E1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		⁽⁹⁹⁾ 20)	20	OMB No. 1545	-0074	IRS Use	e Only	—Do not w	vrite or stapl	e in this space.
Filing Status		Single 🔲 Married filing jointly 🗌	Morri	ed filing separate			houe	abold (HC	<u>, п</u>		lifving wi	dow(or) (O)M
Check only one box.	lf yo	u checked the MFS box, enter the n son is a child but not your dependent	ame of									
Your first name		, ,	Last na	ame						Your so	cial secur	rity number
MRUDHUL			NELA	ATURI							89-180	-
If joint return, s	oouse's	s first name and middle initial	Last na	ame						Spouse	's social se	ecurity number
		er and street). If you have a P.O. box, see	instructi	ions.				Apt. no.				tion Campaign
		L WOODS DR						208			here if you if filing joi	intly, want \$3
SOUTHFIE SOUTHFIE		ce. If you have a foreign address, also co	implete s	spaces below.		tate 1I	ZIP (034		to go to	o this fund	I. Checking a
Foreign country				Foreign province/st			-	ign postal o	odo		low will no x or refund	•
T or eight country	Tiame			r oreign province/st		Inty		ign postar t	Joue	your tax or refund.		
At any time du	ring 20	020, did you receive, sell, send, excl	hange, o	or otherwise acqu	ire an	y financial intere	st in	any virtu	al cu	rrency?		
Standard		eone can claim: 🗌 You as a de	•			s a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	u were a dual-stat	us alie	en						
Age/Blindness	You	: 🗌 Were born before January 2, 1	956 [Are blind	Spous	e: 🗌 Was bo	rn be	fore Janu	ary 2	2, 1956	🗌 ls k	blind
Dependents	s (see	instructions):		(2) Social sec	urity	(3) Relationsh	nip				or (see instr	
If more	(1) F	irst name Last name		number to you			Child	hild tax credit Credi		Credit for c	other dependents	
than four dependents,											 	
see instruction	s ——								<u> </u>		 	
and check											 	
here 🕨 🔄			- ()								Ĺ	
Attach	1	Wages, salaries, tips, etc. Attach F	(`	W-2	· ·	 —	•		•	. 1		72,168.
Sch. B if	2a	•	2a	1		Taxable interes			•	. 2b		1
required.	<u>3a</u>		3a	1.		Ordinary divide			·	. 3b		1.
	4a 5 a		4a 5a			Taxable amour			•	. 4b		
<u> </u>	5a		5а 6а			Taxable amour			•	. 5b		
Standard Deduction for –	6a 7	Social security benefits		fraguirad If patr		Taxable amour	ι.		Г	. 6b 7		565.
Single or	8	Other income from Schedule 1, lin				u, check here	·			. 8		-5,540.
Married filing separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,		 This is your total i		• • • • •	·		•	. <u>o</u> ▶ 9		67,194.
\$12,400Married filing	10	Addustments to income:	anu o.		ncom	е	•		•	9		07,194.
jointly or		•				10	2					
Qualifying widow(er),	a b	From Schedule 1, line 22 10a Charitable contributions if you take the standard deduction. See instructions 10b 150.										
\$24,800	c	Add lines 10a and 10b. These are					-		-	<u>√.</u> ▶ 10		150.
 Head of household, 	11	Subtract line 10c from line 9. This		-						► 11		67,044.
\$18,650 ! • If you checked	12	Standard deduction or itemized										12,400.
any box under	13	Qualified business income deduct				 8005-Δ			•	. 13		12,400.
Standard Deduction,	14								•			12,400.
see instructions.	15	Taxable income. Subtract line 14									-	54,644.
	10	Taxable moorne. Subtract inte 14					•		•	. 13	<u></u>	1040

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

Form **1040** (2020)

Form 1040 (2020))										Pa	ge 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2	4972	3			16	7,80	
	17	Amount from Schedule 2, lin	ie3							17		
	18	Add lines 16 and 17								18	7,80	3.
	19	Child tax credit or credit for	other dependen	ts						19		
	20	Amount from Schedule 3, lin	ie7							20		
	21	Add lines 19 and 20								21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0						22	7,80	3.
	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 total tax						. 🕨	24	7,80	
	25	Federal income tax withheld	from:								,	
	а	Form(s) W-2					25a	9	,827	.		
	b	Form(s) 1099					25b					
	с	Other forms (see instructions	s)				25c					
	d	Add lines 25a through 25c								25d	9,82	7.
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20)19 returr	1				26		
qualifying child,	27	Earned income credit (EIC)					27					
attach Sch. EIC.	28	Additional child tax credit. A					28					
nontaxable	29	American opportunity credit	from Form 8863	3, line 8			29					
combat pay, see instructions.	30	Recovery rebate credit. See					30					
	31	Amount from Schedule 3. lin					31					
	32	Add lines 27 through 31. The	ese are vour tot a	al other pavm	ents and	refunda	ble cr	edits	. •	32		
	33	Add lines 25d, 26, and 32. T									9,82	7.
	34	If line 33 is more than line 24	· ·							34	2,01	
Refund	35a	Amount of line 34 you want						-			2,01	
Direct deposit?	►b	Routing number 0 4 4			► c Ty		Check		Saving		2,01	<u> </u>
See instructions.	►d	Account number 6 2 2							ournig			
	36	Amount of line 34 you want a			ed tax	· · ·	36					
Amount	37	Subtract line 33 from line 24							. •	37		
You Owe	57			-								
For details on		Note: Schedule H and Sch 2020. See Schedule 3, line 1			•	sent all c	or the t	axes you	owe to	r		
how to pay, see instructions.	38	Estimated tax penalty (see in					38					
Third Party		you want to allow another										
Designee		structions	•					Yes. Co	omplete	e below.	× No	
200.9.100		signee's		Phone					•	tification		
		me ►		no. 🕨				numt	ber (PIN)			
Sign		der penalties of perjury, I declare t										
Here	bel	ief, they are true, correct, and com	plete. Declaration				ised on	all informatio			2	ge.
	Yo	ur signature		Date	Your occ	cupation					nt you an Identity IN, enter it here	
Joint return?					SOFT	WARE E		IFFR		e inst.) 🕨		
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date		s occupati			`	,	nt your spouse an	
Keep a copy for	- Cp		e in maer eign	Duto		oooupun					ection PIN, enter it	here
your records.									(se	e inst.) 🕨		
		one no.		Email address								
Paid	Pre	eparer's name	Preparer's signat	ure			Date		PTIN		Check if:	
	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA '	TALLAM	04/0	08/2021	P020	82703	Self-employe	эd
Preparer	Firr	m's name ► GLOBAL TAX	XES LLC						Ph	one no.	(678)965-95	22
Use Only	Firr	m's address ► 2530 Pebb.	le Creek I	n Cummin	g GA 3	30041			Fir	m's EIN 🕨	► 30-10171	96
Go to www.irs.go	ov/Form	n1040 for instructions and the late	st information.		BA		REV	03/25/21 PRC)		Form 1040 (2020)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

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

Internal Revenue Service	► Go to www.irs.gov/Form1040 for instructions and the latest information.	Sequence No. 01	
Name(s) shown on Fo	Your soc	ial security number	
MRUDHUL NELATU	IRI	366-89	-1800

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2 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	-5,540.
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 F 4 0
Par	line 8	9	-5,540.
		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		
F . P	on Form 1040, 1040-SR, or 1040-NR, line 10a	22	
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 03/25/21 PRO	Schedul	e 1 (Form 1040) 2020

SCHEDULE	D
(Earm 1040)	

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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.

20 20 Attachment Sequence No. 12

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

Department of the Treasury

Your social security number

MRUDHUL NELATURI

366-89-1800

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes × No 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)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss t Form(s) 8949, P line 2, column	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.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	2,771.	2,206.			565.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1			usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions		-	-	6	()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	., .		7	565.

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

	instructions for how to figure the amounts to enter on the below.	(d)	(e)	(g) Adjustmen		(h) Gain or (loss) Subtract column (e)
	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, I line 2, colum	Part II,	from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		• •	. ,	11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Schee	dule(s) K-1	12	
13	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 8a on the back	•			15	

Part III

16

17

18

19

20

e D (Form 1040) 2020		Page Z
II Summary		
Combine lines 7 and 15 and enter the result	16	565.
• 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.		
Are lines 15 and 16 both gains?		
No. Skip lines 18 through 21, and go to line 22.		
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	
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	
 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. 		

 \square 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) Note: When figuring which amount is smaller, treat both amounts as positive numbers. 	21 ()
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☑ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 03/25/21 PRO

Schedule D (Form 1040) 2020

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

ıber

OMB No. 1545-0074

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

Name(s) shown on return	Social security number or taxpayer identification nu				
MRUDHUL NELATURI	366-89-1800				

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

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

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

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

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

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

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

1 (a) Description of property	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)	
(Example: 100 sh. XYZ Co.)				and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment		
Robinhood Securities LLC	11/12/20	12/12/20	2,771.	2,206.			565.	
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 (al here and inc is checked), lir	lude on your le 2 (if Box B	2,771.	2,206.			565.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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

SCHEDULE	Ε
(Form 1040)	

Department of the Treasury

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

Supplemental Income and Loss

OMB No. 1545-0074 2

40

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

▶ Attach to Form 1040, 1040-► Go to www.irs.gov/ScheduleE for instr

-SR, 1040-NR, or 1041.
ructions and the latest information.

Attachment Sequence No. 13	Your social security number								

MRUD	HUL NELATURI								-89-180		
Part	Income or Loss	From Rental Real Estate and Ro	yaltie	s Note:	lf you a	re in th	e business of	renting	g personal p	roperty,	use
	Schedule C. See	instructions. If you are an individual, rep	ort far	m rental ir	icome oi	r loss fr	om Form 48	35 on p	age 2, line 4	0.	
A Dic	l you make any payme	nts in 2020 that would require you to	file F	orm(s) 10)99? Se	e instr	uctions .		🗆 `	Yes 🛛	No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?							🗆 `	Yes 🗌	No
1a	Physical address of e	each property (street, city, state, ZIF	o code	e)							
Α	19-8-46/1 CHIN	APETA BHIMAVARAM WEST GO	DAV.	ARI,AN	DHRA	PRAD	ESH IN 5	3420	1		
В											
С											
1b	Type of Property	2 For each rental real estate prop	oerty l	isted		Fair	Rental	Perso	onal Use	Q	IV
	(from list below)	above report the number of fa	ir rent	al and		Days		D	ays		
Α	3	personal use days. Check the o if you meet the requirements to qualified joint venture. See inst	o file a	as a	Α		356 0]
В		qualified joint venture. See inst	ructio	ns.	В]
С					С]
Туре о	of Property:										
1 Sing	le Family Residence	3 Vacation/Short-Term Rental	5 La	nd	7	Self-	Rental				
2 Mul	ti-Family Residence	4 Commercial	6 Rc	yalties	8	Othe	r (describe)				
Incom	e:	Properties:			Α		В			С	
3	Rents received		3		5	560.					
4	Royalties received .		4								
Expen	ses:										
5	Advertising		5								
6	Auto and travel (see in	nstructions)	6								
7	0	nance	7		ç	950.					
8	Commissions		8								
9	Insurance		9								
10	Legal and other profe	ssional fees	10								
11	Management fees .		11		1,1	.00.					
12	Mortgage interest pai	d to banks, etc. (see instructions)	12								
13	Other interest		13								
14	Repairs		14		1,2	250.					
15	Supplies		15		1,3	300.					
16	Taxes		16								
17	Utilities		17		1,5	500.					
18	Depreciation expense	or depletion	18								
19	Other (list) ►		19								
20	Total expenses. Add	lines 5 through 19	20		6,1	.00.					
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If									
		instructions to find out if you must									
	file Form 6198		21		-5,5	540.					
22		estate loss after limitation, if any,									
	on Form 8582 (see in		22	(-5,54		()()
23a		eported on line 3 for all rental prope				23a		560).		
b		eported on line 4 for all royalty prop	erties			23b					
С		eported on line 12 for all properties				23c					
d		eported on line 18 for all properties				23d					
						6,100					
24								24			
25		sses from line 21 and rental real estate							25 (5,5	40.)
26		ate and royalty income or (loss).									
		V, and line 40 on page 2 do not								_	
	Schedule 1 (Form 104	10), line 5. Otherwise, include this ar	noun	t in the to	tal on l	ine 41	on page 2	. 2	26	-5,	540.

For Paperwork Reduction Act Notice, see the separate instructions.