E 1040 Department of the Treasury—Internal Revenue Service (99) U.S. Individual Income Tax Return

2020

OMB No. 1545-007

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 on is a child but not your dependent	name of y	ed filing separately (your spouse. If you							-	
Your first name	and mi	ddle initial	Last na	me					You	Your social security number		
PAVAN			THAK	KALAPELLY					16	52-5	57-225	2
If joint return, s	pouse's	first name and middle initial	Last nai	me					Spo	ouse's	s social sec	curity number
Home address	(numbe	r and street). If you have a P.O. box, se	e instruction	ons.				Apt. no.	Pre	esider	ntial Election	on Campaign
6963 SE	•	• •						200	Ch	Check here if you, or your		
City, town, or p	ost offic	ce. If you have a foreign address, also c	omplete s	paces below.	Sta	te	ZIP	code				tly, want \$3
ORLANDO					F	L	32	821	١ ،	_	tnis tuna. ow will not	Checking a change
Foreign country	y name		F	oreign province/state	/coun	ty	Fore	eign postal cod	_		or refund.	•
At any time du	ring 20	20, did you receive, sell, send, exc	change, o	or otherwise acquire	any	financial interes	st in	any virtual	curren	icy?	Yes	∑ No
Standard Deduction	_	eone can claim: You as a d	•			a dependent						
Age/Blindness	You:	Were born before January 2,	1956	Are blind Sp	ouse	: Was borr	n be	efore Januar	y 2, 19	956	☐ Is bl	ind
Dependents				(2) Social securit	У	(3) Relationshi					(see instru	ctions):
If more	•	rst name Last name		number	•	to you		Child tax	credit	1	Credit for ot	her dependents
than four]			
dependents, see instruction:]		[
and check]		[
here ▶ 🗌]		[
	1	Wages, salaries, tips, etc. Attach	Form(s) \	N-2						1	3	32,004.
Attach Sch. B if	2a	Tax-exempt interest	2a		b T	axable interest				2b		
required.	3a	Qualified dividends	3a		b 0	Ordinary dividen	ds			3b		
	4a	IRA distributions	4a		b T	axable amount				4b		
	5a	Pensions and annuities	5a		b T	axable amount				5b		
Standard	6a	Social security benefits	6a		b T	axable amount			<u>.</u>	6b		
Deduction for— Single or	7	Capital gain or (loss). Attach Sche	edule D if	required. If not req	uired	, check here		🕨		7		-548.
Married filing	8	Other income from Schedule 1, li	ne 9							8		-5 , 900.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	, and 8. T	his is your total inc	ome				•	9	,	75 , 556.
Married filing	10	Adjustments to income:				1	,					
jointly or Qualifying	а	From Schedule 1, line 22				10a						
widow(er), \$24,800	b	Charitable contributions if you take	e the stan	dard deduction. See	e inst	ructions 10b						
Head of	С	Add lines 10a and 10b. These are	your tot	al adjustments to	incoı	me			•	10c		
household, \$18,650	11	Subtract line 10c from line 9. This	s is your a	adjusted gross inc	ome				•	11		75 , 556.
If you checked	12	Standard deduction or itemized	d deducti	ons (from Schedule	e A)					12		12,400.
any box under Standard	13	Qualified business income deduc	tion. Atta	ich Form 8995 or Fo	orm 8	995-A				13	1	
Deduction, see instructions.	14	Add lines 12 and 13								14		12,400.
	15	Taxable income. Subtract line 14	4 from lin	e 11. If zero or less,	, ente	r-0				15		63,156.

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

Form **1040** (2020)

Form 1040 (2020	0)								Pa	age 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	9,68	9.
	17	Amount from Schedule 2, lin	ne 3					17		
	18	Add lines 16 and 17						18	9,68	9.
	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	9,68	9.
	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 total tax				▶	24	9,68	9.
	25	Federal income tax withheld	from:							
	а	Form(s) W-2				25a 13	3 , 163.			
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	13,16	3.
• If you have a	26	2020 estimated tax paymen	ts and amount a	pplied from 20	119 return			26		
qualifying child,	27	Earned income credit (EIC)			^N o .	27				
attach Sch. EIC.	28	Additional child tax credit. A	ttach Schedule	8812		28				
nontaxable	29	American opportunity credit	from Form 8863	3, line 8		29				
combat pay, see instructions.	30	Recovery rebate credit. See	instructions .			30	.,336.			
	31	Amount from Schedule 3, lir	ne 13			31				
	32	Add lines 27 through 31. The	ese are your tot a	al other paym	ents and refunda	ble credits .	▶	32	1,33	6.
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments			🕨	33	14,49	9.
Refund	34	If line 33 is more than line 24						34	4,81	0.
neiulia	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attached, che	ck here	. • 🗌	35a	4,81	0.
Direct deposit?	▶b	Routing number 3 2 2 2 7 1 6 2 7 ► c Type: X Checking Savings								
See instructions.	▶d	Account number 7 1 3 1 3 8 1 2 6								
	36	Amount of line 34 you want								
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe	now		•	37		
You Owe		Note: Schedule H and Sch								
For details on how to pay, see		2020. See Schedule 3, line 1								
instructions.	38	Estimated tax penalty (see in	nstructions) .		🕨	38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?					
Designee	ins	structions				► Yes. C	omplete	below.	⋉ No	
		signee's		Phone			onal iden			$\overline{}$
		me ►	de et liberre errensine	no. ▶	d		ber (PIN)			
Sign		der penalties of perjury, I declare the lief, they are true, correct, and com								
Here		ur signature		Date	Your occupation				nt you an Identity	Ü
		ar oignataro		Duito	Tour occupation		I		IN, enter it here	
Joint return?					SOFTWARE I	ENGINEER	(se	e inst.) 🕨		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat	ion			nt your spouse an	
your records.	,							ntity Prot e inst.) ▶	ection PIN, enter it	t nere
		one no.		Email address			700			ш
		one no. eparer's name	Preparer's signat			Date	PTIN		Check if:	
Paid		M PRIYA RAM SAGAR GUPTA TALLAM			GUPTA TALLAM	1	P0208	22702	Self-employ	ved
Preparer		m's name GLOBAL TA		IVIN DUQUI	OOLIA IAHLAM	02/23/2021	-		,	
Use Only		m's address ► 2530 Pebb						Phone no. (678) 965-9522 Firm's EIN ► 30-1017196		
		III a auditos 🚩 🛆 J J U - L CDD.	TO OTCEV T	ii Cuitiitiall'	d 017 0001T			III O LIIV	OU TOT/I	- 20

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020

Attachment

Department of the Treasury Internal Revenue Service

PAVAN THAKKALAPELLY

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.

Sequence No. 01

Your social security number

162-57-2252

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	0.
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-5,900.
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 9	0	F 000
Par	line 8	9	-5,900.
10		10	
11	Educator expenses	10	
''	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)

Department of the Treasury

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.

OMB No. 1545-0074

Attachment Sequence No. 12

Internal Revenue Service (99) Name(s) shown on return Your social security number 162-57-2252 PAVAN THAKKALAPELLY 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. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (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) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2. column (a) with 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 3,881. 3,289. 592. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with 1,136. -1**,**136. 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 7 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 -544. 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 (g) (h) Gain or (loss) 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 (sales price) (or other basis) Form(s) 8949, Part II, 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 Box D checked 0. -4.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 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

-4.

15

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

Part III Summary

16	Combine lines 7 and 15 and enter the result	16	-548	}.
	• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.			
	• If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.			
17	Are lines 15 and 16 both gains? Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below.			
	No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:			
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21	(548.	.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.			
	No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

8949 Form

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074

2020
Attachment Sequence No. 12A

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

Name(s) shown on return
PAVAN THAKKALAPELLY

Social security number or taxpayer identification number 162-57-2252

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, *or* C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

★ (A) Short-term transactions★ (B) Short-term transactions★ (C) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	•		•	9)
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a co	f any, to gain or loss. amount in column (g), ode in column (f). arate 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	05/24/20	12/25/20	3,881.	3,289.			592.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your ne 2 (if Box B	3,881.	3,289.			592.

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.

Form 8949 (2020) Attachment Sequence No. **12A**

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side
PAVAN THAKKALAPELLY

Social security number or taxpayer identification number
162-57-2252

Before you check Box D, E, or F 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 II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.

✗ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on	Form(s) 1099	-B showing bas	•			e)
1 (a)	(b)	(c) Date sold or	(e) Adjustment, if a lf you enter an are enter a coo		f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)	
Description of property (Example: 100 sh. XYZ Co.)	Date acquired (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	05/01/19	12/12/20	0.	4.			-4.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D above is checked).	I here and inc is checked), lir	lude on your ne 9 (if Box E	0.	4.			-4.

Note: If you checked Box D 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 **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

2020
Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

162-57-2252

PAVAN THAKKALAPELLY

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

 (A) Short-term transactions (B) Short-term transactions ★ (C) Short-term transactions 	reported on	Form(s) 1099	9-B showing bas	•		•	2)
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, it If you enter an enter a co See the sep	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Ćo.)	(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	05/24/20	12/25/20	0.	1,136.			-1,136.
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), lir	lude on your ne 2 (if Box B	0.	1,136.			-1,136.

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.

OMB No. 1545-0074

2020

Attachment Sequence No. 13

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

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

Your social security number

	N THAKKALAPELLY						52-51-22	
Part	Schedule C. See instructions. If you are an individual, rep	ort farm renta	ıl income	or loss fi	om Form 4	835 or	n page 2, line	40.
	d you make any payments in 2020 that would require you to	٠,						
	Yes," did you or will you file required Form(s) 1099?						🗀	Yes No
1a	Physical address of each property (street, city, state, ZII							
A	H.NO 2-8-550/2, ROAD NO.9 WARANGAL TEL	ANGANA II	1 5060	001				
В								
С	T (D 10 -			Fair	Dantal	Day		
1b	Type of Property (from list below) 2 For each rental real estate pro above, report the number of fa	perty listed			Rental Days	Per	sonal Use Days	QJV
Λ.	personal use days. Check the	QJV box onl	V	-				
A B	if you meet the requirements t qualified joint venture. See ins	o file as a tructions	A B		365		0	
С			C					
	of Property:							
	gle Family Residence 3 Vacation/Short-Term Rental	5 Land		7 Self-	Dontal			
•	ti-Family Residence 4 Commercial	6 Royalties			r (describe	١		
Incom	*		• A	o Othe	`	<u>)</u> 3		С
3	Rents received	3		570.				
4	Royalties received	4		370.				
Expen		•						
5	Advertising	5						
6	Auto and travel (see instructions)	6						
7	Cleaning and maintenance	7	1,	160.				
8	Commissions	8						
9	Insurance	9						
10	Legal and other professional fees	10						
11	Management fees	11	1,	260.				
12	Mortgage interest paid to banks, etc. (see instructions)	12						
13	Other interest	13						
14	Repairs	14	1,	200.				
15	Supplies	15	1,	500.				
16	Taxes	16						
17	Utilities	17	1,	350.				
18	Depreciation expense or depletion	18						
19	Other (list)	19						
20	Total expenses. Add lines 5 through 19	20	6,	470.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	1 1						
	result is a (loss), see instructions to find out if you must		_					
	file Form 6198	21	-5,	900.				
22	Deductible rental real estate loss after limitation, if any,		_		,			,
00	on Form 8582 (see instructions)	22 (-5,	900.)	(70)
23a	Total of all amounts reported on line 3 for all rental proper			23a		5	70.	
b	Total of all amounts reported on line 4 for all royalty prop			23b				
C	Total of all amounts reported on line 12 for all properties			23c				
d	Total of all amounts reported on line 18 for all properties			23d		6 1	7.0	
e 24	Total of all amounts reported on line 20 for all properties Income. Add positive amounts shown on line 21. Do no			23e		6,4	24	
24 25	Losses. Add royalty losses from line 21 and rental real estate		•					5,900.)
25							25 (J, 300.)
26	Total rental real estate and royalty income or (loss). here. If Parts II, III, IV, and line 40 on page 2 do not							
	Schedule 1 (Form 1040), line 5. Otherwise, include this a						26	-5,900.

Schedule E

Schedule E Worksheet

► Keep for your records

•	п		г
•		_	

Name(s) shown on return Social Security No. PAVAN THAKKALAPELLY 162-57-2252 General Information: Property description H.NO;2-8-550/2, ROAD NO.9, INDIRA NAGAR, NGOS COLONY ROAD, HANAMAKONDA, WARANGAL, TELANGANA, 506001 Property type. . 3 Vacation/Short-term If type is other, enter a description. . Location (street address) H.NO 2-8-550/2, ROAD NO.9 City WARANGAL State ____ ZIP code If a foreign address: Foreign province or state . . TELANGANA Foreign postal code 506001 Foreign country India **Complete For All Properties:** Did you make any payments that would require you to file Form(s) 1099? Yes No If **yes**, did you or will you file all required Form(s) 1099?..... Yes **Complete For All Rental Properties:** 0 **Check All That Apply:** Owned by spouse В С Active participation. X D Qualified joint venture F Some investment is not at risk Ε Other passive exceptions Н Complete taxable disposition — See Help . . ī Treat all MACRS assets for this activity as qualified Indian reservation property? . . Yes Treat all assets acquired after August 27, 2005 as qualified GO Zone property? Regular Extension Nο Κ Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property? Yes No Was this activity located in a Qualified Disaster Area? Yes L М Ownership Percentage: Check to allocate income and expenses using ownership percentage **Owner-Occupied Rentals:** Q **Vacation Home or Property with Personal Use Days:** Check to allocate interest and taxes using the Tax Court Method S

H.NO 2-8-550/2, ROAD NO.9, WARANGAL, TELANGANA, 506001, India

Inco	ome		% if Different	Total
3	Enter rental income (not reported elsewhere)	570.		
	Rental income from Form 1099-MISC			
	Rental income from Form 1099-K			
	Rental Income from Cancellation of Debt Wks			
	Total rents received	570.	100.000000	570.
4	Enter royalties received (not reported elsewhere) .			
	Royalty income from Form 1099-MISC			
	Royalty income from Form 1099-K			
	Royalty Income from Cancellation of Debt Wks			
	Royalty Income from Schedule K-1			
	Total royalties received			

Expenses	(a) Total	(b) Enter % if not	(c) Reported On Schedule E	(d) Vacation Home Loss Limitation	(e) Allocated to Personal use
5 Advertising					
6 a Auto					
b Travel					
7 Cleaning and maint	1,160.		1,160.		
8 Commissions					
9 a Mort insur qualified					
From Form 1098 import					
Total mort insur qual .					
b Other Insurance					
Legal & other prof fees					
1 Management fees	1,260.		1,260.		
2 a Mortgage int qualified .					
From Form 1098 import					
Total mort int qualified					
b Mort int other					
From Form 1098 import					
Total mort int other					
3 Other interest					
4 Repairs	1,200.		1,200.		
5 Supplies	1,500.		1,500.		
6 a Real estate taxes					
From Form 1098 import		-			
Total real estate taxes					
b Other taxes					
7 Utilities	1,350.		1,350.		
8 a Depreciation	= 7 0 0 0 1		2,0001		
b Depletion					
c Depreciation carryover					
9 Other expenses					
a					
b					
c					
d					
e Indirect operating exp .					
f Operating exp carryover					
g Vehicle rental		1			
h Amortization		-			
Add lines 5 through 19	6,470.	-	6,470.		
Income or (loss)	· · · · · · · · · · · · · · · · · · ·	-	-5 , 900.		
2 Deductible rental real esta			-5,900. -5,900.		

2020 Virginia Nonresident Income Tax Return



Due May 1, 2021 Enclose a complete copy of your federal tax return and all other required Virginia enclosures Suffix Your Social Security Number First Name Last Name Check if deceased 162-57-2252 THAKKALAPELLY PAVAN Spouse's First Name (Filing Status 2 Only) Last Name Suffix Spouse's Social Security Number Check if deceased Present Home Address (Number and Street or Rural Route) Your Birth Date 0 3 - 0 7 - 1 9 9 2 (mm-dd-yyyy) 6963 SEA CORAL DR APT 200 City, Town or Post Office ZIP Code Spouse's Birth Date (mm-dd-yyyy) FL 32821 ORLANDO State of Residence Important - Name of Virginia City or County in which principal place of business, employment, or income source Locality Code is located. City OR X County 137 TΧ ORANGE Amended Return Name(s) or Address Different Overseas on Due Date Reason Code than Shown on 2019 VA **Check Applicable** Return **Boxes** Qualifying Farmer, Fisherman, or EIC Claimed on federal return Dependent on Another's Return Merchant Seaman Exemptions Add Sections 1 and 2. Enter the sum on Line 12. Filing Status Enter Filing Status Code in box below. Spouse if Filing Status 1 = Single. Federal head of household? YES Dependents Total Section 1 2 or 3 2 = Married, Filing Joint Return - both must have Virginia income X \$930 =1 1 930 3 = Married, Spouse Has No Income From Any Source 4 = Married, Filing Separate Returns You 65 Spouse 65 Total Section 2 Blind or over or over If Filing Status 3 or 4, enter spouse's SSN in the Spouse's Social Security Number X \$800 = = box at top of form and enter Spouse's Name Adjusted Gross Income from federal return - Not federal taxable income..... 1 75556 00 Additions from Schedule 763 ADJ, Line 3. 2 00 Add Lines 1 and 2. 00 3 75556 00 4a Enter Birth Dates above. Enter Your Age Deduction 4h 00 00 5 Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits reported on your federal return. State income tax refund or overpayment credit reported as income on your federal return. 6 00 Subtractions from Schedule 763 ADJ, Line 7. 7 00 Add Lines 4a, 4b, 5, 6, and 7..... იი 8 Virginia Adjusted Gross Income (VAGI). Subtract Line 8 from Line 3. 9 75556 00 Itemized Deductions from Virginia Schedule A, if applicable. See instructions. 10 00 If you do not claim itemized deductions on Line 10, enter standard deduction. See instructions..... 11 4500 00 Exemption amount. Enter the total amount from the Exemption Sections 1 and 2 above. 12 930 00 Deductions from Schedule 763 ADJ, Line 9. 00 13 Add Lines 10, 11, 12 and 13...... 14 5430 00 15 Virginia Taxable Income computed as a resident. Subtract Line 14 from Line 9...... 15 70126 00 Percentage from Nonresident Allocation Section on Page 2 (Enter to one decimal place only)..... 16 23.0 % 16 Nonresident Taxable Income. (Multiply Line 15 by percentage on Line 16)..... 17 00 16129 Income Tax from Tax Table or Tax Rate Schedule..... 18 00 676

Va. Dept.	of Taxation
2601044	Rev. 06/20

For Local Use

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2020	FORM 763 Page 2												
Your N		ır SSN 2-57-2252											
19a	Your Virginia income tax withheld. Enclose Forms		VK-1					19a			(913	00
19b	Spouse's Virginia income tax withheld. Enclose F							19b					00
20	2020 Estimated Tax Payments							20					00
21	2019 overpayment credited to 2020 estimated tax							21					00
22	Extension Payment - submitted using Form 760IF												00
23	Credit for Low-Income Individuals or Virginia Earr								_				00
24	Total credits from Schedule OSC.								-				00
25	Credits from Schedule CR, Section 5, Line 1A												00
26	Total payments and credits. Add Lines 19a th											913	00
27	If Line 18 is larger than Line 26, enter the differen										-	913	00
28	•											2 2 7	00
	If Line 26 is larger than Line 18, enter the differen										4	237	
29	Amount of overpayment on Line 28 to be CREDITE												00
30	Virginia529 and ABLEnow Contributions from Sch								_				00
31	Other Voluntary Contributions from Schedule VAC												00
32	Addition to Tax, Penalty, and Interest from enclos							32					00
33	Sales and Use Tax is due on Internet, mail order, a See instructions						. X	33					00
34	Add Lines 29 through 33.							34					00
35	If you owe tax on Line 27, add Lines 27 and 34 - OR - If you have an overpayment on Line 28 and Line 34 is larger than Line 28, enter the difference. AMOUNT YOU OWE. Enclose payment or pay at www.tax.virginia.govCheck here if paying by credit or debit card - See instructions							00					
36	If Line 28 is larger than Line 34, subtract Line 34 fro	m Line 28. This is the amo	ount to be	REFUN	DED 1	ο γοι	J.	36			,	237	00
If the I	Direct Deposit section below is not completed, you	r refund will be issued by	check.										
	T BANK DEPOSIT Your Bank Routing Trans	sit Number Y	our Bank	Account	t Num	ber	Che	cking	X	Sav	ings		
	emational Deposits 3 2 2 2 7 1	6 2 7 7	1 3	1 3	8	1 2	6						
Non	resident Allocation Percentage					Source	es		В-	Virgin	ia Sou	rces	
	Wages, salaries, tips, etc		1			820		00		3	173		00
2.	Interest income.					020	701	00			1/3		00
3.	Dividends							00					00
4.	Alimony received		4					00					00
5.	Business income or loss		5					00					00
6.	Capital gain or loss/capital gain distributions		6			_5	548	00				0	00
7.	Other gains or losses		7					00					00
8.	Taxable pensions, annuities and IRA distributions.		8					00					
9.	Rents, royalties, partnerships, estates, trusts, S co	rporations, etc	9			-59	900	00				0	00
10.	Farm income or loss		10					00					00
	O4l :												00
11.	Other income		11					00					
12.	Interest on obligations of other states from Schedu	ıle 763 ADJ, Line 1	12					00					
12. 13.	Interest on obligations of other states from Schedu Lump-sum and accumulation distributions included	ıle 763 ADJ, Line 1 d on Sch. 763 ADJ, Line 3	12 3 13									+	00
12. 13. 14.	Interest on obligations of other states from Schedu Lump-sum and accumulation distributions included TOTAL - Add Lines 1 through 13 and enter each co	ıle 763 ADJ, Line 1 d on Sch. 763 ADJ, Line 3 olumn total here	12 3 13 14			755	556	00			173	+	00
12. 13. 14. 15.	Interest on obligations of other states from Schedu Lump-sum and accumulation distributions included	ule 763 ADJ, Line 1d d on Sch. 763 ADJ, Line 3 olumn total here l B, by Line 14 A. <i>Compu</i>	12 3 13 14 ute			755	556	00				+	00
12. 13. 14. 15.	Interest on obligations of other states from Schedu Lump-sum and accumulation distributions included TOTAL - Add Lines 1 through 13 and enter each of Nonresident allocation percentage - Divide Line 14 percentage to one decimal place (e.g., 5.4%). Enter We) authorize the Dept. of Taxation to discuss this return to the state of th	tile 763 ADJ, Line 1d on Sch. 763 ADJ, Line 3 column total here	12 3 13 14 ute 15	I agree t		ain my F	orm	00 00 00			23 rginia.	83 .0% gov.	00
12. 13. 14. 15.	Interest on obligations of other states from Schedu Lump-sum and accumulation distributions included TOTAL - Add Lines 1 through 13 and enter each or Nonresident allocation percentage - Divide Line 14 percentage to one decimal place (e.g., 5.4%). Enter	tile 763 ADJ, Line 1d on Sch. 763 ADJ, Line 30 blumn total here	12 3 13 14 ute 15	the best o		ain my F	orm	00 00 00			23 rginia.	83 .0% gov.	00

Spouse's Phone Number

Preparer's Phone Number

(678) 965-9522

Firm's Name (or Yours if Self-Employed)

Preparer's PTIN

P02082703

Filing Election Code

Vendor Code 1555

ID Theft PIN

Preparer's Name

Spouse's Signature (If a joint return, **both** must sign)

SYAM PRIYA RAM SAGAR GUPTA TALLAM GLOBAL TAXES LLC

2020 Schedule INC/CG

162572252

Report all W-2s, 1099s & VK-1s with VA Withholding



THAKKALAPELLY



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.		
Γ					⊣		
162572252	W	913.	134227251	30134227251F001	17383.		

Total VA Withholding

You

162572252

913.

Spouse

Total # of W-2s,1099s & VK-1s

01