(Rev. January 2021)

Department of the Treasury

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

Internal Revenue Service	t information.
Submission Identification Number (SID)	
Taxpayer's name	Social security number
KRANTHIKUMAR CHALAMALASETTI	892-77-1798
Spouse's name	Spouse's social security number
Part I Tax Return Information — Tax Year Ending December 31,	(Enter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	, , , , , , , , , , , , , , , , , , , ,
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1 Adjusted gross income	1 66,050.
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 10,332.
4 Amount you want refunded to you	
5 Amount you owe	5
Part II Taxpayer Declaration and Signature Authorization (Be sure	you get and keep a copy of your return)
signature on the income tax return (original or amended) I am now author I will enter my PIN as my signature on the income tax return (original or a if you are entering your own PIN and your return is filed using the Practi	the tion account indicated in the tax preparation software for efinancial institution to debit the entry to this account. This Agent to terminate the authorization. To revoke (cancel) at cancellation requests must be received no later than 2 in sinvolved in the processing of the electronic payment of s related to the payment. I further acknowledge that the all or amended) I am now authorizing and, if applicable, my item or generate my PIN The trive digits, but don't enter all zeros as my don't enter all zeros. The trive digits, but don't enter all zeros as my don't enter all zeros.
below. Your signature ▶	Date ▶
Spouse's PIN: check one box only	
I authorize to er	nter or generate my PIN as my
signature on the income tax return (original or amended) I am now author	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or a if you are entering your own PIN and your return is filed using the Practibelow.	amended) I am now authorizing. Check this box only
Spouse's signature ▶	Date ►
Practitioner PIN Method Returns Only—o	
Part III Certification and Authentication — Practitioner PIN Method	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected	Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic in authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confir requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e	m that I am submitting this return in accordance with the
EDO's signature	Data N
ERO's signature ► ERO Must Retain This Form — See I	Date >
	HSH UCHUIS

Don't Submit This Form to the IRS Unless Requested To Do So

E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

Filing Status Check only one box.	If yo	Single Married filing jointly unchecked the MFS box, enter the noince is a child but not your dependent	ame of								
Your first name	and m	ddle initial	Last n	ame				Your	socia	l security	number
KRANTHII	KUMA	R	CHA	LAMALASETTI				892-77-1798			}
If joint return, s	pouse's	first name and middle initial	Last n	ame				Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.			Apt. no.	Presid	dentia	al Election	n Campaign
18324 BI	RIDL	E CLUB DRIVE								e if you, c	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces below.	State	ZIP	code		spouse if filing jointly, want \$3 to go to this fund. Checking a		
TAMPA						33	22647			will not o	•
Foreign country	y name			Foreign province/state/c	county	For	eign postal coo		ax or	refund. You	Spouse
At any time du	ring 20	020, did you receive, sell, send, excl	nange,	or otherwise acquire	any financial	interest in	n any virtual	currency	? [Yes	⊠ No
Standard Deduction	_	eone can claim:			'	dent					
Age/Blindness	You:	☐ Were born before January 2, 1	956	Are blind Spo	ouse: 🗌 Wa	s born be	efore Januar	y 2, 1956] ز	Is blir	nd
Dependents	s (see	instructions):		(2) Social security	(3) Rela	tionship	(4) 🗸 i	f qualifies	for (s	ee instruc	tions):
If more		irst name Last name		number	~ ' '	you	Child tax		- 1		er dependents
than four]			
dependents, see instruction]			
and check	5 —]			
here ▶ □]			
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					1	7	0,780.
Attach	2a	Tax-exempt interest	2a		b Taxable in	terest		. 4	2b		
Sch. B if required.	3a	Qualified dividends	b Ordinary dividends				:	3b			
	4a	IRA distributions	b Taxable amount			. 4	4b				
	5a	Pensions and annuities	5a		b Taxable ar	mount .			5b		
Standard	6a	Social security benefits	6a		b Taxable ar	mount .		. (3b		
Deduction for—	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here							7		20.	
Single or Married filing	8	Other income from Schedule 1, lin	e9.						8		4,500.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inco	ome			•	9	6	6,300.
Married filing	10	Adjustments to income:									
jointly or Qualifying	а	From Schedule 1, line 22				10a					
widow(er), \$24,800	b	Charitable contributions if you take	the sta	ndard deduction. See	instructions	10b	2	50.			
Head of	С	Add lines 10a and 10b. These are	your to	otal adjustments to in	ncome .			▶ 1	0с		250.
household, \$18,650	11	Subtract line 10c from line 9. This	is your	adjusted gross inco	me			•	11	6	6,050.
If you checked	12	Standard deduction or itemized	deduc	tions (from Schedule	A)			. [12	1	2,400.
any box under Standard	13	Qualified business income deduct	on. Att	tach Form 8995 or For	rm 8995-A			. [13		
Deduction, see instructions.	14	Add lines 12 and 13						. [14		2,400.
	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less,	enter -0			. •	15	5	3,650.

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(s): 1 🗌 8814 2 🗎 4972 3 🗎	16	7,599.	
	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	7,599.	
	19	Child tax credit or credit for other dependents	19		
	20	Amount from Schedule 3, line 7	20		
	21	Add lines 19 and 20	21		
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	7,599.	
	23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	0.	
	24	Add lines 22 and 23. This is your total tax	24	7,599.	
	25	Federal income tax withheld from:			
	а	Form(s) W-2	-		
	b	Form(s) 1099			
	C	Other forms (see instructions)		10 220	
	d	Add lines 25a through 25c	25d	10,332.	
 If you have a qualifying child, 	26	2020 estimated tax payments and amount applied from 2019 return	26		
attach Sch. EIC.	27	Earned income credit (EIC)			
If you have nontaxable	28	Additional child tax credit. Attach Schedule 8812	-		
combat pay,	29	American opportunity credit from Form 8863, line 8	4		
see instructions.	30	Recovery rebate credit. See instructions	-		
	31	Amount from Schedule 3, line 13	-		
	32 33	ů , i ,	32	10,332.	
	34	Add lines 25d, 26, and 32. These are your total payments	33	2,733.	
Refund		Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	2,733.	
Direct deposit?	35a ▶ b	Routing number X X X X X X X X X	SSA	2,733.	
See instructions.	►d	Account number X X X X X X X X X X X X X X X X X X X			
	36	Amount of line 34 you want applied to your 2021 estimated tax > 36			
Amount	37	Subtract line 33 from line 24. This is the amount you owe now	37		
You Owe	0.	Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for			
For details on		2020. See Schedule 3, line 12e, and its instructions for details.			
how to pay, see instructions.	38	Estimated tax penalty (see instructions)			
Third Party	Do	you want to allow another person to discuss this return with the IRS? See			
Designee	ins	tructions	below.	X No	
		signee's Phone Personal ident			
		ne ► no. ► number (PIN)			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic			
Here	You	ur signature Date Your occupation If the	· · e IRS ser	nt you an Identity	
		Prot	ection Pl	N, enter it here	
Joint return?	L	BOI IMINE ENGINEER	inst.) ▶		
See instructions. Keep a copy for	Spo			nt your spouse an ection PIN, enter it here	
your records.			inst.) ▶	1 1 1 1 1 1 1	
	———Pho	one no. Email address			
	Pre	parer's name Preparer's signature Date PTIN		Check if:	
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/16/2021 P0208	2703	Self-employed	
Preparer	Firr		ne no. (678)965-9522	
Use Only	Firr		Firm's EIN ► 30-1017196		
Go to www.irs.go	v/Forn	11040 for instructions and the latest information. BAA REV 02/07/21 PRO		Form 1040 (2020)	

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

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

KRANTHIKUMAR CHALAMALASETTI

► 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
892-77-1798

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	-4,500.
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	4 500
Par	t II Adjustments to Income	9	-4,500.
		40	
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	

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.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Attachment Sequence No. **12** Your social security number

Name	social security number					
Did y	ANTHIKUMAR CHALAMALASETTI You dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additional			× No	7 7	1730
Pa		•			e ins	tructions)
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. (d) Proceeds (sales price) (e) Cost (or other basis) Form(s) 8949, F line 2, column				s from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)	
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.						
	Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	7,491.	7,471.			20.
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				4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	usts from	5	
6	6	()				
7	7	20.				
Pai	t II Long-Term Capital Gains and Losses—Ge	nerally Assets H	Held More Than	One Year	(see	instructions)
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. (d) (e) (Cost (Cost (sales price) (or other basis) (or other basis)						(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	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.			line 2, colum	(g)	with column (g)
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	
	Net long-term gain or (loss) from partnerships, S corporat	12				
	Capital gain distributions. See the instructions				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 88	a through 14 in co	olumn (h). Then, go	to Part III	4.5	

Schedule D (Form 1040) 2020 Page **2**

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 20. • 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? ☐ **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. 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 qualified 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

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.

OMB No. 1545-0074 Attachment Sequence No. 12A

Department of the Treasury Internal Revenue Service

Social security number or taxpayer identification number

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.

892-77-1798 KRANTHIKUMAR CHALAMALASETTI 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 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 Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (e) (h) Cost or other basis enter a code in column (f). Gain or (loss). (d) (c) (a) (b) See the separate instructions. Date sold or Proceeds See the **Note** below Subtract column (e) Description of property Date acquired disposed of and see Column (e) (sales price) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (see instructions) combine the result (Mo., day, yr.) in the separate (a) Code(s) from Amount of adjustment instructions with column (a) instructions 03/15/20 09/02/20 7,491 7,471.

ROBINHOOD CRYPTO LLC 20. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶ 7,491. 7,471. 20.

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

Department of the Treasury

Internal Revenue Service (99)

(Form 1040)

Supplemental Income and Loss

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

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

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

OMB No. 1545-0074

Attachment Sequence No. **13**

Name(s) shown on return

Your social security number

KRAN	THIKUMAR CHALAM	IALASETTI					892	2-77-179	8
Part		s From Rental Real Estate and Ro	-	-					
		instructions. If you are an individual, rep							
	, , , ,	nts in 2020 that would require you to	` '						′es 🗵 No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?						🗌 Y	es 🗌 No
1a		each property (street, city, state, ZIF							
A	GANDHI NAGAR H	HYDERABAD IN 500072							
В									
C									
1b	Type of Property	2 For each rental real estate pro	perty listed		Fair	Rental		onal Use	QJV
	(from list below)	above, report the number of fa personal use days. Check the	ir rental and			ays		Days	401
A	3	if you meet the requirements to	o file as a	Α		365		0	
В		qualified joint venture. See ins	tructions.	В					
C				С					
Type o	of Property:								
1 Sing	gle Family Residence	3 Vacation/Short-Term Rental	5 Land		7 Self-	Rental			
2 Mul	ti-Family Residence	4 Commercial	6 Royalties		8 Othe	r (describe))		
Incom	e:	Properties:		A		E	3		С
3	Rents received		3		450.				
4	Royalties received .		4						
Expen	ses:								
5	Advertising		5		80.				
6	Auto and travel (see in	nstructions)	6		250.				
7	•	nance	7		120.				
8			8						
9	Insurance		9						
10		essional fees	10						
11	Management fees .		11						
12		d to banks, etc. (see instructions)	12						
13	Other interest		13	4,	500.				
14	Repairs		14						
15			15						
16			16						
17			17						
18		e or depletion	18						
19	Other (list)		19						
20		lines 5 through 19	20	4,	950.				
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If							
	• • •	instructions to find out if you must		=					
	file Form 6198		21	-4,	500.				
22		l estate loss after limitation, if any,				,			
	on Form 8582 (see in		22 (-4,5	500.)	()()
23a		eported on line 3 for all rental prope			23a		45	0.	
b		eported on line 4 for all royalty prop			23b				
C		eported on line 12 for all properties			23c				
d		eported on line 18 for all properties			23d				
е		eported on line 20 for all properties			23e		4,95		
24	•	e amounts shown on line 21. Do no	-				_	24	
25	Losses. Add royalty lo	sses from line 21 and rental real estate	e losses from li	ne 22. E	nter tota	al losses her	e. 2	25 (4,500.)
26		ate and royalty income or (loss).							
		V, and line 40 on page 2 do not							4 = 0 0
	Schedule 1 (Form 104	40), line 5. Otherwise, include this a	mount in the	total on	line 41	on page 2	. 2	26	-4,500.