):			(d) ✓ if qualifies for (see instructions):				
(a) First name	Last name	(b) Social security number	(c) Relationship to you	Child tax credit	Credit for other dependents (amended 2018 or later returns only)			

Part II Presidential Election Campaign Fund

Checking below won't increase your tax or reduce your refund.

Check here if you didn't previously want \$3 to go to the fund, but now do.

Check here if this is a joint return and your spouse did not previously want \$3 to go to the fund, but now does.

Part III Explanation of Changes. In the space provided below, tell us why you are filing Form 1040-X.

► Attach any supporting documents and new or changed forms and schedules.

Remember to keep a copy of this form for your records.

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

Sign Here

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PTIN			Phone number	EIN
P02082703	Check if self-	employed	(678)965-9522	30-1017196
Print/type preparer's name		Firm's address	and ZIP code	
SYAM PRIYA RAM SAGAR GUPTA TALLAM		2530 Pel	bble Creek Ln Cum	ming GA 30041
Preparer's signature	Date	Firm's name (o	or yours if self-employed)	
SYAM PRIYA RAM SAGAR GUPTA TALLAM	03/27/2021	GLOBAL 7	TAXES LLC	
Paid Preparer Use Only				
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occu	Ipation	
•				
Your signature	Date	Your occupation	on	
•		SOFTWARE	E ENGINEER	

For forms and publications, visit *www.irs.gov.*

104		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		⁽⁹⁹⁾ Jrn 20	20	OMB No. 1545	-0074	IRS Use	Only	—Do not w	rite or staple	in this space.
Filing Status Check only one box.	lf yc	Single Married filing jointly Control Married filing jointly Control Married filing jointly Control Married Ma	ame of y	ed filing separate vour spouse. If ye				`	,		, ,	. , . ,
Your first name	e and m	iddle initial	Last nar	ne						Your so	cial securi	ty number
NARAYAN	A RA	0	KATT	A						675-	63-286	2
If joint return, s	spouse's	s first name and middle initial	Last nar	ne						Spouse'	s social se	curity number
3016 BR	ISTO	er and street). If you have a P.O. box, see L CREEK DR					2	pt. no. 201		Check ł	nere if you,	on Campaign , or your ntly, want \$3
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete sp	baces below.	Sta	ate	ZIP co					Checking a
MORRISV	ILLE				N	С	275	60		box bel	ow will not	t change
Foreign countr	y name		F	oreign province/st	ate/cour	nty	Foreig	n postal co	ode	your tax	c or refund.	
At any time du	uring 20	020, did you receive, sell, send, exch	nange, o	r otherwise acqu	uire any	financial intere	est in a	ny virtua	l cu	rrency?	Yes	X No
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur	n or you									
Age/Blindnes	s You	Were born before January 2, 1	956 🗋	Are blind	Spouse	e: 🗌 Was bo	rn befo	re Janua	ary 2	2, 1956	Is bl	lind
Dependent	s (see	instructions):		(2) Social sec	urity	(3) Relationsh	nip	(4) 🗸	if qu	ualifies fo	r (see instru	,
If more	(1) F	irst name Last name		number		to you		Child ta	ax cr	redit	Credit for ot	ther dependents
than four dependents,												
see instruction	IS ——											
and check												
here 🕨 📃												
Attack	1	Wages, salaries, tips, etc. Attach F	⁼ orm(s) V	V-2				· ·	•	. 1		85,048.
Attach Sch. B if	2a	Tax-exempt interest	2a		b	Faxable interes	t.			. 2b		1.
required.	<u>3a</u>	Qualified dividends	3a		b(Ordinary divide	nds .			. 3b	·	0.
) 4a	IRA distributions	4a		b	Faxable amoun	t		•	. 4b	·	
	5a	Pensions and annuities	5a		b	Faxable amoun	t		•	. 5b		
Standard	6a	Social security benefits	6a		b	Faxable amoun	t		• _	. 6b		
 Deduction for – Single or 	7	Capital gain or (loss). Attach Schee	dule D if	required. If not i	required	d, check here)		7		2,384.
Married filing	8	Other income from Schedule 1, lin	e9							. 8	- 1	-6,830.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your total	income	.			. 1	▶ 9		80,603.
 Married filing 	10	Adjustments to income:										
Qualifying	а	From Schedule 1, line 22				10	а					
widow(er), \$24,800	b	Charitable contributions if you take the standard deduction. See instructions 10b										
• Head of	с	Add lines 10a and 10b. These are	your tot	al adjustments	to inco	me			. 1	► 10o	2	
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	idjusted gross i	ncome				. 1	▶ 11	1	80,603.
 If you checked 	12	Standard deduction or itemized	deducti	ons (from Sched	dule A)					. 12		12,400.
any box under Standard	13	Qualified business income deducti	ion. Atta	ch Form 8995 oi	r Form 8	8995-A				. 13		
Deduction, see instructions.	14	Add lines 12 and 13								. 14		12,400.
	15	Taxable income. Subtract line 14	from line	e 11. If zero or le	ess, ente	er-0				. 15		68,203.
										•		1010

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

Form **1040** (2020)

16 Tar (see instructions). Check if any from Form(s): 1 □ 811 2 □ 4972 3 □	Form 1040 (2020))										Page	• 2
18 Add lines 16 and 17 19 10,701. 19 Child tax credit for other dependents 19 10,701. 20 Anount from Schedule 3, line 7 21 27 22 10,701. 23 0. 23 0. 23 0. 23 0. 23 0. 23 0. 23 0. 24 10,701. 23 0. 24 10,701. 23 0. 24 10,701. 25		16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 -	4972	3			16		_
19 Child tax credit or credit for other dependents 9 20 Amount form Schedule 3, line 7 21 21 Add lines 19 and 20 21 22 Subtract line 21 form line 18. If zero roless, enter -0 22 23 Other taxes, including self-employment tax, from Schedule 2, line 10 23 24 Add lines 22 and 23. This is your total tax 24 25 Federal income tax withheld form: 26 26 Other taxes, including self-employment tax 256 2000 estimated tax payments and amount applied from 2019 return. 26 26 2020 estimated tax payments and amount applied from 2019 return. 26 27 Earned income credit (EIC) No 27 28 Add lines 26.d, R.a. dtath Schedule 8812 28 29 28 Add lines 27 through 31. These are your total other payments and refundable credits 31 13, 463. 39 Recovery rebate credit. See instructions 30 1, 240. 34 2, 762. 36 Add lines 370, dta, and 28. Unstratit The 24 form 11.6 37 No 27 35 3 13, 463. 38 Add lines 27.dt rough		17	Amount from Schedule 2, lin	ie3							17		
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22 Subtract line 21 from line 18. If zero or less, enter -0		20	Amount from Schedule 3, lin	ie7							20		
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24 Add lines 22 and 23. This is your total tax ▶ 24 10,701. 25 Federal income tax withheld from:: 25a 12,223. b Form(s) 1099 25b 25b c Other forms (see instructions) 25b 25b c Other forms (see instructions) 25b 25b 27 Earned income credit [C10) NP 27 28 additional child tax credit. Attach Schedule 8812 28 29 American copportunity credit from Form 8863, line 8 28 29 American copportunity credit from Form 8863, line 8 28 20 Add lines 25d, 26, and 32. These are your total ther payments and refunded to your 10 and you want applied to your 2021 estimated tax 36 Amount for line 34 you want applied to your 2021 estimated tax 36 37 Subtract line 33 from line 24, This is the amount you ower not 37 30 2, 762. 38 Amount of line 34 you want applied t		22	Subtract line 21 from line 18	. If zero or less,	enter -0						22	10,701	
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See instructions. ►d Account number 7 5 3 5 6 7	neruna	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attache	ed, chec	k here			35a	2,762	
Account number (►b											
Amount You Owe For details on how to pay, see instructions. 37 37 38 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. 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. X Do you want to allow another person to discuss this return with the IRS? See instructions Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. X No Designee Do you want to allow another person to discuss this return and accompanying schedules and statements, and to the best of my knowledge an 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 Identify Protection PIN, enter it here (see inst.) ▶ Joint return? See instructions. Phone no. Email address Preparer's signature Date Pint O3/27/2021 P02082703 Self-employed Phone no. Email address Preparer's signature Date Pint O3/27/2021 P02082703 Self-employed Preparer's name GLOBAL TAXES LLC Pho	See instructions.	►d	Account number 7 5 3	5 6 7 5	5 6								
You Owe For details on how to pay, see instructions. 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. Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. X No Designee's name ▶ Phone no. ▶ On Note: Schedule 3, line 12e, and its instructions for details. No Sign Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge an belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Joint return? See instructions. Date Your occupation If the IRS sent you an Identify Protection PIN, enter it here (see inst.) ▶ Joint return? See instructions. Phone no. Email address Preparer's signature Date PTIN Check if: (see inst.) ▶ Check if: (see inst.) ▶ Paid Preparer Use Only Preparer's name STAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM SyAM PRIYA RAM SAGAR GUPTA TALLAM Phone no. (678) 965-9522 Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Phone no. (678) 965-9522		36	Amount of line 34 you want a	applied to your	2021 estimate	ed tax .	. 🕨	36					
For details on how to pay, see instructions. 38 2020. See Schedule 3, line 12e, and its instructions for details. Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions	Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe	now .				. 🕨	37		
how to pay, see instructions. 2202. See Schedule 3, life 122, and its instructions for details. Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions Third Party Designee's name ▶ Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. Image: No Sign Here Designee's name ▶ Phone name ▶ Phone no. ▶ Personal identification number (PIN) ▶ Image: No Joint return? See instructions. Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge an belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Joint return? See instructions. Spouse's signature. If a joint return, both must sign. Date Your occupation If the IRS sent you an Identify Protection PIN, enter it here (see inst.) ▶ If the IRS sent your spouse an Identify Protection PIN, enter it here (see inst.) ▶ Joint return? See instructions. Phone no. Email address Preparer's name Preparer's signature Date Pine 03/27/2021 P02082703 Self-employed Firm's name ▶ GLOBAL TAXES LLC Phone no. (678) 965-9522 Phone no. (678) 965-9522 Phone no. (678) 965-9522 <			Note: Schedule H and Sch	edule SE filers,	line 37 may r	not represe	ent all o	of the t	axes you	owe fo			
Instructions. 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 name ▶ Phone no. ▶ Personal identification number (PIN) ▶ No 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 an 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 If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶ Joint return? See instructions. Keep a copy for your records. Spouse's signature. If a joint return, both must sign. Date Spouse's occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶ Paid Preparer Preparer's name Preparer's signature Date Spouse's occupation Pate 03/27/2021 P1N Check if: P02082703 Self-employed Firm's name ▶ GLOBAL TAXES LLC Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Pinne no. (678) 965-9522			2020. See Schedule 3, line 1	2e, and its instru	uctions for det	ails.			-				
Designee instructions ✓ Yes. Complete below. ✓ No Designee's name Designee's name Phone no. Personal identification number (PIN) Image: 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 Joint return? See instructions. Keep a copy for your records. Date Your occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.) Your records. 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.) Your records. Phone no. Email address Preparer's name Preparer's signature Date PTIN Check if: YAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM Sy30/27/2021 P02082703 Self-employed Firm's name > GLOBAL TAXES LLC Phone no. (678) 965-9522 Firm's address > 2530		38	Estimated tax penalty (see in	nstructions) .			. 🕨	38					
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 Joint return? See instructions. Keep a copy for your records. Date Your occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶ Phone no. Email address Preparer's name Preparer's signature Date Spouse's occupation If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) ▶ Phone no. Email address Preparer's name Preparer's signature Date PTIN Check if: SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RA				person to disc	cuss this retu	rn with the	e IRS?	See				_	
name no. 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 Joint return? Date Your occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶ Spouse's signature. If a joint return, both must sign. Your records. Date Your occupation If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) ▶ Phone no. Email address Preparer's name Preparer's signature Date Date PTIN Check if: (see inst.) ▶ SYAM PRIYA RAM SAGAR GUPTA TALLAM Self-employed Firm's name ▶ GLOBAL TAXES LLC Phone no. (678) 965–9522 Firm's selN ▶ 30–1017196	Designee	ins	tructions							•		🔀 No	
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 Joint return? See instructions. Keep a copy for your records. Date Your occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶ Phone no. Email address Preparer SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIY													
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Keep a copy for your records. Phone no. Email address Phone no. Email address Preparer Use Only Preparer's name Preparer's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM O3/27/2021 Phone no. GLOBAL TAXES LLC Phone no. (678) 965-9522 Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's BIN ► 30-1017196									IEER	· ·	,		
your records. Phone no. Preparer's name Prepa		Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's o	occupatio	on					aro
Preparer Preparer's name Preparer's signature Date PTIN Check if: SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/27/2021 P02082703 Self-employed Firm's name ► GLOBAL TAXES LLC Phone no. (678) 965-9522 Phone no. (678) 965-9522 Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN ► 30-1017196													
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Preparer Use Only Firm's name ► GLOBAL TAXES LLC Phone no. (678) 965-9522 Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN ► 30-1017196		SYAM	PRIYA RAM SAGAR GUPTA TALLAM			GUPTA T	ALLAM	03/2	7/2021	P0208	32703	Self-employed	l
Use Only Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN ► 30-1017196								, -					
	Use Only				n Cummin	q GA 30	0041					. ,	
Go to www.irs.gov/Form1040 for instructions and the latest information. BAA REV 03/23/21 PRO Form 1040 (2020	Go to www.irs.go					-		RFV	03/23/21 PRC			Form 1040 (20	_

SCHEDULE	1
(Form 1040)	

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	al security number
	Attachment Sequence No. 01

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

Name(s) show	vn on F	orm 1040, 1040-SR, or 1040-NR	
NARAYANA	RAO	КАТТА	

Your social security num 675-63-2862

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	0.
2a	Alimony received	2 a	
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	-6,830.
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	-6,830.
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 03/23/21 PRO	Schedul	e 1 (Form 1040) 2020

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

20

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.

Attachment Sequence No. 12

20

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

Department of the Treasury

NARAYANA RAO KATTA Your social security number

675-63-2862

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?	🗌 Yes 🛛	X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting	your gain o	r loss.

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

lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustment to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, column	Part I,	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	33,295.	33,562.	2	78.	11.
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 (I	oss) from Forms 4	684, 6781, and 88	324	4	929.
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1		5	51.		
6	Short-term capital loss carryover. Enter the amount, if an 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 						991.

Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (see instructions)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I line 2, colum	from Part II,	(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 from Forms 4684, 6781, and 8824				11	1,393.
12 13	Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions				12 13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions				14	()
15	Net long-term capital gain or (loss). Combine lines 8a on the back .				15	1,393.
For F	Paperwork Reduction Act Notice, see your tax return instruction				Schedu	ile D (Form 1040) 2020

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 2,384.
	• 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.	
17	Are lines 15 and 16 both gains? Image: Second State Yes. Go to line 18.	
	No. Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. 	
	☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	 The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) 	21 ()
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 03/23/21 PRO

Schedule D (Form 1040) 2020

Form	8949
Form	8949

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

20

20

Attachment

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.

b, 2, 3, 8b, 9, and 10 of Schedule D. Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number
NARAYANA RAO KATTA	675-63-2862

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.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	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)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
Robinhood Securities LLC	11/12/20	12/12/20	33,295.	33,562.	W	278.	11.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your ne 2 (if Box B	33,295.	33,562.		278.	11.	

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.

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

SCHEDULE	Ε
(Form 1040)	

Department of the Treasury

...

Internal Revenue Service (99)

Supplemental Income and Loss

OMB No. 1545-0074

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.
 Go to www.irs.gov/ScheduleE for instructions and the latest information.

	0
Attachment Sequence No.	13

ivanie(s)	Showh on return						rour social s	security in	lumber
NARA	YANA RAO KATTA						675-63-	-2862	
Part	Income or Loss F	rom Rental Real Estate and Roy	alties	Note: If you	u are in th	e business of re	enting perso	nal prop	erty, use
	Schedule C. See ins	tructions. If you are an individual, repo	ort farm re	ental income	e or loss f	rom Form 4835	on page 2,	line 40.	
A Dic	you make any payments	in 2020 that would require you to	file Form	n(s) 1099?	See inst	ructions .		🗌 Ye	s 🛛 No
B If "	Yes," did you or will you	file required Form(s) 1099?						🗌 Ye	s 🗌 No
1a	Physical address of eac	ch property (street, city, state, ZIP	code)						
Α	1-77/1 ST COLONY	Y, SANDGAON KOUTALA ADI	LABAD,	TELANG	ANA IN	504299			
В									
С									
1b	Type of Property (from list below)	2 For each rental real estate prop above, report the number of fai personal use days. Check the 0 if you meet the requirements to qualified joint venture. See instr	erty liste r rental a	d nd	-	Rental F Days	Personal L Days	lse	QJV
Α	3	if you meet the requirements to	file as a	oniy A		365	С		
В		qualified joint venture. See insti	ructions.	В					
С				С					
Туре о	of Property:								
1 Sing	gle Family Residence	3 Vacation/Short-Term Rental	5 Land		7 Self-	Rental			
2 Mul	ti-Family Residence		6 Royal	ties	8 Othe	r (describe)			
Incom	ie:	Properties:		Α		В			С
3	Rents received		3		590.				
4	Royalties received		4						
Expen	ses:								
5			5						
6		tructions)	6						
7		псе	7	1	,250.				
8	Commissions		8						
9			9						
10		ional fees	10						
11			11	1	,350.				
12		o banks, etc. (see instructions)	12						
13	Other interest		13						
14			14		,650.				
15			15	1	,750.				
16			16						
17			17	1	,420.				
18		r depletion	18						
19	Other (list)		19						
20		es 5 through 19	20	1	,420.				
21		e 3 (rents) and/or 4 (royalties). If							
		structions to find out if you must	01	-6	,830.				
00	file Form 6198		21	-0	,030.				
22		state loss after limitation, if any,	22 (G	020)	()
23a	-	ructions)		-0,	830.) 23 a	1	590.)
23a b		orted on line 4 for all royalty prope			23a		590.		
c b		orted on line 12 for all properties	511105 .		230 23c				
d		orted on line 18 for all properties			230 23d				
e	-	orted on line 20 for all properties			23u	7	,420.		
24	-	mounts shown on line 21. Do not	tinclude	any losses		, , ,	24		
2 4 25	-	es from line 21 and rental real estate		-		al losses here			6,830.)
		e and royalty income or (loss).							
26		and line 40 on page 2 do not a							
		, line 5. Otherwise, include this an					26		-6,830.

Schedule E (Form 1040) 2020					Attachment Sequence I	lo. 13		Page 2	
Name(s) shown on return. Do not enter name and social se	e(s) shown on return. Do not enter name and social security number if shown on other side.						Your social security number		
NARAYANA RAO KATTA						675-	-63-286	52	
Caution: The IRS compares amounts reported									
Part II Income or Loss From Partner stock, or receive a loan repayment fro computation. If you report a loss from line 28 and attach Form 6198. See in	om an S co 1 an at-risk	orporation, you activity for w	u must cheo	k the box	x in column (e) on line	28 and	d attach th	e required basis	
27 Are you reporting any loss not allower passive activity (if that loss was not see instructions before completing the set of the s	reported of	on Form 858	32), or unre	eimburse	ed partnership expe	enses?	lf you ar		
28 (a) Name	i)	b) Enter P for partnership; S r S corporation	(c) Check foreign partnershi	if	(d) Employer identification number	(e) basis co	Check if omputation equired	(f) Check if any amount is not at risk	
A PROSHARES ULTRA BLOOMBERG CRUDE	OIL	P			26-2928476				
C									
D Passive Income and Loss				No	onpassive Income	and I	099		
	assive incom	i) No	onpassive los		(i) Section 179 exp			passive income	
	Schedule K-	1 17	see Schedule		deduction from Form			Schedule K-1	
Α								0.	
B C									
29a Totals b Totals								0.	
						30		0.	
31 Add columns (g), (i), and (j) of line 29b.						31	()	
32 Total partnership and S corporation			mbine line	s 30 and	31	32		0.	
Part III Income or Loss From Estate	es and I	rusts					(1-) [
33 A	(a) N	lame						nployer ion number	
B									
Passive Income an	d Loss				Nonpassive I	ncome	and Los	SS	
(c) Passive deduction or loss allowed (attach Form 8582 if required)		(d) Passive inco from Schedule I	-	(-)	Deduction or loss om Schedule K-1		()	icome from ule K-1	
<u>A</u>									
B 34a Totals									
b Totals									
35 Add columns (d) and (f) of line 34a .						35			
36 Add columns (c) and (e) of line 34b .						36	()	
37 Total estate and trust income or (los				 • Cond		37		lau	
Part IV Income or Loss From Real E			s inclusion fro						
38 (a) Name (b) Employer ide numbe		Schedu	les Q, line 2c nstructions)	(u)	Taxable income (net loss om Schedules Q, line 1b			me from s Q, line 3b	
39 Combine columns (d) and (e) only. Ent	er the res	ult here and	include in	the total	on line 41 below	39	1		
Part V Summary									
 40 Net farm rental income or (loss) from F 41 Total income or (loss). Combine lines 26, 32, 37 			•			40		-6,830.	
42 Reconciliation of farming and fishir			1	Juneaule			I	0,030.	
farming and fishing income reported on F (Form 1065), box 14, code B; Schedule K AD; and Schedule K-1 (Form 1041), box	Form 4835 (-1 (Form ⁻	5, line 7; Sche 1120-S), box	edule K-1 17, code	42					
43 Reconciliation for real estate professionals. I (see instructions), enter the net income or (los 1040, Form 1040-SR, or Form 1040-NR from al	f you were a s) you repo	a real estate protection	rofessional e on Form						
you materially participated under the passive ac				43					

6781 Form

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

Gains and Losses From Section 1256 Contracts and Straddles

► Go to www.irs.gov/Form6781 for the latest information. Attach to your tax return.

OMB No. 1545-0644 2020 Attachment Sequence No. 82

Identifying number

NARAYANA	RAO	KATTA	
Chock all app	licable	hovos	

	6/5-63-2862

Check all applicable boxes.	A Mixed straddle election	C Mixed straddle account election
See instructions.	B Straddle-by-straddle identification election	D Net section 1256 contracts loss election
Part I Section 1256 Co	ntracts Marked to Market	

	(a) Identification of account (b) (Loss) (c) Gai	n					
1	From Schedule K-1 2,	322.					
2	Add the amounts on line 1 in columns (b) and (c)	322.					
3	Net gain or (loss). Combine line 2, columns (b) and (c)	3	2,322.				
4	Form 1099-B adjustments. See instructions and attach statement	4					
5	Combine lines 3 and 4	5	2,322.				
	Note: If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions.						
6	If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to						
	be carried back. Enter the loss as a positive number. If you didn't check box D, enter -0	6	0.				
7	Combine lines 5 and 6	7	2,322.				
8	Short-term capital gain or (loss). Multiply line 7 by 40% (0.40). Enter here and include on line 4 of						
	Schedule D or on Form 8949. See instructions	8	929.				
9	Long-term capital gain or (loss). Multiply line 7 by 60% (0.60). Enter here and include on line 11 of						
	Schedule D or on Form 8949. See instructions	9	1,393.				
Par	Part II Gains and Losses From Straddles. Attach a separate statement listing each straddle and its components.						

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Sect	ion A–Losses From Strade	dles		1			1			
	(a) Description of property	(b) Date entered into or acquired	(c) Date closed out or sold	(d) Gross sales pric	e othe plus e	Cost or r basis expense sale	(f) Loss. If column (e more than (enter differen Otherwise enter -0-) is (d), nce. (c), (c), (c), (c), (c), (c), (c), (c),	nized on ing	(h) Recognized loss. If column (f) is more than (g), enter difference. Otherwise, enter -0
10										
11a	Enter the short-term portion of losses from line 10, column (h), here and include on line 4 of Schedule D or on Form 8949. See instructions							11a	()	
b				line 10, column (h), here and include on line 11 of Schedule						
Secti	ion B—Gains From Straddl	es								
	(a) Description of property		(b) Date entered into or acquired) Gross es price	(e) Cost or other basis plus expense of sale		(f) Gain. If column (d) is more than (e), enter difference. Otherwise, enter -0	
12										
13a	Enter the short-term portion of or on Form 8949. See instruct	•		olumn (f), h		iclude o	n line 4 of S	Schedule D	13a	
b	Enter the long-term portion of gains from line 12, column (f), here and include on line 11 of Schedule D or on Form 8949. See instructions								13b	
Part	III Unrecognized Gains	From Pos	itions He	d on Las	t Day of	Tax Ye	ar. Memo	entry only (s	see in	structions)
	(a) Description of property				(b) Date acquired	(c) F valu bus	air market ue on last siness day tax year(d) Cost c other basi as adjuste		or is	(e) Unrecognized gain. If column (c) is more than (d), enter difference. Otherwise, enter -0
14										