# Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

## 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 nevertue Service				
Submission Identification Number (SID)				
Taxpayer's name	Social sec	urity numb	ber	
ESWAR VAMSHI KOLLU	844-	38-077	7	
Spouse's name			urity numbe	r
				,
	0 (Enter year you	ı are au	thorizing.	.)
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.				
<b>1</b> Adjusted gross income		.   1	76	,357.
<b>2</b> Total tax				,859.
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099		. 3	12	8,843.
4 Amount you want refunded to you		. 4		,516.
5 Amount you owe		. 5		
Part II Taxpayer Declaration and Signature Authorization (Be sure you g	et and keep a c	opy of y	our retu	ırn)
return (original or amended) I am now authorizing. I consent to allow my intermediate service provid to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reas for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I author Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution ac payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financia authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancel business days prior to the payment (settlement) date. I also authorize the financial institutions invol taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or ame Electronic Funds Withdrawal Consent.	son for rejection of the prize the U.S. Treasure count indicated in the all institution to debit to terminate the author lation requests must ved in the processing to the payment. I	e transmisy and its of e tax preportion. The entry orization. The receipt of the electrical further accepts and the electrical entry accepts a contract and the electrical entry accepts and the elect	ssion, (b) the designated paration soft to this according revoke (wed no late ectronic parking which well and the design of the	ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the
Taxpayer's PIN: check one box only				
	generate my PIN	8 0 5	7   7   7	as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	gonorato my r mv	Enter five don't ente	digits, but r all zeros	do my
I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN <b>and</b> your return is filed using the Practitioner below.				
Your signature ►	Date ▶			
Spouse's PIN: check one box only				
	generate my PIN			ac my
ERO firm name	generate my i m	Enter five	digits, but	as my
signature on the income tax return (original or amended) I am now authorizing.			r all zeros	
I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN <b>and</b> your return is filed using the Practitioner below.				
Spouse's signature ▶	Date ►			
Practitioner PIN Method Returns Only—continu	e below			
Part III Certification and Authentication — Practitioner PIN Method Only				
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5 8 7 2 5	7 8 6	1 9 8	9
and the digital control of the contr		enter all ze		
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Pro-	am submitting this	return in a	accordance	
ERO's signature ▶	Date ►			
ERO Must Retain This Form — See Instruc				
Don't Submit This Form to the IRS Unless Reques				

# **£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 [ ou checked the MFS box, enter the loon is a child but not your depender	name of									
Your first name	and m	iddle initial	Last na	me					,	Your so	cial securi	ity number
ESWAR V	AMSH	I	KOLI	ŢŪ						844-	88-077	7
If joint return, s	pouse's	s first name and middle initial	Last na	me					,	Spouse'	s social se	curity number
Home address	,	er and street). If you have a P.O. box, se	e instructi	ons.				Apt. no.			ntial Electi	ion Campaign
		ce. If you have a foreign address, also c	omploto s	pages holow	Sto	to	710	code				ntly, want \$3
SHAKOPE		ce. II you have a loreigh address, also c	ompiete s	saces below. State ZIP code MN 55379					to go to this fund. Checking a			
Foreign countr			- 1	Foreign province/state/county Foreign postal code							ow will not cor refund	•
r oreign country	y Hairie			oreign province/state.	Couri	ıy	101	eigii postai c	oue :	your tax	You	Spouse
At any time du	ıring 20	020, did you receive, sell, send, exc	hange, c	or otherwise acquire	any	financial in	terest in	n any virtua	al curr	ency?	☐ Yes	X No
Standard Deduction		eone can claim:  You as a despouse itemizes on a separate retu	•				ent					
Age/Blindness	s You:	Were born before January 2,	1956	Are blind Sp	ouse	: Was	born be	efore Janu	ary 2,	1956	☐ Is b	lind
Dependents	s (see	instructions):		(2) Social securit	v	(3) Relation	onship	(4)	if qua	alifies fo	r (see instru	uctions):
If more	•	irst name Last name		number	,	to yo		1	ax cre	- 1		ther dependents
than four												
dependents,	_											
see instruction and check	S —											
here ▶ □												
	_1_	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1		87,275.
Attach	2a	Tax-exempt interest	2a		<b>b</b> T	axable inte	erest			2b		
Sch. B if required.	3a	Qualified dividends	3a	35.	<b>b</b> 0	ordinary div	/idends			3b		35.
required.	4a	IRA distributions	4a		<b>b</b> T	axable am	ount .			4b		
	5a	Pensions and annuities	5a		<b>b</b> T	axable am	ount .			5b		
Standard	6a	Social security benefits	6a		b T	axable am	ount .			6b		
Deduction for—	7	Capital gain or (loss). Attach Sche	edule D it	f required. If not req	uired	, check he	re .		<b>▶</b> □	7		-2,437.
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, lin	пе 9 .							8		-8,516.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your <b>total inc</b>	ome				. ▶	9		76,357.
<ul> <li>Married filing</li> </ul>	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 star	ndard deduction. See	e inst	ructions	10b					
• Head of	С	Add lines 10a and 10b. These are	your <b>to</b> t	tal adjustments to	inco	me			. ▶	100	,	
household, \$18,650	11	Subtract line 10c from line 9. This	is your	adjusted gross inc	ome				. ▶	11		76,357.
If you checked	12	Standard deduction or itemized	deduct	ions (from Schedule	e A)					12		12,400.
any box under Standard	13	Qualified business income deduc	tion. Atta	ach Form 8995 or Fo	orm 8	8995-A .				13		
Deduction, see instructions.	14	Add lines 12 and 13								14		12,400.
	15	Taxable income. Subtract line 14	from lin	e 11. If zero or less	ente	er -0				15		63,957.

Form 1040 (2020	))									Page	
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			. 16	9,859.	
	17	Amount from Schedule 2, lir						-			
	18	Add lines 16 and 17							. 18	9,859.	
	19	Child tax credit or credit for	other dependen	ts					. 19		
	20	Amount from Schedule 3, lir	ne 7						. 20		
	21	Add lines 19 and 20							. 21		
	22	Subtract line 21 from line 18							. 22	9,859.	
	23	Other taxes, including self-e	,						. 23	0.	
	24	Add lines 22 and 23. This is			•				▶ 24	9,859.	
	25	Federal income tax withheld	•					•		7,037.	
	a	Form(s) W-2				25a	1 12	2,84	3.		
	b	Form(s) 1099				25b		., 0 -			
	c	Other forms (see instruction				25c					
	d	Add lines 25a through 25c	•						. 25d	12,843.	
		2020 estimated tax paymen								12,043.	
<ul> <li>If you have a L qualifying child,</li> </ul>	26	Earned income credit (EIC)				1			. 20		
attach Sch. EIC.	27					27					
If you have nontaxable	28	Additional child tax credit. A				28					
combat pay,	29	American opportunity credit		•		29					
see instructions.	30	Recovery rebate credit. See				30		53	2.		
	31	Amount from Schedule 3, lir				31					
	32	Add lines 27 through 31. The	•						32	532.	
	33	Add lines 25d, 26, and 32. T	-						▶ 33	13,375.	
Refund	34	If line 33 is more than line 24				•	-		. 34	3,516.	
	35a	Amount of line 34 you want							35a	3,516.	
Direct deposit? See instructions.	►b	Routing number 1 1 1				Check	king 🗌	Savir	igs		
See instructions.	►d	Account number 4 8 8	0 6 1 1 1	8 4 0 2	2   4		Ļ				
	36	Amount of line 34 you want	applied to your	2021 estimate	ed tax ►	36					
Amount	37	Subtract line 33 from line 24	. This is the <b>amo</b>	ount you owe	now				▶ 37		
You Owe		Note: Schedule H and Sch	for								
For details on how to pay, see		2020. See Schedule 3, line 1									
instructions.	38	Estimated tax penalty (see in	nstructions) .		🕨	38					
<b>Third Party</b>		you want to allow another	•								
Designee	ins	tructions				. ▶	Yes. C	ompl	ete below.	<b>⋉</b> No	
		signee's ne ▶		Phone no. ▶				onal id ber (P	dentification		
<u> </u>			that I have evening		l accommonsting ach	a dula a				est of many length and an on	
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com									
Here		ur signature		Date	Your occupation					ent you an Identity	
	, 10	ar signature		Date	Tour occupation					PIN, enter it here	
Joint return?					SOFTWARE	ENGI	IEER		(see inst.) 🕨	•	
See instructions.	Sp	ouse's signature. If a joint return, I	<b>both</b> must sign.	Date	Spouse's occupat	tion				ent your spouse an	
Keep a copy for your records.	,								ldentity Pro (see inst.) ▶	tection PIN, enter it her	
,									(566 11151.)		
		one no.	I	Email address		T		DTI		T a	
Paid		eparer's name	Preparer's signat			Date	25 10225	PTI		Check if:	
Preparer	RV	SSMANIKUMARAPPANA	RVSSMANIK	UMARAPPAN	IA.	04/0	06/2021		090332	Self-employed	
Use Only		m's name ► GLOBAL TA							Phone no.	none no. (646)727-7157	
	Fir	Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Fir						Firm's EIN	► 30-1017196		
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV	03/25/21 PRO	Э		Form <b>1040</b> (202	

#### **SCHEDULE 1** (Form 1040)

**Additional Income and Adjustments to Income** 

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

ESWAR VAMSHI

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

KOLLU

► 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

844-88-0777

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	-8,516.
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	0 516
Par	t II Adjustments to Income	9	-8,516.
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government	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 <b>adjustments to income.</b> Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

#### SCHEDULE D (Form 1040)

### **Capital Gains and Losses**

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99) ► 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.

Name(s) shown on return Your social security number 844-88-0777 ESWAR VAMSHI KOLLU

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. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I 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 Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. 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 **Box A** checked . . . . . . . . . . . . . . . 25,827. 28,964. 11. -3,126.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 . . . . . . . . . . . . . . . . . . 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 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 -3,126.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 (h) Gain or (loss) (g) 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 Form(s) 8949, Part II, (sales price) (or other basis) 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 1,733. 2,422. 689. 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

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

689.

14

15

Schedule D (Form 1040) 2020 Page 2

### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -2,437.• 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 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 2,437.) • (\$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 X 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

Internal Revenue Service Name(s) shown on return ESWAR VAMSHI

Department of the Treasury

Social security number or taxpayer identification number

844-88-0777

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.

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.

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

<ul><li>☐ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>			_	sis <b>wasn't</b> report	ed to the IF	RS	
(a) Description of property (Example: 100 sh. XYZ Co.)	(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 <b>Note</b> below and see <i>Column</i> (e) in the separate instructions	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.  (g)  Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
AMERITRADE	Various	02/25/20	7,743.	8,245.	W	11.	-491.
Robinhood Securities LLC	Various	06/19/20	18,084.	20,719.			-2,635.
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 0	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	25,827.	28,964.		11.	-3,126.

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** Page **2** 

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side ESWAR VAMSHI KOLLU

Social security number or taxpayer identification number 844-88-0777

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.

(E) Long-term transactions	reported on	Form(s) 1099	-B showing bas	·		•	;)
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> 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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
AMERITRADE	Various	02/25/20	2,422.	1,733.			689.
2 Totals. Add the amounts in column negative amounts). Enter each total Schedule D. line 8h (if Box D above	al here and inc	lude on your					

**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.

above is checked), or line 10 (if Box F above is checked) ▶

2,422.

1,733.

### **SCHEDULE E**

(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** 

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

Your social security number

ESWA	R VAMSHI KOLLU									3-077	
Part	Income or Loss	From Rental Real Estate and Ro	yaltie	s Note	: If you a	are in th	e business c	of rent	ing per	sonal pr	operty, use
	Schedule C. See in	nstructions. If you are an individual, rep	ort far	m rental i	ncome d	or loss f	rom Form 48	<b>335</b> or	n page 2	2, line 40	0.
A Dic	l you make any paymen	its in 2020 that would require you to	file F	Form(s) 1	099? S	ee instr	ructions .			. 🗌 Y	'es 🔀 No
B If "		u file required Form(s) 1099?								. <u> </u>	'es 🗌 No
1a	Physical address of e	ach property (street, city, state, ZIF	cod	e)							
Α	MIYAPUR HYDERAI	BAD TELANGANA IN 500049									
В											
С											
1b	Type of Property	2 For each rental real estate prop					Rental	Per	sonal		QJV
	(from list below)	above, report the number of fa personal use days. Check the if you meet the requirements to	QJV k	iai and oox only <sub>r</sub>	_		Days		Days		
<u>A</u>	1	if you meet the requirements to qualified joint venture. See inst	file a	as a	Α		365			0	
В											<u> </u>
_ C	15				С						
	of Property:	0 V (OL				7 0 16	Б				
_	le Family Residence	3 Vacation/Short-Term Rental				7 Self-					
2 Mun	i-Family Residence	4 Commercial Properties:	6 K	oyalties		3 Othe	r (describe)				
		•	3		Α	T 0 0	В	•			С
<u>3</u> 4			4			500.					
Expen			-								
-			5						l.		
6	_	structions)	6			250.					
7	•	ance	7			580.					
8	•		8			425.					
9			9			123.					
10		ssional fees	10								
11			11								
12		to banks, etc. (see instructions)	12								
13			13								
14			14		1,	685.					
15	•		15			150.					
16			16			350.					
17	Utilities		17		2,	576.					
18	Depreciation expense	or depletion	18								
19	Other (list)		19								
20	Total expenses. Add li	nes 5 through 19	20		9,	016.					
21	Subtract line 20 from I	ine 3 (rents) and/or 4 (royalties). If									
	result is a (loss), see in	nstructions to find out if you must									
	file <b>Form 6198</b>		21		-8,	516.					
22		estate loss after limitation, if any,									
	on Form 8582 (see ins		22	[(	-8,5		(		)(		)
		ported on line 3 for all rental prope				23a		5	00.		
		ported on line 4 for all royalty prop	erties			23b					
		ported on line 12 for all properties				23c					
		ported on line 18 for all properties				23d			1.0		
		ported on line 20 for all properties	 			23e		9,0			
24	•	amounts shown on line 21. <b>Do no</b>		-					24		0 [16 \
25		ses from line 21 and rental real estate							25 (		8,516.)
26		te and royalty income or (loss).									
		<ul><li>/, and line 40 on page 2 do not</li><li>0), line 5. Otherwise, include this ar</li></ul>						on	26		-8,516.
	Solicadie i (i Oll II 104	o,, mio o. omionwide, moidue tillo al	<u>. IO</u> UIT		Jul OII		on page 2				0,010.

# Form **4952**

### **Investment Interest Expense Deduction**

► Go to www.irs.gov/Form4952 for the latest information.

► Attach to your tax return.

2020 Attachment Sequence No. 51

Identifying number

8

REV 03/25/21 PRO

0.

Form **4952** (2020)

OMB No. 1545-0191

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

For Paperwork Reduction Act Notice, see page 4.

ESWAR VAMSHI 844-88-0777 KOLLU Part I **Total Investment Interest Expense** 1 Investment interest expense paid or accrued in 2020 (see instructions) 1 15. 2 2 3 Total investment interest expense. Add lines 1 and 2 . . . . . . . 3 15. Part II **Net Investment Income** Gross income from property held for investment (excluding any net gain from 35. 4a 4b 35. 4c 0. Net gain from the disposition of property held for investment . . . . . . 4d Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions . . . . . . . . . . . . . . . . 4e 4f 0. Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 4h 0. 5 Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0- . . . . . 6 6 0. Part III **Investment Interest Expense Deduction** Disallowed investment interest expense to be carried forward to 2021. Subtract line 6 from 7 15.

**Investment interest expense deduction.** Enter the **smaller** of line 3 or line 6. See instructions

BAA





# 2020 Form M1, Individual Income Tax

ESWA	AR VAMSHI	KOLLU	8	44880777		08011994
Your Firs	st Name and Initial	Your Last Name	Yo	our Social Security Numbe	er (SSN)	Your Date of Birth
If a Joint	Return, Spouse's First Name and Initial	Spouse's Last Name	<u></u>	oouse's Social Security Nun	nber	Spouse's Date of Birth
3069	9 MOLINA ST	SHAKOPEE	M	IN 55379	(	Check if Address is:
	Home Address	City		ate ZIP Code	[	New Foreign
	Federal Filing Status (pla					
× (1)	) Single (2) Married Filing Jointly	y (3) Married Filing Separate Spouse Name		(4) Head of Househ	old (5	5) Qualifying Widow(er
Depe	ndents (see instructions	Spouse SSN				
Depende	ent 1 First Name	Dependent 1 Last Name	Do	ependent 1 SSN	Dependent	1 Relationship to You
Depende	ent 2 First Name	Dependent 2 Last Name	D	ependent 2 SSN	Dependent	2 Relationship to You
Depende	ent 3 First Name	Dependent 3 Last Name	De	ependent 3 SSN	Dependent	3 Relationship to You
	Your Federal Return (see in	ocratic/Farmer-Labor—12 Grassroot  nstructions)  0		Libertarian—16 Ge	gal Marijuana N eneral Campaigr 639 Federal taxab	957
A. wage	es, salaries, tips, etc. B. IR	A, pensions, and annuities	C. Unemployment	D.	rederal taxab	ie income
1	Federal adjusted gross income	(from line 11 of federal Form 10	040 and 1040-SR)		1■ _	76357
2	Additions to Minnesota income	from line 17 of Schedule M1M	(see instructions; enclos	se Schedule M1M)	. 2 🔳 _	
3	Add lines 1 and 2				. 3 _	76357
4	Itemized deductions (from School	edule M1SA) or your <b>standard</b> d	leduction (see instructio	ns)	. 4■ _	12400
5	Exemptions (determine from ins	tructions)			. 5■ _	
6 7	State income tax refund from lir Other subtractions from Minnes				. 6■ _	
,	(see instructions; enclose Sched				. 7■ _	
8	Total subtractions. Add lines 4 th	hrough 7			. 8 _	12400
9	Minnesota taxable income. Sub	tract line 8 from line 3. If zero or	less, leave blank		. 9 _	63957
10	Tax from the table in the Form	M1 instructions			10 _	3958
11	Alternative minimum tax (enclos	se Schedule M1MT)			11■ _	

REV 03/25/21 PRO

### 2020 M1, page 2



12 13	Add lines 10 and 11	12	3958
	Part-year residents and nonresidents: From Schedule M1NR, enter the amount from line 32 on line 13, from line 28 on line 13a, and from line 29 on line 13b (enclose Schedule M1NR)	13	<u>3958</u>
	13a ■0 13b ■0		
14	Other taxes, such as recapture amounts and the tax on lump-sum distributions (check appropriate boxes)		
	(a) Schedule M1HOME (b) Schedule M1529 (c) Schedule M1LS	14 ■	
15	Tax before credits. Add lines 13 and 14	15	3958
16	Amount from line 17 of Schedule M1C, Nonrefundable Credits (enclose Schedule M1C)	16 ■	
17	Subtract line 16 from line 15 (if result is zero or less, leave blank)	17	3958
18	Nongame Wildlife Fund contribution (see instructions)  This will reduce your refund or increase the amount you owe	18 ■	
19	Add lines 17 and 18	19	3958
20	Minnesota income tax withheld. Complete and enclose Schedule M1W to report		4804
	Minnesota withholding from Forms W-2, 1099, and W-2G (do not send)	20 ■	
21	Minnesota estimated tax and extension payments made for 2020	21 ■	
22	Amount from line 9 of Schedule M1REF, Refundable Credits (see instructions; enclose Schedule M1REF)	22 ■	
23	Total payments. Add lines 20 through 22	23	4804
24	<b>REFUND</b> . If line 23 is more than line 19, subtract line 19 from line 23 (see instructions).		
	For direct deposit, complete line 25	24 ■	846
25	Direct deposit of your refund (you must use an account not associated with a foreign bank):		
	Checking Savings 111000025 488061184024  Routing Number Account Number		
26 27	<b>AMOUNT YOU OWE</b> . If line 19 is more than line 23, subtract line 23 from line 19 (see instructions)		
	this amount from line 24 or add it to line 26 (enclose Schedule M15)		
	OU PAY ESTIMATED TAX and want part of your refund credited to estimated tax, complete lines 28 and 29.		
28	Amount from line 24 you want sent to you	28 ■	
29	Amount from line 24 you want applied to your 2021 estimated tax	29 ■	
Тахр	ayer: I declare that this return is correct and complete to the best of my knowledge and belief.		
	Signature Spouse's Signature (If Filing Jointly)	Dat	re (MM/DD/YYYY)
	L5226733 ESWARVAMSHIKOLLU@GMAIL.C	COM	
•	SSMANIKUMARAPPANA 04062021	DΩ	2000222
	Preparer's Signature Date (MM/DD/YYYY)		12090332 N or VITA/TCE # (required)
	57277157 KUMAR@GTAXFILE.COM		, (-4-22)
	arer's Daytime Phone Preparer's Email Address		
	I do not want my paid preparer to file my return electronically.  I authorize the Minnesota Department of Revenue with my paid preparer or the third-party designee		

Include a copy of your 2020 federal return and schedules.

1031

Mail to: Minnesota Individual Income Tax, St. Paul, MN 55145-0010

REV 03/25/21 PRO





## 2020 Schedule M1W, Minnesota Income Tax Withheld

Complete this schedule to report Minnesota income tax withheld. Include this schedule when you file your return.

	SWAR VAMSHI		KOLLU					30777 al Security Number
fa	Joint Return, Spouse's F	irst Name and Initial	Spouse's La					Social Security Number
lf co	you received a feder mplete this schedul nounts to the neares -2G; keep them with	ral Form W-2, 1099 e to determine line st whole dollar. You n your tax records. nd Minnesota tax w	, W-2G, 1042- 20 of Form N I must include All instruction	S, or Minnesota Sch 11. List only the for this schedule when as are included on the	ms that rep n you file yo nis schedule	ort Minnesota incom our return. <b>DO NOT</b> :	Minnesota ne tax withh send in your	income tax withheld, eld. Round dollar Forms W-2, 1099, or
	A	B—Box 13	C—Box 15		D—Box	16	Е—Вох 1	17
	If the Form W-2 is for:	If Retirement Plan	Employer's	seven-digit Minnesota	State wa	ages, tips, etc.	Minneso	ota tax withheld
	<ul><li>you, enter 1</li></ul>	box is checked,	Tax ID Numb	per	(round t	o nearest whole dollar)	(round to	o nearest whole dollar)
	• spouse, enter 2	mark an X below.		F4F0000		07075		4004
	a1 <u>1</u>	b1	c1 MN	5452889	d1	87275	e1	4804
	a2	b2	c2 MN		d2		e2	
	a3	b3	c3 MN		d3		e3	
	a4	b4	c4 MN		d4		e4	
	a5	b5	c5 MN		d5		e5	
	Subtotal for addition	nal Forms W-2 <i>(fron</i>	n line 5 on pag	e 2)				
	Total Minnesota tax	withheld on all Fo	rms W-2 (add	amounts in line 1, co	lumn E)		1■	4804
2	Minnesota tax within  A  If the Form 1099, W-2G  you, enter 1  spouse, enter 2		<b>B</b> Payer's seve	042-S. If you have mo	<b>C</b> Income	r forms, complete line amount (see the table on k for amounts to include)	<b>D</b> Minne	ck. esota tax withheld d to nearest whole dollar)
	a1		b1 MN		c1		d1	
	a2		b2 MN		c2		d2	
	a3		b3 MN		c3		d3	
	a4		b4 MN		c4		d4	
	Subtotal for addition	nal 1099, W-2G, and	d 1042-S (from	line 6 on page 2)				
	Total Minnesota tax	withheld on all 10	99, W-2G, and	<b>1042-S</b> (add amoun	ts in line 2, o	column D)	2■	
3	Total Minnesota tax							
		•					3 ■	
4	<b>Total.</b> Add the Minn			nd 3.			4 ■	4804

Include this schedule with your Form M1. If required, include Schedules KPI, KS, and KF.

# **£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 [ ou checked the MFS box, enter the loon is a child but not your depender	name of									
Your first name	and m	iddle initial	Last na	me					,	Your so	cial securi	ity number
ESWAR V	AMSH	I	KOLI	ŢŪ						844-	88-077	7
If joint return, s	pouse's	s first name and middle initial	Last na	me					,	Spouse'	s social se	curity number
Home address	,	er and street). If you have a P.O. box, se	e instructi	ons.				Apt. no.			ntial Electi	ion Campaign
		ce. If you have a foreign address, also c	omploto s	pages holow	Sto	to	710	code				ntly, want \$3
SHAKOPE		ce. II you have a loreigh address, also c	ompiete s	saces below. State ZIP code MN 55379					to go to this fund. Checking a			
Foreign countr			- 1	Foreign province/state/county Foreign postal code							ow will not cor refund	•
r oreign country	y Hairie			oreign province/state.	Couri	ıy	101	eigii postai c	oue :	your tax	You	Spouse
At any time du	ıring 20	020, did you receive, sell, send, exc	hange, c	or otherwise acquire	any	financial in	terest in	n any virtua	al curr	ency?	☐ Yes	X No
Standard Deduction		eone can claim:  You as a despouse itemizes on a separate retu	•				ent					
Age/Blindness	s You:	Were born before January 2,	1956	Are blind Sp	ouse	: Was	born be	efore Janu	ary 2,	1956	☐ Is b	lind
Dependents	s (see	instructions):		(2) Social securit	v	(3) Relation	onship	(4)	if qua	alifies fo	r (see instru	uctions):
If more	•	irst name Last name		number	,	to yo		1	ax cre	- 1		ther dependents
than four												
dependents,	_											
see instruction and check	S —											
here ▶ □												
	_1_	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1		87,275.
Attach	2a	Tax-exempt interest	2a		<b>b</b> T	axable inte	erest			2b		
Sch. B if required.	3a	Qualified dividends	3a	35.	<b>b</b> 0	ordinary div	/idends			3b		35.
required.	4a	IRA distributions	4a		<b>b</b> T	axable am	ount .			4b		
	5a	Pensions and annuities	5a		<b>b</b> T	axable am	ount .			5b		
Standard	6a	Social security benefits	6a		b T	axable am	ount .			6b		
Deduction for—	7	Capital gain or (loss). Attach Sche	edule D it	f required. If not req	uired	, check he	re .		<b>▶</b> □	7		-2,437.
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, lin	пе 9 .							8		-8,516.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your <b>total inc</b>	ome				. ▶	9		76,357.
<ul> <li>Married filing</li> </ul>	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 star	ndard deduction. See	e inst	ructions	10b					
• Head of	С	Add lines 10a and 10b. These are	your <b>to</b> t	tal adjustments to	inco	me			. ▶	100	,	
household, \$18,650	11	Subtract line 10c from line 9. This	is your	adjusted gross inc	ome				. ▶	11		76,357.
If you checked	12	Standard deduction or itemized	deduct	ions (from Schedule	e A)					12		12,400.
any box under Standard	13	Qualified business income deduc	tion. Atta	ach Form 8995 or Fo	orm 8	8995-A .				13		
Deduction, see instructions.	14	Add lines 12 and 13								14		12,400.
	15	Taxable income. Subtract line 14	from lin	e 11. If zero or less	ente	er -0				15		63,957.

Form 1040 (2020	))									Page	
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			. 16	9,859.	
	17	Amount from Schedule 2, lir						-			
	18	Add lines 16 and 17							. 18	9,859.	
	19	Child tax credit or credit for	other dependen	ts					. 19		
	20	Amount from Schedule 3, lir	ne 7						. 20		
	21	Add lines 19 and 20							. 21		
	22	Subtract line 21 from line 18							. 22	9,859.	
	23	Other taxes, including self-e	,						. 23	0.	
	24	Add lines 22 and 23. This is			•				▶ 24	9,859.	
	25	Federal income tax withheld	•					•		7,037.	
	a	Form(s) W-2				25a	1 12	2,84	3.		
	b	Form(s) 1099				25b		., 0 -			
	c	Other forms (see instruction				25c					
	d	Add lines 25a through 25c	•						. 25d	12,843.	
		2020 estimated tax paymen								12,043.	
<ul> <li>If you have a L qualifying child,</li> </ul>	26	Earned income credit (EIC)				1			. 20		
attach Sch. EIC.	27					27					
If you have nontaxable	28	Additional child tax credit. A				28					
combat pay,	29	American opportunity credit		•		29					
see instructions.	30	Recovery rebate credit. See				30		53	2.		
	31	Amount from Schedule 3, lir				31					
	32	Add lines 27 through 31. The	•						32	532.	
	33	Add lines 25d, 26, and 32. T	-						▶ 33	13,375.	
Refund	34	If line 33 is more than line 24				•	-		. 34	3,516.	
	35a	Amount of line 34 you want							35a	3,516.	
Direct deposit? See instructions.	►b	Routing number 1 1 1				Check	king 🗌	Savir	igs		
See instructions.	►d	Account number 4 8 8	0 6 1 1 1	8 4 0 2	2   4		Ļ				
	36	Amount of line 34 you want	applied to your	2021 estimate	ed tax ►	36					
Amount	37	Subtract line 33 from line 24	. This is the <b>amo</b>	ount you owe	now				▶ 37		
You Owe		Note: Schedule H and Sch	for								
For details on how to pay, see		2020. See Schedule 3, line 1									
instructions.	38	Estimated tax penalty (see in	nstructions) .		🕨	38					
<b>Third Party</b>		you want to allow another	•								
Designee	ins	tructions				. ▶	Yes. C	ompl	ete below.	<b>⋉</b> No	
		signee's ne ▶		Phone no. ▶				onal id ber (P	dentification		
<u> </u>			that I have evening		l accommonsting ach	a dula a				est of many length and an on	
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com									
Here		ur signature		Date	Your occupation					ent you an Identity	
	, 10	ar signature		Date	Tour occupation					PIN, enter it here	
Joint return?					SOFTWARE	ENGI	IEER		(see inst.) 🕨	•	
See instructions.	Sp	ouse's signature. If a joint return, I	<b>both</b> must sign.	Date	Spouse's occupat	tion				ent your spouse an	
Keep a copy for your records.	,								ldentity Pro (see inst.) ▶	tection PIN, enter it her	
,									(566 11151.)		
		one no.	I	Email address		T		DTI		T a	
Paid		eparer's name	Preparer's signat			Date	25 10225	PTI		Check if:	
Preparer	RV	SSMANIKUMARAPPANA	RVSSMANIK	UMARAPPAN	IA.	04/0	06/2021		090332	Self-employed	
Use Only		m's name ► GLOBAL TA							Phone no.	none no. (646)727-7157	
	Fir	Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Fir						Firm's EIN	► 30-1017196		
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV	03/25/21 PRO	Э		Form <b>1040</b> (202	

# 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

ESWAR VAMSHI

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

KOLLU

► 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

844-88-0777

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	-8,516.
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,	0	0 516
Par	t II Adjustments to Income	9	-8,516.
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 <b>adjustments to income.</b> Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

#### SCHEDULE D (Form 1040)

### **Capital Gains and Losses**

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99) ► 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.

Name(s) shown on return Your social security number 844-88-0777 ESWAR VAMSHI KOLLU

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. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I 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 Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. 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 **Box A** checked . . . . . . . . . . . . . . . 25,827. 28,964. 11. -3,126.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 . . . . . . . . . . . . . . . . . . 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 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 -3,126.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 (h) Gain or (loss) (g) 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 Form(s) 8949, Part II, (sales price) (or other basis) 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 1,733. 2,422. 689. 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

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

689.

14

15

Schedule D (Form 1040) 2020 Page 2

### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -2,437.• 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 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 2,437.) • (\$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 X 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

Internal Revenue Service Name(s) shown on return ESWAR VAMSHI

Department of the Treasury

Social security number or taxpayer identification number

844-88-0777

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.

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.

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

<ul><li>☐ (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS</li><li>☐ (C) Short-term transactions not reported to you on Form 1099-B</li></ul>									
(a) Description of property (Example: 100 sh. XYZ Co.)	(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 <b>Note</b> below and see <i>Column</i> (e) in the separate instructions	Adjustment, if any, to gain or loss.  If you enter an amount in column (g), enter a code in column (f).  See the separate instructions.  (f) (g)  Code(s) from Amount of adjustment		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)		
AMERITRADE	Various	02/25/20	7,743.	8,245.	W	11.	-491.		
Robinhood Securities LLC	Various	06/19/20	18,084.	20,719.			-2,635.		
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), <b>lir</b>	lude on your ne 2 (if Box B	25,827.	28,964.		11.	-3,126.		

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 Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side ESWAR VAMSHI KOLLU

Social security number or taxpayer identification number 844-88-0777

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.

<ul><li>✗ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on	Form(s) 1099	-B showing bas	•		`	9)
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 <b>Note</b> below, and see <i>Column</i> (e) in the separate instructions	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
(Example: 100 sh. XYZ Ćo.)					(f) Code(s) from instructions	(g) Amount of adjustment	
AMERITRADE	Various	02/25/20	2,422.	1,733.			689.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 8b (if Box D above	al here and inc	lude on your					

**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.

2,422.

above is checked), or line 10 (if Box F above is checked) ▶

1,733.

### **SCHEDULE E**

(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** 

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

Your social security number

ESWA	R VAMSHI KOLLU									3-077		
Part	Income or Loss	From Rental Real Estate and Ro	yaltie	s Note	: If you a	are in th	e business c	of rent	ing per	sonal pr	operty, use	
	Schedule C. See in	nstructions. If you are an individual, rep	ort far	m rental i	ncome d	or loss f	rom Form 48	<b>335</b> or	n page 2	2, line 40	Ο.	
A Dic	l you make any paymen	its in 2020 that would require you to	file F	Form(s) 1	099? S	ee instr	ructions .			. N	'es 🔀 No	
B If "		u file required Form(s) 1099?								Y	'es 🗌 No	
1a	Physical address of e	ach property (street, city, state, ZIF	cod	e)								
Α	MIYAPUR HYDERA	BAD TELANGANA IN 500049										_
В												_
С												_
1b	Type of Property	2 For each rental real estate prop					Rental				QJV	
	(from list below)	above, report the number of fa personal use days. Check the if you meet the requirements to	QJV box only			Days		Days				
<u>A</u>	1	if you meet the requirements to qualified joint venture. See inst	o file a	as a	Α	365				0		_
В		qualified joint venture. See inst	iluctic	) i i 5.	В							_
_ C	15				С							_
	of Property:	0 V (OL				7 0 16	Б					
_	le Family Residence	3 Vacation/Short-Term Rental				7 Self-						
2 Mun	ti-Family Residence	4 Commercial Properties:	6 R	oyalties		3 Othe	r (describe)					_
		•	3		Α	T 0 0	В	•			С	_
<u>3</u> 4			4			500.						_
Expen			4	+								_
-			5									
6	_	structions)	6			250.						-
7	,	ance	7			580.						-
8	•		8			425.						-
9			9			123.						-
10		ssional fees	10									_
11			11									-
12		to banks, etc. (see instructions)	12									_
13			13									-
14			14		1,	685.						_
15	•		15			150.						_
16			16			350.						_
17	Utilities		17		2,	576.						
18	Depreciation expense	or depletion	18									
19	Other (list) ▶		19									
20	Total expenses. Add li	nes 5 through 19	20		9,	016.						_
21	Subtract line 20 from I	ine 3 (rents) and/or 4 (royalties). If										
	result is a (loss), see in	nstructions to find out if you must										
	file <b>Form 6198</b>		21		-8,	516.						_
22		estate loss after limitation, if any,										
	on Form 8582 (see ins		22	[(	-8,5		(		)(			)
		ported on line 3 for all rental prope				23a		5	00.			
		ported on line 4 for all royalty prop	erties			23b						
		ported on line 12 for all properties				23c						
		ported on line 18 for all properties				23d						
		ported on line 20 for all properties				23e		9,0				
24	<b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include any losses								24		0 516	_
25	• •	ses from line 21 and rental real estate							25 (		8,516.	)
26		te and royalty income or (loss).										
		/, and line 40 on page 2 do not						on	26		-8,516.	
	Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on pag								26		-0,510.	

# Form **4952**

### **Investment Interest Expense Deduction**

► Go to www.irs.gov/Form4952 for the latest information.

► Attach to your tax return.

2020 Attachment Sequence No. 51

Identifying number

8

REV 03/25/21 PRO

0.

Form **4952** (2020)

OMB No. 1545-0191

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

For Paperwork Reduction Act Notice, see page 4.

ESWAR VAMSHI 844-88-0777 KOLLU Part I **Total Investment Interest Expense** 1 Investment interest expense paid or accrued in 2020 (see instructions) 1 15. 2 2 3 Total investment interest expense. Add lines 1 and 2 . . . . . . . 3 15. Part II **Net Investment Income** Gross income from property held for investment (excluding any net gain from 35. 4a 4b 35. 4c 0. Net gain from the disposition of property held for investment . . . . . . 4d Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions . . . . . . . . . . . . . . . . 4e 4f 0. Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 4h 0. 5 Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0- . . . . . 6 6 0. Part III **Investment Interest Expense Deduction** Disallowed investment interest expense to be carried forward to 2021. Subtract line 6 from 7 15.

**Investment interest expense deduction.** Enter the **smaller** of line 3 or line 6. See instructions

BAA