E 1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		⁽⁹⁹⁾ 202	20	OMB No. 1545	5-0074	IRS Use	Only-	–Do not w	rite or staple	in this space.
Filing Status Check only one box.	lf yo	u checked the MFS box, enter the n	ame of y	ed filing separatel /our spouse. If yc	•				<i>,</i>		, ,	
Very first page	•	son is a child but not your dependent								Vauraa		
Your first name			Last na								cial securit	-
AMARNAT			-	AMREDDY							02 - 157	
n joint return, s	pouses	first name and middle initial	Last na	ne						Spouse	social sec	curity number
Home address 328 CARI		er and street). If you have a P.O. box, see E CT	instructio	ons.			,	Apt. no.		Check h	iere if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	S	tate	ZIP c	ode		•		ntly, want \$3 Checking a
EXTON						PA	193	341		0	ow will not	•
Foreign country	/ name		F	oreign province/sta	ate/cou	inty	Forei	gn postal co	de	your tax or refund.		
											You	Spouse
At any time du	ring 20	020, did you receive, sell, send, excl	nange, c	r otherwise acqu	iire an	y financial intere	est in a	any virtua	l cui	rrency?	Yes	🗙 No
Standard Deduction		eone can claim:	•			s a dependent en						
Age/Blindness	S You:	Were born before January 2, 1	956	Are blind	Spous	se: 🗌 Was bo	rn bef	ore Janua	ry 2	, 1956	🗌 ls bl	lind
Dependent	s (see	instructions):		(2) Social secu	urity	(3) Relations	qir	(4) 🗸	if qu	alifies for	r (see instru	ictions):
If more		irst name Last name		number	,	to you		Child ta				her dependents
than four	-							Γ				
dependents,											[
see instruction and check	s —										[
here 🕨 🗌	-										[
	1	Wages, salaries, tips, etc. Attach F	orm(s) \	N-2						1	(92,611.
Attach	2a	Tax-exempt interest	2a		b	Taxable interes	t.			2b		
Sch. B if	3a	Qualified dividends	3a	7.	b	Ordinary divide	nds .			3b		7.
required.	4a	IRA distributions	4a			Taxable amoun				4b		
	5a	Pensions and annuities	5a		b	Taxable amoun	ıt			5b		
Standard	6a	Social security benefits	6a		b	Taxable amoun	ıt			6b		
Deduction for-	7	Capital gain or (loss). Attach Sche	dule D if	required. If not r	equire	ed, check here)		7		2,425.
 Single or Married filing 	8	Other income from Schedule 1, lin								8		-6,680.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your total i	ncom	e			. 1	▶ 9		88,363.
Married filing	10	Adjustments to income:		2								
jointly or Qualifying	а	From Schedule 1, line 22				10	a					
widow(er),	b	Charitable contributions if you take					b					
\$24,800 • Head of	с	Add lines 10a and 10b. These are	your tot	al adjustments t	to inc	ome			. 1	► 10c	;	
household, \$18,650	11	Subtract line 10c from line 9. This	-	-					. 1	▶ 11		88,363.
 If you checked 	12	Standard deduction or itemized								12		12,400.
any box under Standard	13	Qualified business income deduct								13		
Deduction,	14									14		12,400.
see instructions.	15	Taxable income. Subtract line 14										75,963.
												1010

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

Form **1040** (2020)

Form 1040 (2020))										Page	e 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 🗌	4972	3			16	12,505	_
	17	Amount from Schedule 2, lir	ne3							17		_
	18	Add lines 16 and 17								18	12,505	
	19	Child tax credit or credit for	other dependen	ts						19		
	20	Amount from Schedule 3, lir	ne7							20		
	21	Add lines 19 and 20								21		_
	22	Subtract line 21 from line 18	. If zero or less,	enter -0						22	12,505	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10	0.				23	0	
	24	Add lines 22 and 23. This is	your total tax						. 🕨	24	12,505	
	25	Federal income tax withheld	from:									
	а	Form(s) W-2					25a	13	,084			
	b	Form(s) 1099					25b					
	с	Other forms (see instructions	s)				25c					
	d	Add lines 25a through 25c								25d	13,084	
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20)19 return					26		
qualifying child,	27	Earned income credit (EIC)			^N	io .	27					
attach Sch. EIC.	28	Additional child tax credit. A					28					
nontaxable combat pay,	29	American opportunity credit	from Form 8863	8, line 8			29					
see instructions.	30	Recovery rebate credit. See	instructions .				30		532			
	31	Amount from Schedule 3, lir	ne 13				31					
	32	Add lines 27 through 31. The	ese are your tota	al other paym	ents and	refunda	ble cr	edits	. 🕨	32	532	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					. 🕨	33	13,616	
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is th	ne amour	nt you	overpaid		34	1,111	
nerunu	35a	Amount of line 34 you want	refunded to you	I. If Form 8888	3 is attach	ied, chec	ck here			35a	1,111	
Direct deposit?	►b	Routing number 0 1 1	4 0 0 4	9 5	► c Typ	be: 🗙	Checl	king	Saving	s		
See instructions.	►d	Account number 3 8 8	0 0 4 8	8 9 2 3	3 7							
	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 amo	ount you owe	now .				. 🕨	37		
You Owe		Note: Schedule H and Sch		•						or 🗌		
For details on		2020. See Schedule 3, line 1			•							
how to pay, see instructions.	38	Estimated tax penalty (see in	nstructions) .			. 🕨	38					
Third Party	Do	you want to allow another	person to disc	uss this retu	rn with th	ne IRS?	See			l		
Designee	ins	tructions						Yes. Co	omplet	e below.	X No	
		signee's		Phone						ntification		
		ne 🕨		no. 🕨					oer (PIN	/		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com										
Here		ur signature		Date	Your occi						nt you an Identity	0.
	. 10	ur signature		Dale	rour occi	upation					IN, enter it here	
Joint return?					SOFTW	VARE I	DEVE1	LOPER	(s	ee inst.) 🕨		٦
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's	occupati	on				nt your spouse an	
Keep a copy for your records.	•									,	ection PIN, enter it h	ere
your recorde.									(S	ee inst.) 🕨		
		one no.	Dura and 1	Email address					יאדס		Observe in it	
Paid		parer's name	Preparer's signat		a		Date	10/0001	PTIN	00505	Check if:	
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA 1	L'ALLAM	02/	18/2021		82703	Self-employed	
Use Only		m's name ► GLOBAL TA							PI	none no. ((678)965-952	
	Fin	m's address ► 2530 Pebb	le Creek L	n Cummin	g GA 3	0041			Fi	rm's EIN 🕨		
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BA	A	REV	02/07/21 PRC)		Form 1040 (20	J20)

SCHEDULE	1
(Form 1040)	

Internal Revenue Service

Additional Income and Adjustments to Income

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

OMB No. 1545-0074
2020
Attachment Sequence No. 01

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
AMARNATH REDDY VALLAMREDDY	107-02-1579
	·

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2 a	
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	-6,680.
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	-6,680.
Par	t II Adjustments to Income		
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		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	
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 02/07/21 PRO	Schedu	le 1 (Form 1040) 2020

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

20

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.

Your social security number

107-02-1579

20

Attachment

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

Department of the Treasury

AMARNATH REDDY VALLAMREDDY

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 f Form(s) 8949, P line 2, column	rom art 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	5,699.	3,274.			2,425.
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	6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions					()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	7	2,425.			

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 lines below.		(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to le dollars.	(sales price)	(or other basis)	Form(s) 8949, Part II, line 2, column (g)		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	12 13				
13	13 Capital gain distributions. See the instructions					
14	14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions					()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on the back .						

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 2,425.
	• 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?	
	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 ()
	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.	

REV 02/07/21 PRO

Schedule D (Form 1040) 2020

Form	8949	

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

Attachment

20

Department of the Treasury Internal Revenue Service ► 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.

Isactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Sequence No. 12A

Name(3) shown on return	Social security number of taxpayer identification number
AMARNATH REDDY VALLAMREDDY	107-02-1579

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	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a co	amount in column (g), ade 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	04/03/20	10/15/20	5,699.	3,274.			2,425.	
2 Totals. Add the amounts in column negative amounts). Enter each to Schedule D, line 1b (if Box A abov above is checked), or line 3 (if Box	al here and inc e is checked), lir	lude on your 1e 2 (if Box B	5,699.	3,274.			2,425.	

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

(Form 1	040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)											<u> </u>
				, 1040-SR, 1040-NR, or 1041.							2020		
Internal Revenue Service (99)						ructions	Attacl Seque	Attachment Sequence No. 13					
Name(s) shown on return										Your so	cial securit		
AMAR	NATH REDDY	VALI	LAMREDDY							107-	02-157	9	
Part	Income of	or Los	s From Rental Rea	I Estate and Ro	yaltie	s Note	: If you a	are in th	e business (of renting	personal p	operty, ι	Jse
	Schedule	C. See	instructions. If you are	e an individual, rep	ort farr	m rental i	ncome o	or loss fi	om Form 4	835 on pa	ge 2, line 4	0.	
A Did	l you make any	payme	ents in 2020 that wo	uld require you to	file F	orm(s) 1	099? S	ee instr	uctions		🗆 🏻	íes 🛛	No
B If "	Yes," did you o	r will y	ou file required For	m(s) 1099?							🗆 `	/es 🗌	No
1a			each property (stree										
Α	1-24,GURA	VAREI	DDY PALEM PRA	KASAM DISTR	ICT Z	ANDHR	A PRAI	DESH	IN 5232	11			
В													
C			1										
1b	Type of Prop		2 For each rent	al real estate prop	perty I	isted			Rental		nal Use	QJ	V
	(from list be	low)	personal use	the number of fa days. Check the	QJV box only			Days		Days			
	3		if you meet th	e requirements to venture. See inst	o file a	sa	Α		365		0]
	+			venture. See mai	luctio	115.	B]
<u>с</u>	(Due so the						С]
	of Property:		0 Veestier/Ob	ut Tauna Dautal	5 1 -		-		Dentel				
-	le Family Resic		4 Commercial	ort-Term Rental				7 Self-		、 、			
Incom		ence		Properties:		yalties		s Othe	r (describe	<u>;)</u> 3		С	
3	-	1		-	3			620.		5		U	
4					4			020.					
Expen		veu .			-								
5					5			110.					
6	-		nstructions)		6			340.					
7		-	nance		7			200.					
8					8								
9					9								
10	Legal and othe	er profe	essional fees		10								
11	Management f	ees .			11								
12	Mortgage inter	est pai	id to banks, etc. (se	e instructions)	12								
13	Other interest.				13		б,	400.					
14	-				14			250.					
15	Supplies				15								
16					16								
17					17								
18		xpense	e or depletion .		18								
19	Other (list) ►				19			2.0.0					
20	-		lines 5 through 19		20		1,	300.					
21			line 3 (rents) and/o										
			instructions to find	•	21		-6	680.					
22			l estate loss after li				0,						
22			structions)		22	(-6.6	80.)	()		,
23a			eported on line 3 fc					23a	<i>\</i>	620			
b			eported on line 4 fc					23b			-		
С			eported on line 12					23c					
d			eported on line 18 f					23d					
е	Total of all amounts reported on line 20 for all properties												
24	Income. Add	positiv	e amounts shown o	on line 21. Do no	t inclu	ide any	losses			. 24	1		
25	Losses. Add ro	oyalty lo	sses from line 21 and	d rental real estate	losse	s from lir	ne 22. Ei	nter tota	al losses he	re. 2	5 (6,6	80.
26	Total rental re	eal est	ate and royalty ind	come or (loss).	Comb	ine lines	s 24 an	d 25. E	nter the re	sult			
			V, and line 40 on										
	Schedule 1 (Fo	orm 104	40), line 5. Otherwis	e, include this ar	nount	in the t	otal on	line 41	on page 2	. 26	5	-б,	680.

Supplemental Income and Loss

For Paperwork Reduction Act Notice, see the separate instructions.

SCHEDULE E

Schedule E (Form 1040) 2020

OMB No. 1545-0074

MAINE INDIVIDUAL INCOME TAX FORM 1040ME



01 01 **2020** to 12 31 2020 See instructions. **Print neatly in blue or black ink only**.

2020

Check here if this is an **AMENDED** return.

20021V0

١	AMARNATH REDDY Your First Name								MI		Your Social	Security Nu)2	1579
VALLAMREDDY Your Last Name											Spouse's S	ocial Securi	ty Numbe	r	
5	Spouse	's First Name							MI	Hoi	me Phone Ni	umber			
5	Spouse	's Last Name								Wo	rk Phone Nu	636 _{mber}	36	52 9	9994
C	32 Current	8 CARLISLE Mailing Address (PO Bo	-	r, street and apa	artment num	ber)	EXTC City or T					PA State	_	L934 P Code	
F	oreigr	country name							Fore	ign provir	nce/state/cou	inty	Foreign p	ostal o	code
A		PTFC/STFC.	Check the	airness Cred his box if you 25e. Otherw	are filing a	a return <u>on</u>	<u>ly</u> to claii	n the Pr	operty Ta	ax Fairne	ess Credit o	on line 25d			
		Clean Election Fund. M	jointly, wa	nt \$3 to go to th		You	Sp	ouse		-	ou were er RFISHING				
3 4 5 6 7		FILING STATUS (C Single Married filing jointly (Even if only one had Married filing separat social security number Head of household (W Qualifying widow(er) v (Year spouse died Composite Return Entities ONLY)	income) ely. Ente and full n ith qualify with depe	r spouse's ame above. ing person) ndent child)											
8 9	RI X	ESIDENCY STATUS Resident Part-Year Resident	(Check o 8a 10	,	Harbor " Re sident	esident	11 11a				ne nonreside ne resident)	ent)			f you are ule NRH
12	CHE	CK IF: You were:	12a	65 or over	12b	blind		Spouse	was:	12c	65 or c	over 1	2d	blind	
		r the TOTAL number o r the TOTAL number													1 0
ame	14	FEDERAL ADJUST	ED GRO	SS INCOME.					14				88	336	3.00
Inco	15a	a INCOME MODIFICATIONS - ADDITIONS. (From Schedule 1A, line 13.)												.00	
xable	15b	INCOME MODIFICATIONS - SUBTRACTIONS. (From Schedule 1S, line 29.) 15b												.00	
Calculate Your Taxable Income	16 17	MAINE ADJUSTED GROSS INCOME. (Line 14 plus 15a, minus line 15b.)							17						3.00 7.00
Calcula	18	EXEMPTION . (Multip CAUTION - your exe 1555	oly line 13	x \$4,300.)					,		18 EV 01/23/21 P	_{RO} Con	4 tinue on		0.00 2

ŝ



2002101

dits			DO	NOT ENTER \$ signs, commas, or de	ecimals:	
able Cre	19 20	INCOME TAX. (Find the tax	x for the am	nes 17 and 18.) ount on line 19 in the tax table ng the tax table or tax rate schedules	19	72566 .00
refund				ax-return-forms.).	20	4768 .00
Non	20a	TAX CREDIT RECAPTUR	E AMOUNT	S (Enclose worksheet(s) - see instruction	is). 20a	.00
Calculate Your Tax and Nonrefundable Credits	21	"Safe Harbor" residents of	only.) From	ear residents, nonresidents and Schedule NR, line 9 or NRH, line 11 return and TDY papers, if applicable.)	21	.00
ite Yo	22	TOTAL TAX. (Line 20 plus	line 20a mir	nus line 21)	22	4768 .00
Calcula	23	NONREFUNDABLE TAX C	CREDITS. (I	From Maine Schedule A, line 23.)	23	0.00
	24	NET TAX. (Line 22 minus lin	e 23.) (Nonr	esidents see instructions.)	24	4768 .00
Credits	25	TAX PAYMENTS. a Maine income tax withhe	eld. (Enclose	e W-2, 1099 and 1099ME forms.)	. ➡ 25a	4877.00
able (019 credit carried forward, extension al return. (Include any REAL ESTATE		
efunda					25b	.00
Tax Payments/Refundable Credits		c REFUNDABLE TAX CRE	EDITS. (Fro	m Maine Schedule A, line 7.)	25c	.00
Tax Pay		d Property Tax Fairness Crea (For Maine residents ar		e PTFC/STFC, line 12). (See instructions. r residents only.)) 25d	.00
				le PTFC/STFC, line 13 or 13a.) ents and part-year residents only.)	25e	.00
		f TOTAL. (Add lines 25a, b	o, c, d, and	e.)	25f	4877.00
	26			payment, if any, on original return or	26	.00
	27			ter a minus sign in the box to the left	27	4877 .00
	28			larger than line 24, enter amount e 24 is negative, enter line 27 here.)	28	109.00
	29			is larger than line 27, enter amount e instructions.)	29	.00
d Due	30	USE TAX (SALES TAX). (S	See instructi	ons.)	30	0.00
s / Refun	30a	SALES TAX ON CASUAL R	ENTALS OF	LIVING QUARTERS. (See instructions.)	30a	.00
utions	31	CHARITABLE CONTRIBUTIO	ONS and PA	RK PASSES. (From Maine Schedule CP, line	11.) 31	.00
Contribu	32 33			lines 30, 30a and 31.) – NOTE: If total 28, enter as amount due on line 34a		109.00
untary		CREDITED to 2021 estimated tax 3	33a	o.oo REFUND	🕈 33b	109 .00
Tax / Voli	IF YOU WOULD LIKE YOUR REFUND SENT DIRECTLY TO YOUR BANK ACCOU					less), see page 5 of the instructions and fill
Calculate Use Tax / Voluntary Contributions / Refund		Check here if this refund will go to an account outside the United	33c	Routing Number		
Calc		States.	33d	Account Number		
	33e	Type of Account:	Checking	Savings		

Name(s) as shown on Form 1040ME

IF



DO NOT ENTER \$ signs, commas, or decimals.

Your Social Security Number

A	AMARNATH REDDY VALLAMREDD	107 02 1579
	34a <i>TAX DUE</i> . (Add lines 29, 30, 30a and 31.) - NOTE : If total of lines 30, 30a and 31 is greater than line 28, enter the difference as an amount due on this line 34a	.00
TAX DUE	bUnderpayment Penalty. (Attach Form 2210ME.)Check here if you checked the box on Form 2210, line 17.34b	.00
TA	c TOTAL AMOUNT DUE. (Add lines 34a and 34b.) (Pay in full with return.)	.00
	EZ PAY at <u>www.maine.gov/revenue</u> or ENCLOSE CHECK payable to: Treasurer, State of Maine.	DO NOT SEND CASH.
	Important note If taxpayer is deceased, enter date of death. If spouse is deceased, enter date of death.	lanth) (Davi)
	(Month) (Day) (Year) (Mo	onth) (Day) (Year)

Third Party Do you want to allow another person to discuss this return with Maine Revenue Services? Yes (complete the following). X No. Designee (See page 5 of

the instructions.)		
Designee's name:	Phone no.:	Personal identification #:

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

SIGN HERE Keep a copy of this return for your records.	Your signature Spouse's signature (If joint return, both must sign)	Date signed Date signed	SOF'TWARE DEVELOP Your occupation Spouse's occupation
Paid Preparer's	Your email address		
Use Only	SYAM PRIYA RAM SAGAR GUPTA Preparer's signature	02 18 2021 _{Date}	678 965 9522 Preparer's phone number
	GLOBAL TAXES LLC Print preparer's name and name of business		P02082703 Preparer's SSN or PTIN

Avoid errors that delay processing of returns:

- Use black or blue ink. Do not use red ink.
- Be sure to enter amounts on correct lines.
- Line A. Check the Property Tax Fairness Credit/Sales Tax Fairness Credit box, if it applies.
- Line 20. Use the correct column from the tax table for your filing status.
- **Refund.** If you overpaid your tax, enter the amount you want to be refunded on line 33b.
- Double check social security numbers, filing status, and number of exemptions.
- Double check mathematical calculations.
- Be sure to sign your return.
- Enclose W-2 forms with the return.

If requesting a <u>REFUND</u>, mail to: Maine Revenue Services, P.O. Box 1066, Augusta, ME 04332-1066 If <u>NOT</u> requesting a refund, mail to: Maine Revenue Services, P.O. Box 1067, Augusta, ME 04332-1067

Payment Injured Plan Spouse