E <b>104(</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		<sup>(99)</sup> 202	20	OMB No. 1545	5-0074	IRS Use O	nly—De	o not wri	te or staple	in this space.	
Filing Statu Check only one box.	lf yc	Single  Married filing jointly Course of the MFS box, enter the n son is a child but not your dependent	ame of	ed filing separatel your spouse. If yo				. ,			, ,	. , . ,	
Your first name	e and m	iddle initial	Last na	me					Yo	our soc	ial securit	ty number	
SANDEEP			MALI	ADI					6	654-15-1005			
If joint return, s	spouse's	s first name and middle initial	Last na	me					Sp	Spouse's social security number			
	•	er and street). If you have a P.O. box, see DGE BLVD ,	instructio	ons.				Apt. no. 58	CI	heck he	ere if you,		
City, town, or	post offi	ce. If you have a foreign address, also co	mplete s	paces below.	Sta	ate	ZIP co	IP CODE .				tly, want \$3 Checking a	
IRVING					T	Х	750	)63		0	w will not	0	
Foreign countr	ry name		F	oreign province/st	ate/cour	nty	Foreig	n postal cod	е ус	your tax or refund.			
											You	Spouse	
At any time du	uring 20	020, did you receive, sell, send, excl	nange, c	or otherwise acqu	iire any	financial intere	est in a	any virtual	curre	ncy?	Yes	X No	
Standard Deduction	_	<b>neone can claim:</b> You as a de Spouse itemizes on a separate retur	•	·		a dependent							
Age/Blindnes	s You	: 🗌 Were born before January 2, 1	956	Are blind	Spouse	e: 🗌 Was bo	rn befo	ore Januar	y 2, 1	956	🗌 ls bli	ind	
Dependent	s (see	instructions):		(2) Social sec	urity	(3) Relationsh	nip	<b>(4) 🖌</b> if	quali	fies for	(see instru	ctions):	
If more		irst name Last name		number to you				Child tax credi			edit Credit for other dependents		
than four													
dependents, see instructior											[		
and check	13										[		
here 🕨 🗌									]		[		
	1	Wages, salaries, tips, etc. Attach F	orm(s)	N-2						1	1(	01,333.	
Attach	2a	Tax-exempt interest	2a		b 1	raxable interes	t.			2b			
Sch. B if required.	<u>3a</u>	Qualified dividends	3a	b Ordinary dividends			nds .			3b			
	) 4a	IRA distributions	4a				ıt						
	5a	Pensions and annuities	5a b Taxable amount						5b				
Standard	6a	Social security benefits	6a b Taxable amount							6b			
<ul> <li>Deduction for –</li> <li>Single or</li> </ul>	7	Capital gain or (loss). Attach Schee	dule D if	required. If not r	equirec	l, check here		<b>&gt;</b>		7			
Married filing	8	Other income from Schedule 1, lin	e9.							8		-7,000.	
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							9	9	94,333.	
<ul> <li>Married filing</li> </ul>	10	Adjustments to income:											
jointly or Qualifying	a	From Schedule 1, line 22											
widow(er), \$24,800	b	Charitable contributions if you take the standard deduction. See instructions <b>10b</b>											
Head of	с	Add lines 10a and 10b. These are your total adjustments to income											
household, \$18,650	11	Subtract line 10c from line 9. This is your adjusted gross income								11	2	94,333.	
<ul> <li>If you checked</li> </ul>	12	Standard deduction or itemized deductions (from Schedule A)								12	-	12,400.	
any box under Standard	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A											
Deduction, see instructions.	14	Add lines 12 and 13								14	1	12,400.	
	15	Taxable income. Subtract line 14	from lin	e 11. If zero or le	ss, ente	er-0				15	8	81,933.	
												1040 (	

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

Form **1040** (2020)

Form 1040 (2020	))										Page 2	
	16	Tax (see instructions). Check	if any from Form	n(s): <b>1</b> 🗌 881	4 <b>2</b>	4972	3			16	13,814.	
	17	Amount from Schedule 2, lin	e3							17		
	18	Add lines 16 and 17								18	13,814.	
	19	Child tax credit or credit for	other dependen	ts						19		
	20	Amount from Schedule 3, lin	e7							20		
	21	Add lines 19 and 20								21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0						22	13,814.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 1	0.				23	0.	
	24	Add lines 22 and 23. This is	your <b>total tax</b>						. Þ	24	13,814.	
	25	Federal income tax withheld	from:									
	а	Form(s) W-2					25a	16	,913			
	b	Form(s) 1099					25b					
	с	Other forms (see instructions	5)				25c					
	d	Add lines 25a through 25c								25d	16,913.	
• If you have a	26	2020 estimated tax payment								26		
qualifying child,	27	Earned income credit (EIC)			<sup>N</sup>	IÒ .	27					
attach Sch. EIC.	28	Additional child tax credit. A	ttach Schedule	8812			28					
nontaxable combat pay,	29	American opportunity credit	from Form 8863	3, line 8			29					
see instructions.	30	Recovery rebate credit. See	instructions .				30					
	31	Amount from Schedule 3, lin	e13				31					
	32	Add lines 27 through 31. The	ese are your <b>tot</b> a	al other paym	ents and	refunda	able c	redits	. 🕨	32		
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments					. 🕨	33	16,913.	
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the	ne amou	nt you	overpaid		34	3,099.	
neruna	35a	Amount of line 34 you want	refunded to you	<b>J.</b> If Form 8888	3 is attacl	ned, che	ck her	e		35a	3,099.	
Direct deposit?	►b	Routing number 0 8 1	0 0 0 0	3 2	► c Ty	pe: 🗙	] Chec	king 🗌 :	Savings			
See instructions.	►d	Account number 3 5 5	0 0 7 0	9 2 1 8	8 0							
	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		Subtract line 33 from line 24. This is the <b>amount you owe now</b>										
For details on how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details.										
instructions.	38	Estimated tax penalty (see ir	structions) .			. 🕨	38					
Third Party		you want to allow another					See					
Designee	ins	structions					. 🕨	Yes. Co	omplete	e below.	🗙 No	
		signee's		Phone						tification		
		me 🕨		no. 🕨					per (PIN)			
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com										
Here		ur signature		Date		•					nt you an Identity	
	. 10	ur signature		Date		Jupation					IN, enter it here	
Joint return?					SOFTWARE ENGINEER					(see inst.) ►		
See instructions.	Sp	ouse's signature. If a joint return, <b>k</b>	ooth must sign.	Date	Spouse's	s occupat	ion				nt your spouse an	
Keep a copy for your records.	,									e inst.) 🕨	ection PIN, enter it here	
,		(016)000 640	<u>^</u>							e mst.) 🕨		
		one no. (816)299-640 eparer's name	9 Preparer's signat	Email address	мацьаD	ISANDEE	Date	Y@GMAIL.CO			Check if:	
Paid										0 7 7 7 7	Self-employed	
Preparer			SYAM PRIYA	KAM SAGAR	GUPTA	тапташ	108/	26/2021		82703		
Use Only		m's name ► GLOBAL TAX			~ ~ ~ ~	0041					678)965-9522	
		m's address ► 2530 Pebb		in Cumming	-					m's EIN 🖡	1	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BA	A	RE۱	/ 07/28/21 PRC	)		Form <b>1040</b> (2020)	

Go to *www.irs.gov/Form1040* for instructions and the latest information.

BAA

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

## Additional Income and Adjustments to Income

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

► Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074
2020
Attachment Sequence No. <b>01</b>

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
SANDEEP MALLADI	654-15-1005
Part I Additional Income	

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions)		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-7,000.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ►		
-		8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	-7,000.
Par	line 8		-7,000.
10		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		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		
Ecr De	on Form 1040, 1040-SR, or 1040-NR, line 10a	22	1 (Forme 1040) 0000
101 6	Iperwork Reduction Act Notice, see your tax return instructions. BAA REV 07/28/21 PRO	Scheudle	1 (Form 1040) 2020

SCHEDULE E
(Form 1040)

## Supplemental Income and Loss

OMB No. 1545-0074 2020

Attachment Sequence No. 13

Your social security number

(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.

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

SAND	EEP MALLADI							65	54-15	-100	5	
Part	Income or Loss	From Rental Real Estate and Roy	yalties	S Note:	If you a	are in th	e business c	of renti	ng perso	onal p	roperty	, use
		instructions. If you are an individual, repo										
A Did	l you make any payme	nts in 2020 that would require you to	file Fo	orm(s) 10	99? S	ee insti	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	VILLAGE NAGARAM WARANGAL TELANGANA IN 50637											
В												
С												
1b	Type of Property		Fair	Rental	Per	sonal l	Jse	~	) V			
	(from list below)	2 For each rental real estate property listed above, report the number of fair rental and				0	Days		Days		C	(J V
Α	3	<ul> <li>personal use days. Check the QJV box only if you meet the requirements to file as a</li> </ul>					365		0		[	
В		qualified joint venture. See inst	ruction	ns.	В						[	
С					С						[	
Туре с	of Property:			I	I							
1 Sing	le Family Residence	3 Vacation/Short-Term Rental	5 Lar	nd	7	7 Self-	Rental					
-	i-Family Residence	4 Commercial	6 Ro	valties	8	3 Othe	r (describe)	)				
Incom	e:	Properties:			Α		E				С	
3	Rents received		3			650.						
4			4									
Expen												
-			5									
6		nstructions)	6									
7		nance	7		1,	750.						
8			8									
9			9									
10		ssional fees	10									
11			11									
12		d to banks, etc. (see instructions)	12									
13			13									
14			14		1,	700.						
15			15			900.						
16			16									
17	Utilities		17		2,	300.						
18		or depletion	18									
19		·	19									
20		lines 5 through 19	20		7,0	650.						
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If										
		instructions to find out if you must										
	file Form 6198		21		-7,	000.						
22	Deductible rental real	estate loss after limitation, if any,										
	on Form 8582 (see in	structions)	22	(	-7,0	00.)	(		)(			)
23a	Total of all amounts re	eported on line 3 for all rental prope	rties			23a		6	50.			
b	Total of all amounts re	eported on line 4 for all royalty prop	erties			23b						
с	Total of all amounts re	eported on line 12 for all properties				23c						
d						23d						
е		eported on line 20 for all properties				23e		7,6	50.			
24		e amounts shown on line 21. Do no	<b>t</b> inclu	de any lo	osses				24			
25	Losses. Add royalty lo	sses from line 21 and rental real estate	losses	s from line	e 22. Er	nter tota	al losses her	e.	<b>25</b> (		7,	000.)
26	Total rental real esta	ate and royalty income or (loss).	Combi	ine lines	24 an	d 25. E	inter the rea	sult				
		V, and line 40 on page 2 do not										
		40), line 5. Otherwise, include this ar							26		-7	,000.

-7,000.