## Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

## IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID)		•		
Taxpayer's name	Social security	y numb	er	
NIHITH MANDAVA	748-08-	4115	;	
Spouse's name	Spouse's soci	al secu	rity numbe	r
Part I Tax Return Information — Tax Year Ending December 31,	 (Enter year you aı	re aut	horizing	.)
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.				
1 Adjusted gross income		1	78	3,310.
2 Total tax		2	10	,287.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	10	,452.
4 Amount you want refunded to you		4		165.
5 Amount you owe		5 s		
Part II Taxpayer Declaration and Signature Authorization (Be sure you get Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or an				
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution acconsyment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial in authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellatiousiness days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amend Electronic Funds Withdrawal Consent.	for rejection of the tra- e the U.S. Treasury ar- unt indicated in the ta- nstitution to debit the erminate the authoriza- on requests must be d in the processing of the payment. I furti-	ansmise and its d ax preparently to entry to tion. To receive the electors	sion, (b) the esignated aration so this according to the revoke of the control of	he reason Financial fitware for ount. This (cancel) a er than 2 ayment of that the
Taxpayer's PIN: check one box only				
X I authorize GLOBAL TAXES LLC to enter or ger	perate my PIN	4 1	1 5	as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent		ligits, but all zeros	asmy
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.				
Your signature ▶	te▶			
Spouse's PIN: check one box only				
I authorize to enter or ger	perate my DINI			as my
ERO firm name		er five c	ligits, but	asiny
signature on the income tax return (original or amended) I am now authorizing.	dor	't enter	all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.				
Spouse's signature ▶ Da	te ▶			
Practitioner PIN Method Returns Only—continue	below			
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.	-	3 6	1 9 8	3 9
	Don't ente	er all zei	ros	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I an requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Provide	n submitting this retu	rn in a	ccordance	
ERO's signature ▶ Da	te ▶			
ERO Must Retain This Form — See Instruction  Don't Submit This Form to the IRS Unless Requested				

## **£1040**

Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return

2020

OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly u checked the MFS box, enter the son is a child but not your dependent	name of									
Your first name	and m	iddle initial	Last na	me					Your	soci	ial security	number
NIHITH			MANI	MANDAVA						748-08-4115		
If joint return, s	pouse's	s first name and middle initial	Last na	me					Spou	se's	social seci	urity number
	•	er and street). If you have a P.O. box, se	e instructi	ons.				Apt. no.	- 1			n Campaign
16561 A					1.						ere if you, o filing ioint	or your ly, want \$3
	ost offi	ce. If you have a foreign address, also c	complete s	paces below.	Sta			code			0,	Checking a
TYLER			1.		T		-	5703			w will not o	change
Foreign country	/ name			Foreign province/state	/coun	ty	Fore	eign postal cod	e your	tax c	or refund.	Spouse
At any time du	ring 20	020, did you receive, sell, send, exc	change, c	or otherwise acquire	any	financial intere	est in	any virtual	currency	y?	Yes	X No
Standard Deduction		eone can claim:										
Age/Blindness	You	Were born before January 2,	1956	Are blind Sp	ouse	: Was bo	rn be	efore Januar	v 2, 195	6	☐ Is blir	nd
Dependents				(2) Social securit		(3) Relationsh					see instruc	tions):
If more	•	irst name Last name		number	,	to you		Child tax		- 1		er dependents
than four												
dependents,									]			
see instruction and check	s —								]			
here ►												
	1_	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1	8	3,345.
Attach	2a	Tax-exempt interest	2a		<b>b</b> T	axable interes	t			2b		412.
Sch. B if required.	За	Qualified dividends	3a	27.	<b>b</b> C	rdinary divide	nds			3b		35.
required.	4a	IRA distributions	4a		<b>b</b> T	axable amoun	t.			4b		
	5a	Pensions and annuities	5a		<b>b</b> T	axable amoun	t.			5b		
Standard	6a	Social security benefits	6a		b T	axable amoun	t.			6b		
Deduction for—	7	Capital gain or (loss). Attach Scho	edule D it	f required. If not req	uired	, check here		•		7		2,058.
Single or Married filing	8	Other income from Schedule 1, li	ne 9 .							8	_	7,540.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8. T	his is your <b>total inc</b>	ome				<b></b>	9	7	8,310.
Married filing	10	Adjustments to income:										
jointly or 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 <b>to</b> l	tal adjustments to	incor	ne			<b>•</b>	10c		
household, \$18,650	11	Subtract line 10c from line 9. This	s is your a	adjusted gross inc	ome				<b>•</b>	11	7	8,310.
If you checked	12	Standard deduction or itemized	d deduct	ions (from Schedul	e A)				. [	12	1	2,400.
any box under Standard	13	Qualified business income deduc	tion. Atta	ach Form 8995 or F	orm 8	995-A			. [	13		2.
Deduction, see instructions.	14	Add lines 12 and 13							. [	14		2,402.
	15	Taxable income. Subtract line 1	4 from lin	e 11. If zero or less	, ente	r-0				15	6	5,908.

Form 1040 (2020	0)									Page 2	
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			16	10,287.	
	17	Amount from Schedule 2, lin	ne 3						17		
	18	Add lines 16 and 17							18	10,287.	
	19	Child tax credit or credit for	other dependen	ts					19		
	20	Amount from Schedule 3, lin	ne 7						20		
	21	Add lines 19 and 20							21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	10,287.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .				23	0.	
	24	Add lines 22 and 23. This is	your <b>total tax</b>					. ▶	24	10,287.	
	25	Federal income tax withheld	from:							·	
	а	Form(s) W-2				25a	10	452.			
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c	,						25d	10,452.	
	26	2020 estimated tax payment							26	,	
<ul> <li>If you have a L qualifying child,</li> </ul>	27	Earned income credit (EIC)				27					
attach Sch. EIC.  If you have nontaxable	28	Additional child tax credit. A				28					
	29	American opportunity credit				29					
combat pay, see instructions.	30	Recovery rebate credit. See		*		30			1		
	31	Amount from Schedule 3. lir				31			1		
	32	,	Add lines 27 through 31. These are your total other payments and refundable credits								
	33	Add lines 25d, 26, and 32. T	•						32	10,452.	
	34	If line 33 is more than line 24							34	165.	
Refund	35a	Amount of line 34 you want				•	=	· ·	35a	165.	
Direct deposit?	⊳ b	Routing number 1 1 1				Checki		avings	33a	105.	
See instructions.	►d	Account number 4 8 8					iig	aviiiys			
	36					36	_				
Amarint		Amount of line 34 you want a							27		
Amount You Owe	37	Subtract line 33 from line 24		•					37		
For details on		Note: Schedule H and Sch	·	•		of the ta	axes you c	we for			
how to pay, see		2020. See Schedule 3, line 1	-								
instructions.	38	Estimated tax penalty (see in				38					
Third Party		you want to allow another	•				7 <b>V</b> 22 C2		halaur	X No	
Designee				Phone		. ▶ [	_ Yes. Co	•		≥ NO	
		signee's me ▶		no.				nai ideni er (PIN)	ification		
Sign	Un	der penalties of perjury, I declare t	hat I have examine		d accompanying scl	hedules ar	nd statemen	ts. and t	o the bes	st of my knowledge and	
		lief, they are true, correct, and com									
Here	Yo	ur signature		Date	Your occupation			If th	e IRS sei	nt you an Identity	
	k							- 1		IN, enter it here	
Joint return?	<b>b</b> -				SOFTWARE		EER	`	e inst.) ►		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupa	tion				nt your spouse an ection PIN, enter it here	
your records.									inst.) ▶	COLIOTT IIV, CIRCI II HER	
	———Ph	one no.		Email address							
-		eparer's name	Preparer's signat	l .		Date		PTIN		Check if:	
Paid		·	'		GIIDTA TAI.I.AN		0/2021	P0208	2703	Self-employed	
Preparer										678)965-9522	
Use Only		m's address > 2530 Pebb		n Cummin	a GA 30041				n's EIN ▶		
Co to ware to				ii Callilli			0/04/0: == -	FILL	I S LIIN		
GO TO WWW.Irs.go	ov/rorr	m1040 for instructions and the late	st information.		BAA	REV 0	3/01/21 PRO			Form <b>1040</b> (2020	

# SCHEDULE 1 (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2020
Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

NIHITH MANDAVA

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

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

Attachment Sequence No. 01 Your social security number

748-08-4115

Par	t 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	-7,540.
6	Farm income or (loss). Attach Schedule F	6	<u> </u>
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,		
Par	t II Adjustments to Income	9	-7,540.
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions)		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your <b>adjustments to income.</b> Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

### SCHEDULE D (Form 1040)

### **Capital Gains and Losses**

► 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.

2020

OMB No. 1545-0074

Attachment Sequence No. **12** 

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

NIHITH MANDAVA

748-08-4115

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) Form(s) 8949, Part I, combine the result (or other basis) whole dollars. with column (g) line 2. column (a) 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 . . . . . . . . . . . . . . . . . 17,392. 15,333. 2. 2,061. 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. 21. 25. Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . . . . . 7 2,057. 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 (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 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 Totals for all transactions reported on Form(s) 8949 with

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

1.

11

12

13

14

15

Schedule D (Form 1040) 2020 Page 2

### Part III **Summary** 2,058. 16 Combine lines 7 and 15 and enter the result 16 • 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 • 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? X 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 1. 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. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ 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.

## 8949 Form

Department of the Treasury

Internal Revenue Service

Part I

**Sales and Other Dispositions of Capital Assets** 

► 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.

2020 Attachment Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return
NIHITH MANDAVA

Social security number or taxpayer identification number

748-08-4115

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.

instructions). For long-term transactions, see page 2.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see

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 Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss). (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired disposed of (sales price) from column (d) and and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions ROBINHOOD CRYPTO LLC 01/09/20 03/30/20 260. 250. 10. 2,051. ROBINHOOD SECURITIES LLC 04/02/20 05/27/20 17,132. 15,083. W 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

**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.

17,392.

2,061.

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) ▶

15,333.

## 8949

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment Sequence No. 12A

OMB No. 1545-0074

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Internal Revenue Service NIHITH MANDAVA

Department of the Treasury

Social security number or taxpayer identification number

748-08-4115

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.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I 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 X (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss.

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below	If you enter an enter a co See the sep	amount in column (g), ode in column (f). parate 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	06/29/20	11/10/20	21.	25.			-4.	
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C)	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	21.	25.			-4.	

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** 

(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.

OMB No. 1545-0074

2020

Attachment

Attachment Sequence No. **13** 

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

Department of the Treasury

Your social security number

	TH MANDAVA								48-08-4		
Part	Income or Loss	From Rental Real Estate and Ro	yaltie	s Note	If you a	are in th	e business c	f rent	ing persona	l prope	erty, use
	Schedule C. See i	instructions. If you are an individual, repo	ort farr	m rental ir	ncome o	r loss fi	om Form 48	<b>35</b> or	n page 2, lir	e 40.	
A Dic	d you make any payme	nts in 2020 that would require you to	file F	orm(s) 1	099? Se	e instr	uctions .		[	Yes	⊠ No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?							[	Yes	☐ No
1a		each property (street, city, state, ZIF									
Α	AMRUTHALUR GUN	TUR DISTRICT ANDHRA PRAD	DESH	IN 52	2325						
В											
С											
1b	Type of Property	2 For each rental real estate prop	perty I	isted		Fair	Rental	Per	sonal Use	9	QJV
	(from list below)	above, report the number of fair personal use days. Check the	ir rent	al and			ays		Days		
Α	3	if you meet the requirements to	o file a	ıs a	Α		365		0		
В		qualified joint venture. See inst	ructio	ns.	В						
С					С						
Type o	of Property:										
	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd	7	' Self-	Rental				
	ti-Family Residence		6 Ro	yalties	8	Othe	r (describe)	)			
Incom	ie:	Properties:			Α		E	3		(	
3			3			350.					
4	Royalties received .		4								
Expen											
5	_		5								
6	•	nstructions)	6								
7	0	nance	7			940.					
8			8								
9			9								
10	_	ssional fees	10								
11	•		11			700.					
12		d to banks, etc. (see instructions)	12								
13			13								
14	•		14			250.					
15			15		۷, ـ	100.					
16			16		1 (	200					
17			17		Ι,	900.					
18	-	e or depletion	18								
19	Other (list)  Tatal expanses Add I	lines 5 through 10	19		7 (	200					
20	•	lines 5 through 19	20	-	/ , }	390.					
21		line 3 (rents) and/or 4 (royalties). If									
	file <b>Form 6198</b>	instructions to find out if you must	21		-7,5	540					
22		estate loss after limitation, if any,	-1		, , ,						
22	on Form 8582 (see in:		22	(	-7,5	۵۱ ۱	(		)(		)
23a	-	eported on line 3 for all rental prope		-		23a	\	3	50.		,
b		eported on line 4 for all royalty prope				23b					
C		eported on line 12 for all properties				23c					
d		eported on line 18 for all properties				23d					
e		eported on line 20 for all properties				23e		7,8	90.		
24		e amounts shown on line 21. <b>Do no</b>	<b>t</b> inclu					., ,	24		
25	•	sses from line 21 and rental real estate		-		nter tota	al losses her	е.	25 (	-	7,540.)
26		ate and royalty income or (loss).							- \		/
20		V, and line 40 on page 2 do not a									
		40), line 5. Otherwise, include this ar							26	-	-7,540.

**Qualified Business Income Deduction Simplified Computation** 

► Attach to your tax return.

▶ Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

Attachment Sequence No. 55

Name(s) shown on return NIHITH MANDAVA

Department of the Treasury

Internal Revenue Service

Your taxpayer identification number 748-08-4115

Note. You can claim the qualified business income deduction only if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$163,300 (\$326,600 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number		(c) Qualified business income or (loss)	
i					
ii					
iii					
iv					
v					
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2			
3	Qualified business net (loss) carryforward from the prior year	3 ( )			
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4			
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5		
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)				
	(see instructions)	<b>6</b> 8.			
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior	7 (			
8	year	1 ( )			
0	or less, enter -0	8 8.			
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	2.	
10	Qualified business income deduction before the income limitation. Add lines 5 and		10	2.	
11	Taxable income before qualified business income deduction	<b>11</b> 65,910.			
12		<b>12</b> 28.			
13	Subtract line 12 from line 11. If zero or less, enter -0	<b>13</b> 65,882.			
14	Income limitation. Multiply line 13 by 20% (0.20) $\cdot$		14	13,176.	
15	Qualified business income deduction. Enter the lesser of line 10 or line 14. Also				
	the applicable line of your return		15	2.	
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	( 0.	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a	•			
	zero, enter -0		17	( 0.)	

For the year Jan. 1-Dec. 31, 2020, or other tax year

_	
7	•
V.	•
,	· ·

Ch	eck here if an amended return	<b>.</b>	be	ginning _			, 2020 ending	, 20
'	r legal last name NDAVA	Legal first na			N	И.І.	Your social security number 748084115	
If a j	oint return, spouse's legal last name	Spouse's leg	jal first nar	me	N	Л.І.	Spouse's social security num	ber
l .	ne address (number and street). If you hav	e a PO Box, se	e page 11.	,	Apt. no.		Tax district	n either the name of the
1 1	or post office ∕′LER		State TX	Zip code 7570			1	d the county in which you
Fi	ling status Check ✓ below						X City	Village Town
	Single						City, village, or town ▶ MADISC	N
	_ Married filing joint return	Legal <b>last</b> r	ame				County of DANE	
_	Married filing separate return. Fill in spouse's SSN above and full name here	Legal first	name		N	И.І.		<b>er</b> See page 433619
	_ Head of household, NOT marri (see page 12).	II IIIQI	ried, fill in bove and	spouse's full name h	nere		Special conditions	
_							Form 804 filed with	return (see page 9)
Us	se BLACK Ink   Print number	s like this →	0123	4567	89 <u>N</u> c	o <u>t</u> like	e this → Ø147 ●	NO COMMAS; NO CENTS
1	Federal adjusted gross income (	see page 12	)					78310 <sub>.00</sub>
	Form W-2 wages included in I						_	
2	Total additions to income from S							.00
	Add lines 1 and 2						_	
4	Total subtractions from income f	rom Schedu	le SB, lir	ne 47. Ent	ter as a p	ositi	ve number 4	.00
5	Subtract line 4 from line 3. This i	s your Wisc	onsin inc	ome			5	78310.00
6	Standard deduction. See table of the someone else can claim you (or	on page 34, your spouse	OR as a dep		see page	 14 aı		3573 <sub>.00</sub>
7	Subtract line 6 from line 5. If line							74737.00
8	Exemptions (Caution: See page	ge 14)					-	
	<b>a</b> Fill in exemptions allowed			1	x \$700	8	3a 700 <sub>.00</sub>	
	<b>b</b> Check if 65 or older You							
	c Add lines 8a and 8b							700.00
9	Subtract line 8c from line 7. If line	e 8c is larger	than line	e 7, fill in (	0. This is	taxa	able income 9	74037 <sub>.00</sub>
10	Tax (see table on page 36)							4122.00



020	Form 1	Mame MTHT.	TH MANDAVA		2211	48084115	Page <b>2 Of 4</b>
					•		NO COMMAS; NO CENTS
11	Itemized	deduction credit.	Enclose Schedule	1, page 4		11	.00
12	Armed fo	rces member cre	dit (must be stationed	d outside U.S. See page 16) .		12	.00
13	School pi	roperty tax credit	t				
	a Rent pai	id in 2020 – heat inc	cluded	.00 Find credit from	n		
			included	.00 ∫ table page 18	. 13a	.00	
			e in 2020		<sup>n</sup> . <b>13b</b>	.00	
14	Working f	families tax credit	t (see page 19)		14	0 .00	
15	Married c	couple credit. End	lose Schedule 2, pa	age 4	15	.00	
16	Nonrefun	dable credits fror	n line 34 of Schedu	lle CR	16	.00	
17	Net incon	ne tax paid to and	other state. Enclose	e Schedule OS	17	.00	
18	Add lines	11 through 17				18 _	.00
19	Subtract I	line 18 from line 1	10. If line 18 is large	er than line 10, fill in 0. This	is your net t	ax <b>19</b> _	4122 .00
20	Sales and If you cer	d use tax due on tify that no sales	internet, mail order or use tax is due, c	r, or other out-of-state purc	hases (see	oage 22) <b>20</b> _ · · · <b>▶</b> _X_	.00
21	Donations	s (decreases refu	ınd or increases am	nount owed)			
	<b>a</b> Endanç	gered resources	.00	e Military family relief	· · · · · · <u> </u>	.00	
	<b>b</b> Cancer	r research	.00	f Second Harvest/Feedir	ng Amer	.00	
			.00	g Red Cross WI Disaste	er Relief	.00	
	<b>d</b> Multiple	e sclerosis		<b>h</b> Special Olympics Wis	sconsin	.00	
				Total (add line	es a through	h) <b>&gt; 21i</b>	.00
22	Penalties	on IRAs, retirem	ent plans, MSAs, e	tc. (see page 24)	.00	x .33 = <b>22</b>	.00
23	Other per	nalties (see page	24)			23	.00
24	Add lines	19, 20, 21i, 22 aı	nd 23			24	4122.00
25	Wisconsi	n tax withheld. E	nclose withholding	statements	25	4865.00	
26	2020 esti	mated tax payme	ents and amount ap	oplied from 2019 return	26	.00	
27	Federal			children	0.7	20	<b>NOTE:</b> You must use your 2020 earned income (see page 26).
				<u> </u>			
28	Farmland	l preservation cre		C, line 17		_	
			<b>b</b> Schedule F	C-A, line 13	28b	.00	



.00

Nam	ne(s) shown on Form 1		Your social se	curity number
N]	IHITH MANDAVA		748084	115
			NO CO	OMMAS; <u>NO</u> CENTS
30	Homestead credit. Enclose Schedule H or H-EZ	30	.00	
31	Eligible veterans and surviving spouses property tax cre	edit <b>31</b>	.00	
32	Refundable credits from Schedule CR, line 40. Enclose Sche	edule CR 32	.00	
33	AMENDED RETURN ONLY-Amounts previously paid (se	e page 29) <b>33</b>	.00	
34	Add lines 25 through 33	34	4865 .00	
35	AMENDED RETURN ONLY—Amounts previously refunded (see	ee page 30) <b>35</b>	.00	
36	Subtract line 35 from line 34			4865.00
37	If line 36 is larger than line 24, subtract line 24 from line This is the <b>AMOUNT YOU OVERPAID</b>		37	743.00
38	Amount of line 37 you want <b>REFUNDED TO YOU</b>			743.00
39	Amount of line 37 you want APPLIED TO YOUR 2021 ESTIMATED TAX	39	0.00	
40	If line 36 is smaller than line 24, subtract line 36 from lin This is the <b>AMOUNT YOU OWE</b> . Paper clip payment to		40	.00
41	Underpayment interest. Fill in exception code-See Sch. U Also include on line 40 (see page 31)	41	.00	
Thi Par Des		n the department <i>(see pa</i> Phone no. <b>▶</b>	Personal identification number (PIN)	ne following. X No



Paper clip copies of your federal income tax return and schedules to this return.

Assemble your return (pages 1-4) and withholding statements in the order listed on page 5.

### Sign here

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.

Your signature Spouse's signature (if filing jointly, BOTH must sign) Date Daytime phone 4097285178

I-010ai

## Do Not Submit Photocopies



### Schedule 1 - Itemized Deduction Credit (see page 15)

Name NIHITH MANDAVA

1	Medical and dental expenses from federal Schedule A (Form 1040 or 1040-SR). See instructions for exceptions.	1	.00
2	Interest paid from federal Schedule A (Form 1040 or 1040-SR). Do not include interest paid to purchase a second home located outside Wisconsin or a residence which is a boat. Also, do not include interest paid to purchase or hold U.S. government securities and interest from a tax-option (S) corporation if claimed as a subtraction	2	.00
<u>3</u>	Gifts to charity from federal Schedule A (Form 1040 or 1040-SR). See instructions for exceptions	3	.00
<u>4</u>	Casualty losses from federal Schedule A (Form 1040 or 1040-SR)	4	.00
<u>5</u>	Add lines 1 through 4	5	.00
6	Fill in your standard deduction from line 6 on page 1 of Form 1	6	.00
7	Subtract line 6 from line 5. If line 6 is more than line 5, fill in 0	7	0 .00
8	Rate of credit is .05 (5%)	8	x .05
9	Multiply line 7 by line 8. Fill in here and on line 11 on page 2 of Form 1	9	.00

You must submit this page with Form 1 if you claim either of these credits



### Schedule 2 – Married Couple Credit When Both Spouses Are Employed (see page 20)

When completing this schedule, be sure to fill in your income in column (A) and your spouse's income in column (B)

		(A) YOURSELF	(B) SPOUSE
1	Taxable wages, salaries, tips, and other employee compensation.  Do NOT include deferred compensation, interest, dividends, pensions, unemployment compensation, or other unearned income 1	.00	.00
2	Net profit or (loss) from self-employment from federal Schedules C, C-EZ, and F (Form 1040 or 1040-SR), Schedule K-1 (Form 1065), and any other taxable self-employment or earned income	.00	.00
3	Combine lines 1 and 2. This is earned income	.00	.00
4	Add the amounts from federal Form 1040 or 1040-SR, <b>Schedule 1</b> , lines 11, 15, and 19, plus repayment of supplemental unemployment benefits, and contributions to secs. 403(b) and 501(c)(18)(D) pension plans, included in line 22, and any Wisconsin disability income exclusion. Fill in the total of these adjustments that apply to you or your spouse's income	.00	.00
5	Subtract line 4 from line 3. This is qualified earned income.  If less than zero, fill in 0	.00	.00
6	Compare the amounts in columns (A) and (B) of line 5. Fill in the smaller amount here. If more than \$16,000, fill in \$16,000	6	.00
7	Rate of credit is .03 (3%)	7	x .03
8	Multiply line 6 by line 7. Fill in here and on line 15 on page 2 of Form 1	8	Do not fill in



# Schedule WD Wisconsin

## **Capital Gains and Losses**

♦ Enclose with Wisconsin Form 1 or 1NPR ◆

2020

Department of Revenue

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

NIHITH MANDAVA

Your social security number

748-08-4115

Pa	rt I Short-Term Capital Gains	and Losses – Asse	ts Held One Year o	or Less	
(	Note: Round all amounts fuse 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)
1 a	Amount from line 1a of Schedule D	.00	.00		.00
1 b	Amount from line 1b of Schedule D	17392.00	15333.00	2.00	2061.00
2	Amount from line 2 of Schedule D	.00	.00	.00	.00
3	Amount from line 3 of Schedule D	21.00	25.00	.00	-4.00
<u>4</u>	Short-term gain from Form 6252 and short	t-term gain or loss from	Forms 4684, 6781, and 8	8824 <b>4</b>	.00
<u>5</u>	Net short-term gain or loss from partnership	os, S corporations, estate	s, and trusts from Schedu	ule(s) K-1 5	.00
<u>6</u>	Adjustment from Wisconsin Schedule T (	see Basis Difference in i	instructions)	6	.00
7	Short-term capital loss carryover from 20 a negative number				.00
<u>8</u>	Net short-term capital gain or loss. C	ombine lines 1a through	7 in column (h)	8	2057.00
Pa	rt II Long-Term Capital Gains a	and Losses – Asset	ts Held More Than	One Year	
(	Note: Round all amounts (use a minus sign (-) for negative amounts)	(d) Proceeds (sales price)	Adjustm Proceeds Cost or gain or lo		(h) Gain or loss Subtract column (e) from column (d) and combine the result with column (g)
9 a	Amount from line 8a of Schedule D	.00	.00		.00
9 b	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
<u>12</u>	Gain from Form 4797, Part I; long-term ga from Forms 4684, 6781, and 8824				.00
<u>13</u>	Net long-term gain or loss from partnership	s, S corporations, estates	, and trusts from Schedu	le(s) K-1 13	.00
<u>14</u>	Capital gain distributions			14	1.00
<u>15</u>	Adjustment from Wisconsin Schedule T (	see Basis Difference in i	instructions)	15	.00
<u>15a</u>	Adjustment from Wisconsin Schedule QI	. Enter amount as a neg	ative number	15a	.00
<u>16</u>	Long-term capital loss carryover from 20 negative number				.00
<u>17</u>	Net long-term capital gain or loss. Co	mbine lines 9a through	16 in column (h)	17	1.00

Go on to Part III  $\rightarrow$ 



I-070i (R. 09-20) INTUIT REV 02/21/21 PRO

2020 Schedule WD Page 2 of 2

Name NIHITH MANDAVA	Social Security Number 748-08-4	1115
Part III Summary of Parts I and II (see instructions) - use a minus sign (-) f		1113
18 Combine lines 8 and 17, and fill in the net gain or loss here (if line 18 is a loss, go to line)		2058.00
19 Fill in the smaller of line 17 or 18, or -0- if a loss or no entry on line 17		
20 Fill in 30% of line 19		
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		
22 Gain included in line 17. Do not include any losses in this amount	.00	
23 Divide line 21 by line 22. Carry the decimal to 4 places		
24 Multiply line 19 by the decimal amount on line 23 24	.00	
<b>25</b> Fill in 30% of line 24	.00	
<b><u>26</u></b> Add lines 20 and 25	26	0.00
27 Subtract line 26 from line 18	27	2058.00
<b>28</b> If line 18 shows a loss, fill in the smaller of: (a) The loss on line 18,		
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.	e instructions) 28	.00
Part IV Computation of Wisconsin Adjustment to Income (Do not comple	te this part if you are filing o	n 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-)		
$\underline{\mathbf{c}}$ If line 29b is more than 29a, subtract line 29a from line 29b. Fill in amount on line 2 of So	chedule AD (Form 1) 29c	.00
₫ If line 29b is less than 29a, subtract line 29b from line 29a. Fill in amount on line 5 of Sch	nedule SB (Form 1) . <b>29d</b>	.00.
<u>e</u> 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-)	0.00	
f Fill in loss from Part III, line 28 as a positive amount	0.00	
g If line 29f is more than 29e, subtract line 29e from line 29f. Fill in amount on line 5 of Sch		.00
h If line 29f is less than 29e, subtract line 29f from line 29e. Fill in amount on line 2 of Scho	edule AD (Form 1) . <b>29h</b>	.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 thr	ough 34 <b>30</b>	.00
31 Fill in gain shown on line 17. If that line is blank or shows a loss, fill in -0	31	.00
<b>32</b> 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	o 2021 <b>34</b>	.00
35 Fill in loss from line 17 as a positive amount. If none, fill in -0- and skip lines 36 through	gh 39 <b>35</b>	.00
<b>36</b> Fill in gain shown on line 8. If that line is blank or shows a loss, fill in -0	36	.00
<b>37</b> Subtract line 36 from line 35		.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.)		.00
39 Subtract line 38 from line 37. This is your long-term capital loss carryover from 2020	to 2021 <b>39</b>	.00



## **£1040**

Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return

2020

OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly u checked the MFS box, enter the son is a child but not your dependent	name of									
Your first name	and m	iddle initial	Last na	ıme					You	r soc	cial security	y number
NIHITH			MANI	DAVA					74	8-0	08-4115	5
If joint return, spouse's first name and middle initial			Last na	ıme					Spo	use's	s social sec	urity number
	•	er and street). If you have a P.O. box, se	e instructi	ons.				Apt. no.	- 1			n Campaign
16561 A					1 -						ere if you, if filing ioint	or your tly, want \$3
	ost offi	ce. If you have a foreign address, also c	complete s	paces below.	Sta			code			0,	Checking a
TYLER			1.		T2		-	5703			w will not	change
Foreign country	/ name			Foreign province/state	count/	ty	Fore	eign postal cod	le you	rtax	or refund.	Spouse
At any time du	ring 20	020, did you receive, sell, send, exc	change, d	or otherwise acquire	any	financial intere	est in	any virtual	currenc	cy?	Yes	<b>⊠</b> No
Standard Deduction		eone can claim:										
Age/Blindness	You	Were born before January 2,	1956	Are blind Sp	ouse	: Was bo	rn be	efore Januar	v 2, 19	56	☐ Is bli	nd
Dependents			_	(2) Social securit		(3) Relationsh					(see instruc	ctions):
If more	•	irst name Last name		number			to you		credit	- 1		er dependents
than four									]	$\neg$		
dependents,									]			
see instruction and check	s —								]			
here ►									]			
	1_	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1	8	33,345.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t			2b		412.
Sch. B if required.	За	Qualified dividends	3a	27.	<b>b</b> C	rdinary divide	nds			3b		35.
required.	4a	IRA distributions	4a		b T	axable amoun	t.			4b		
	5a	Pensions and annuities	5a		b T	axable amoun	t.		. [	5b		
Standard	6a	Social security benefits	6a		b T	axable amoun	t.		. [	6b		
Deduction for—	7	Capital gain or (loss). Attach Sch	edule D i	f required. If not req	uired	, check here		•		7		2,058.
Single or Married filing	8	Other income from Schedule 1, li	ne 9 .							8	_	7,540.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8. T	This is your <b>total inc</b>	ome				•	9	7	78,310.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22				10	а					
widow(er), \$24,800	b	Charitable contributions if you tak	e the star	ndard deduction. Se	e insti	ructions 10	b					
Head of	С	Add lines 10a and 10b. These are	your <b>to</b> t	tal adjustments to	incor	me			•	10c	:	
household, \$18,650	11	Subtract line 10c from line 9. This	s is your a	adjusted gross inc	ome				•	11	7	78,310.
If you checked	12	Standard deduction or itemized	d deduct	ions (from Schedule	e A)				. [	12	1	2,400.
any box under Standard	13	Qualified business income deduc	tion. Atta	ach Form 8995 or Fo	orm 8	995-A			. [	13		2.
Deduction, see instructions.	14	Add lines 12 and 13							. [	14		2,402.
	15	Taxable income. Subtract line 1	4 from lin	e 11. If zero or less	ente	r-0			. [	15	6	55,908.

Form 1040 (2020	0)									Page l
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			. 16	10,287.
	17	Amount from Schedule 2, lin	ne 3						. 17	
	18	Add lines 16 and 17							. 18	10,287.
	19	Child tax credit or credit for	other dependent	ts					. 19	
	20	Amount from Schedule 3, lin	ne 7						. 20	
	21	Add lines 19 and 20							. 21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					. 22	10,287.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .				. 23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>						▶ 24	10,287.
	25	Federal income tax withheld	from:							
	а	Form(s) W-2				25a	10	, 45	2.	
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c							. 25d	10,452.
If you have a	26	2020 estimated tax payment							. 26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			' <sub>N</sub> o .	27				
If you have	28	Additional child tax credit. A	ttach Schedule	8812		28				
nontaxable combat pay,	29	American opportunity credit	from Form 8863	8, line 8		29				
see instructions.	30	Recovery rebate credit. See	instructions .			30				
	31	Amount from Schedule 3, lin	ne 13			31				
	32	Add lines 27 through 31. The	ese are your <b>tot</b> a	al other paym	ents and refund	able cr	edits		▶ 32	
	33	Add lines 25d, 26, and 32. These are your total payments								10,452.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	ınt you	overpaid		. 34	165.
Horana	35a	Amount of line 34 you want			3 is attached, che	ck here	e	▶ [	35a	165.
Direct deposit?	►b	Routing number 1 1 1 0 0 0 0 2 5 ▶ c Type: X Checking Savings								
See instructions.	►d	Account number 4 8 8	0 5 2 8	9 9 7 2	2 6					
	36	Amount of line 34 you want a	applied to your	2021 estimate	ed tax 🕨	36				
Amount	37	Subtract line 33 from line 24	. This is the <b>amo</b>	ount you owe	now				▶ 37	
You Owe		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for								
For details on how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details.								
instructions.	38	Estimated tax penalty (see in	nstructions) .		🕨	38				
<b>Third Party</b>		you want to allow another					_			
Designee	ins	structions				. ▶	Yes. Co	mple	te below.	× No
		signee's me ▶		Phone no. ▶			Perso numb		entification	
0:		der penalties of perjury, I declare t	hat I have examine		d accompanying col	aadulaa				at of my knowledge or
Sign		ief, they are true, correct, and com								
Here	Yo	ur signature		Date Your occupation			H	f the IRS se	nt you an Identity	
										IN, enter it here
Joint return?					SOFTWARE		NEER	-   '	see inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupa	tion				ent your spouse an
your records.	,								see inst.) ►	ection PIN, enter it her
		one no.		Email address				`	,,	
		eparer's name	Preparer's signat	l		Date		PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM			מווסדם דמו.ו.את				082703	Self-employed
Preparer		m's name ► GLOBAL TA		1011 DUQUE	COLIA IALLAN	1 03/	10/2021			(678)965-9522
Use Only		m's address > 2530 Pebb		n Cummin	~ CA 30041				Firm's EIN	
Co to warming =				ii Callilli		55:	1.00/04/01 55.5		IIII S EIIV	
GO TO WWW.Irs.go	JV/FOR	n1040 for instructions and the late	st information.		BAA	KE/	/ 03/01/21 PRO			Form <b>1040</b> (202

# SCHEDULE 1 (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2020
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

NIHITH MANDAVA

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

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

Your social security number 748-08-4115

Par	Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
<b>2</b> a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-7,540.
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,		F 540
Dar	line 8	9	-7,540.
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your <b>adjustments to income.</b> Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

### **SCHEDULE D** (Form 1040)

### **Capital Gains and Losses**

OMB No. 1545-0074

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 Your social security number 748-08-4115 NIHITH MANDAVA

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

### If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) Form(s) 8949, Part I, combine the result (or other basis) whole dollars. with column (g) line 2. column (a) 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 . . . . . . . . . . . . . . . . . 17,392. 15,333. 2. 2,061. 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. 21. 25. Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . . . . . 7 2,057. 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 (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 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 Totals for all transactions reported on Form(s) 8949 with Box E checked . . . . . . . . . . . . . . . . . . 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 1. 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15

Schedule D (Form 1040) 2020 Page 2

### Part III **Summary** 2,058. 16 Combine lines 7 and 15 and enter the result 16 • 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 • 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? X 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 1. 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. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ 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.

## 8949 Form

**Sales and Other Dispositions of Capital Assets** 

► 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.

2020 Attachment Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return
NIHITH MANDAVA

Department of the Treasury

Social security number or taxpayer identification number

748-08-4115

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)

<ul><li>☐ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>		٠,	•	sis <b>wasn't</b> report	ed to the IF	RS	
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below	Adjustment, if If you enter an enter a co See the sep	(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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD CRYPTO LLC	01/09/20	03/30/20	260.	250.			10.
ROBINHOOD SECURITIES LLC	04/02/20	05/27/20	17,132.	15,083.	W	2.	2,051.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc e is checked), <b>lir</b>	lude on your ne 2 (if Box B	17.392.	15.333.		2.	2.061.

**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.

## 8949

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment

OMB No. 1545-0074

Department of the Treasury ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Internal Revenue Service

Sequence No. 12A

Name(s) shown on return NIHITH MANDAVA Social security number or taxpayer identification number 748-08-4115

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.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I 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	Description of property Date acquired Date Sold			(e) Cost or other basis. See the <b>Note</b> below	Adjustment, i If you enter an enter a c See the sep	(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	06/29/20	11/10/20	21.	25.			-4.			
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and inc e is checked), <b>lir</b>	lude on your ne 2 (if Box B	21.	25.			-4.			

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.

REV 03/01/21 PRO

### **SCHEDULE E** (Form 1040)

### **Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.) ► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

Attachment Sequence No. 13

Name(s) shown on return Your social security number NIHITH MANDAVA 748-08-4115 Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions . . . . . Physical address of each property (street, city, state, ZIP code) Α AMRUTHALUR GUNTUR DISTRICT ANDHRA PRADESH IN 522325 В C 1b Fair Rental **Personal Use** Type of Property For each rental real estate property listed QJV above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a (from list below) **Days Days** Α 365 0 Α qualified joint venture. See instructions. В В С С Type of Property: Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: **Properties:** Α 3 Rents received . 3 350. 4 Royalties received . . . . 4 Expenses: Advertising . . . . . . 5 5 6 Auto and travel (see instructions) . . . 6 7 Cleaning and maintenance . . . 7 940. 8 8 Commissions. . . . . . 9 9 Insurance . . . . . . . . . . 10 Legal and other professional fees . . . 10 11 11 700. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 Other interest. . . . . . . . . 13 14 Repairs. . . . . . . . 14 2,250. 15 2,100. 15 Supplies . Taxes . . . . . 16 16 17 17 1,900. 18 Depreciation expense or depletion . . 18 19 19 Total expenses. Add lines 5 through 19 . . . . . 20 20 7,890. 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 -7,540. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . -7,540.) 350 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b 23c **c** Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 7,890. Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 7,540. 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

-7,540.

## Form **8995**

Qualified Business Income Deduction Simplified Computation

► Attach to your tax return.

► Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2020

Attachment Sequence No. **55** 

Name(s) shown on return
NIHITH MANDAVA

Department of the Treasury

Internal Revenue Service

Your taxpayer identification number 748-08-4115

**Note.** You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$163,300 (\$326,600 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	<b>(b)</b> Taxpayer dentification number	٠,	Qualified business ncome or (loss)
i				
ii				
iii				
iv				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)			
3	Qualified business net (loss) carryforward from the prior year	( )		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	,		
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)			
	(see instructions)	8.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior			
_	year	)		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	8.		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	2.
10	Qualified business income deduction before the income limitation. Add lines 5 and 9		10	2.
11	Taxable income before qualified business income deduction	1		
12	Net capital gain (see instructions)	28.		
13	Subtract line 12 from line 11. If zero or less, enter -0	65,882.		
14	Income limitation. Multiply line 13 by 20% (0.20)		14	13,176.
15	Qualified business income deduction. Enter the lesser of line 10 or line 14. Also enter			
	the applicable line of your return		15	2.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero		16	( 0.
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7 zero, enter -0	•	17	( 0.