

### SHOONYA TAX SOLUTIONS INC

16192 COASTAL HIGHWAY Lewes, DE 19958 info@shoonyatax.com Phone: (844)746-6692 Fax

May 25, 2021

Srinivasa Rao Balle & Padma Brinda Neelakantam 24669 Byrne Meadow Square Aldie, VA 20105

Subject: Preparation of Your 2020 Tax Returns

Sriniyasa Rao Balle & Padma Brinda Neelakantam:

Thank you for choosing SHOONYA TAX SOLUTIONS INC to assist you with your 2020 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide.

We will prepare your 2020 federal and state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to the efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call us if you have concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee is based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. All accounts not paid within thirty (30) days are subject to interest charges to the extent permitted by state law.

We will return your original records to you at the end of this engagement. Store these records, along with all supporting documents, in a secure location. We retain copies of your records and our work papers from your engagement for up to seven years, after which these documents will be destroyed.

If you have not selected to e-file your returns with our office, you will be solely responsible to file the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them. Our engagement to prepare your 2020 tax returns will conclude with the delivery of the completed returns to you, or with e-filed returns, with your signature and our subsequent submittal of your tax return.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.

Thank you for the opportunity to be of service. If you have any questions, contact our office at (844)746-6692.  Sincerely,							
Manoj Kumar Nagula SHOONYA TAX SOLUTIONS INC  (Both spouses must sign for preparation of joint returns.)  Accepted By:							
Taxpayer							
Date							

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May 25, 2021

Srinivasa Rao Balle & Padma Brinda Neelakantam 24669 Byrne Meadow Square Aldie, VA 20105

Srinivasa Rao Balle & Padma Brinda Neelakantam:

Return Type	Refund/Balance Due	Transaction Method
Federal Income Tax	\$1,304 Refund	Direct Deposit to **2879
Virginia Income Tax	\$179 Refund	Direct Deposit to **2879

The following return(s) were e-filed and accepted:

Federal Income Tax Virginia Income Tax

#### Federal Income Tax

Quarter	Estimate Due	Due Date	Transaction Method
lst	\$550	April 15, 2021	Mail a check
2nd	\$550	June 15, 2021	Mail a check
3rd	\$550	September 15, 2021	Mail a check
4th	\$550	January 18, 2022	Mail a check

Sincerely,

Manoj Kumar Nagula SHOONYA TAX SOLUTIONS INC

### SHOONYA TAX SOLUTIONS INC

16192 COASTAL HIGHWAY Lewes, DE 19958 info@shoonyatax.com Phone: (844)746-6692 Fax:

May 25, 2021

Srinivasa Rao Balle & Padma Brinda Neelakantam 24669 Byrne Meadow Square Aldie, VA 20105

Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- \* Interviews regarding your tax situation
- \* Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- \* Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (844)746-6692.

Sincerely,

Manoj Kumar Nagula SHOONYA TAX SOLUTIONS INC

<b>-</b> ■	040	Department of the Treasury-Internal Revenue Service	(99
5	()4()	Department of the Treasury-Internal Revenue Service U.S. Individual Income Tax Retu	rn

2020

OMB No. 1545-0074

IRS Use Only-Do not write or stable in this space

Filing Status	s 🗌 :	Single X Married filing jointly	Mar	ried filing s	eparatel	у (М	FS) [	Head of	househ	old (HOH)	QL	ıalifyi	ng wida	ow(e	r) (QW)
Check only one box.	If yo	ou checked the MFS box, enter the na	ame of												
		on is a child but not your dependent	_								T				
Your first name		ddle initial	Last n										securit	•	mber
SRINIVASA			BAL										-6338		
		first name and middle initial	Last n								1 '				y numbe
PADMA BRIN				LAKANTA	M						236	-57-	-5943		
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.					Ap	t. no.	Presid	lentia	I Election	n C	ampaign
24669 BYRN	NE ME	ADOW SQUARE							$\perp$		-		if you, o	•	
City, town, or p	ost offic	e. If you have a foreign address, also cor	mplete s	paces below			State		ZIP code	e			ng jointly fund. Ch		
ALDIE							V	4	2010	)5			ill not ch		•
Foreign country	name			Foreign pro	vince/sta	te/co	unty		Foreign	postal code	your ta	x or r	efund.		
													You		Spouse
At any time dur	ing 202	20, did you receive, sell, send, excha	nge, or	otherwise	acquire	any f	inancia	l interest ir	any vir	tual curren	icy?		Yes	X	No
Standard	Som	eone can claim: You as a de	penden	ıt 🗌 Y	our spo	use a	as a de	pendent							
Deduction		Spouse itemizes on a separate retu	m or yo	ou were a d	ual-statı	ıs ali	ien								
Age/Blindness	You	: Were born before January 2, 1	956	☐ Are blir	nd !	Spou	ıse: [	☐ Was bo	rn befor	e January	2. 1956	Г	☐ Is bli	ind	
Dependents		instructions):			(2) Soci			(3) Relation		(4) Check					ions).
•		irst name Last name		number to you Child tax credit					1	dit for othe		,			
If more than four dependents,	KUS	HVITHA SAI BALLE		787-52-6890 DAUGHTI		ΓER	ER X		$\top$		1				
										Ť	i i	$\top$	一市	ī	
see instructions	-										<u> </u>	+	ī	Ť	
and check here ▶ □											<u> </u>	+	ī	Ť	
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2							<u>.</u> _	1		13	1,847
Attach	2a	Tax-exempt interest	2a )			b	Taxa	ble interes	t		. 2	2b			239
Sch. B if	За	Qualified dividends	3a		98	b	Ordin	ary divider	nds		. 3	Bb			98
required.	4a	IRA distributions	4a			b	Taxa	ble amoun	t		. 4	lb			
	5a	Pensions and annuities	5a			b	Taxa	ble amoun	t		. 5	ib			
Standard	6a	Social security benefits	6a			b	Taxa	ble amoun	t		. 6	ib di			
Deduction for-	7	Capital gain or (loss). Attach Scheo	dule D i	f required.	If not re	quire	d, chec	k here .		>		7			6,564
Single or Married filing	8	Other income from Schedule 1, line	9			٠.						8			
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is you	total ir	ncom	ne				•	9		13	8,748
Married filing	10	Adjustments to income:													
jointly or Qualifying	а	From Schedule 1, line 22						10	a	6,0	144				
widow(er),	b	Charitable contributions if you take	Charitable contributions if you take the standard deduction. See instructions 10b												
\$24,800 Head of	С	Add lines 10a and 10b. These are your total adjustments to income							<b>▶</b> 10	0с		ĺ	6,044		
household,	11	Subtract line 10c from line 9. This	•	•							▶ 1	1			2,704
\$18,650 L If you checked	12	Standard deduction or itemized	•		-						. 1	2			4,800
any box under Standard	13	Qualified business income deduction		•			•				_	3			,
Deduction, see instructions.	14	Add lines 12 and 13									. 1	4		2	4,800
see instructions.	15	Taxable income. Subtract line 14	from lin	ne 11. lf ze	ro or les	s, er	nter -0-	<u>.</u>	<u></u>	<u></u>	. 1	5			7,904

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

Form 1040 (2020)

Form 1040 (2020	))	SRINIVASA RAO BALLE & PADMA	NEELAKANTA	М		3	88-73	-6338 Page 2
	16	Tax (see instructions). Check if any from F	orm(s): 1 🗌 881	4 2 🗌 49	972 <b>3</b> 🗌		16	15,312
	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	15,312
	19	Child tax credit or credit for other depende	nts				19	2,000
	20	Amount from Schedule 3, line 7					20	
	21	Add lines 19 and 20					21	2,000
	22	Subtract line 21 from line 18. If zero or les	*				22	13,312
	23	Other taxes, including self-employment tax					23	
	24	Add lines 22 and 23. This is your total tax	x			>	24	13,312
	25	Federal income tax withheld from:			1 1			
	а	Form(s) W-2				11,11	5	
	b	Form(s) 1099					_	
	С	Other forms (see instructions)	• • • • • • •		25c		_	
	d	Add lines 25a through 25c					25d	11,116
If you have a	26	2020 estimated tax payments and amount			, ,		26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)	• • • • • • • •		27		_	
If you have	28	Additional child tax credit. Attach Schedule	8812		28		_	
nontaxable combat pay,	29	American opportunity credit from Form 886					_	
see instructions.	30	Recovery rebate credit. See instructions				3,50	9	
	31	Amount from Schedule 3, line 13					_	
	32	Add lines 27 through 31. These are your	32	3,500				
	33	Add lines 25d, 26, and 32. These are you	33	14,616				
Refund	34	If line 33 is more than line 24, subtract lin	34	1,304				
	35a	Amount of line 34 you want refunded to	35a	1,304				
Direct deposit? See instructions.	►b	Routing number 0 6 1 0 0 0						
oce manuchons.	►a	Account number 3 3 4 0 4 9						
	36	Amount of line 34 you want applied to your 2021 estimated tax ▶ 36						
Amount	37	Subtract line 33 from line 24. This is the amount you owe now						0
You Owe For details on		Note: Schedule H and Schedule SE filers		-	of the taxes you o	we for		
how to pay, see		2020. See Schedule 3, line 12e, and its ins			1 1			
instructions.	38	Estimated tax penalty (see instructions)						
Third Party		you want to allow another person to discuss		ne IRS? See		• Commiste	halaw	₩.
Designee		signee's	Phone			s. Complete Personal iden		X No
		me ►	no. ►			number (PIN)		
Sign	Under	penalties of perjury, I declare that I have examine	d this return and ac	companying so	chedules and stateme	nts, and to the	best of r	ny knowledge and
	belief,	they are true, correct, and complete. Declaration	of preparer (other th	an taxpayer) is	s based on all informa	tion of which p	reparer h	as any knowledge.
Here	You	ur signature	Date	Your occupa	tion			nt you an Identity
Joint return?	657	22	02 26 2021	COETHAD	E ENCTUEED		e inst.)	IN, enter it here
See instructions.	657		02-26-2021		E ENGINEER			nt your spouse an
Keep a copy for	Spo	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occ	cupation			ection PIN, enter it here
your records.	026	82	02-26-2021	SOFTWAR	E ENGINEER	(se	e inst.) 🕨	•
	Ph	one no.	Email address S	RINIVASA	RAOBALLE@GMA	IL.COM		
	Pre	Preparer's signature Date PTIN						Check if:
Paid	MAN	NOJ KUMAR NAGULA 05-25-2021 P02060896				96	Self-employed	
Preparer	Pre	Preparer's name MANOJ KUMAR NAGULA Phone no. 844-746-6692					)2	
Use Only	Firr	m's name ► SHOONYA TAX SOLUTION	IS INC					
-	Firr	m's address ▶ 16192 COASTAL HIGHWA						
		Lewes, DE 19958				Firr	n's EIN ▶	84-4291993

Go to www.irs.gov/Form1040 for instructions and the latest information.

Form 1040 (2020)

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

# Additional Income and Adjustments to Income

OMB No. 1545-0074

2020

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

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

Name(s) shown on Form 1040,1040-SR, or 1040-NR SRINIVASA RAO BALLE & PADMA NEELAKANTAM Your social security number 388-73-6338

Г	art 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	
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
Pa	rt 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	44
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	6,000
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	6,044

#### SCHEDULE D (Form 1040)

# **Capital Gains and Losses**

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) ▶ Go to www.irs.gov/ScheduleD for instructions and the latest information.

Sequence No. 12

▶ 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 SRINIVASA RAO BALLE & PADMA NEELAKANTAM 388-73-6338 Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes X No

ir Yes, attach Form 8949 and see its instructions for additional	requirements for	reporting your gair	1 Or IOSS.	
Part I Short-Term Capital Gains and Losses - Ge	nerally Assets I	Held One Year o	or Less (see in	structions)
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss from	(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Form(s) 8949, Part I, line 2, column (g)	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	31,878	25,314		6,564
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 (los	ss) from Forms 46	84, 6781, and 882	4 4	
5 Net short-term gain or (loss) from partnerships, S corporation	ons, estates, and t	trusts from		
Schedule(s) K-1			5	
6 Short-term capital loss carryover. Enter the amount, if any	, from line 8 of you	ır <mark>Capital Loss C</mark> a	rryover	
Worksheet in the instructions			6	(
7 Net short-term capital gain or (loss). Combine lines 1a th	hrough 6 in columr	n (h). If you have a	ny long-	
term capital gains or losses, go to Part II below. Otherwise	, go to Part III on p	age 2	7	6,564
			• • •	

#### 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) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)		(h) Gain or (loss) Subtract column (e) from column (d) and	
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)			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 2	439 and 6252; and	long-term gain or	(loss)			
from Forms 4684, 6781, and 8824				11		
12 Net long-term gain or (loss) from partnerships, S corporation	ons, estates, and tr	rusts from Schedu	le(s) K-1	12		
13 Capital gain distributions. See the instructions						
14 Long-term capital loss carryover. Enter the amount, if any,	from line 13 of you	ır Capital Loss Ca	arryover			
Worksheet in the instructions				14	( )	
15 Net long-term capital gain or (loss). Combine lines 8a th					ĺ	
on page 2				15		

Part III	Summary

16	Combine lines 7 and 15 and enter the result	16	6,564
	<ul> <li>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.</li> <li>If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.</li> <li>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.</li> </ul>		·
17	Are lines 15 and 16 <b>both</b> gains?  Yes. Go to line 18.  No. Skip lines 18 through 21, and go to line 22.		
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18	
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (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, line7, the <b>smaller</b> of:		
	<ul> <li>The loss on line 16; or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	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, 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.		
		School	lula D (Earm 1040) 2020

Schedule D (Form 1040) 2020

#### Form 8949

# Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074

2020

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

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No. **12A** 

SRINIVASA RAO BALLE & PADMA NEELAKANTAM

Social security number or taxpayer identification number

388-73-6338

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)

<ul><li>☐ (B) Short-term transaction</li><li>☐ (C) Short-term transaction</li></ul>	•		-	reported to the IR	S		
(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e)	If you enter an enter a c See the se	if any, to gain or loss. amount in column (g), ode in column (f). oarate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and
		(Mo., day, yr.)	(see instructions)	in the separate instructions	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	combine the result with column (g)
E TRADE ESPP	VARTOUS	12 21 2020	21 070	25 214			6 56
	VAKTOUS	12-31-2020	31,878	25,314			6,564
2 Totals. Add the amounts in colinegative amounts). Enter each Schedule D, line 1b (if Box A a above is checked), or line 3 (if	total here and includations is checked), <b>li</b>	de on your ne 2 (if Box B	31,878	25,314			6,564

**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 **8606**

#### Nondeductible IRAs

► Go to www.irs.gov/Form8606 for instructions and the latest information.

► For coronavirus-related distributions, see the instructions.

2020 Attachment

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service (99)

► Attach to 2020 Form 1040, 1040-SR, or 1040-NR.

Sequence No. 48

Name. If married, file a separate form for each spouse required to file 2020 Form 8606. See instructions. Your social security number SRINIVASA RAO BALLE 388-73-6338 Home address (number and street, or P.O. box if mail is not delivered to your home) Apt. no. Fill in Your Address Only if You Are City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instructions). Filing This Form by Itself and Not With Foreign country name Foreign province/state/county Foreign postal code Your Tax Return Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, SEP, and SIMPLE IRAs Complete this part only if one or more of the following apply. You made nondeductible contributions to a traditional IRA for 2020. You took distributions from a traditional, SEP, or SIMPLE IRA in 2020 and you made nondeductible contributions to a traditional IRA in 2020 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2020 Forms 8915-C, 8915-D, and 8915-E)), qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions. You converted part, but not all, of your traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2020 and you made nondeductible contributions to a traditional IRA in 2020 or an earlier year. 1 Enter your nondeductible contributions to traditional IRAs for 2020, including those made for 2020 from January 1, 2021, through April 15, 2021. See instructions 1 6,000 2 2 Enter your total basis in traditional IRAs. See instructions Add lines 1 and 2 3 6,000 Enter the amount from line 3 on line 14. In 2020, did you take a distribution - No Do not complete the rest of Part I. from traditional, SEP, or SIMPLE IRAs, or make a Roth IRA conversion? – Yes – Go to line 4. 4 Enter those contributions included on line 1 that were made from January 1, 2021, through April 15, 2021 4 5 Subtract line 4 from line 3 Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December 31, 2020, plus any outstanding rollovers. Subtract any repayments of qualified disaster distributions (see 2020 Forms 8915-C, 8915-D, and 8915-E) 6 Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2020. Do not include rollovers (other than repayments of qualified disaster distributions (see 2020 Forms 8915-C, 8915-D, and 8915-E)), qualified charitable distributions, a one-time distribution to fund an HSA, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA contributions 7 8 Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2020. Also enter this amount on line 16 . . . . . . 8 9 Add lines 6, 7, and 8 Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 10 10 Multiply line 8 by line 10. This is the nontaxable portion of the amount you 11 converted to Roth IRAs. Also enter this amount on line 17 11 12 Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth IRA 12 13 13 14 Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2020 and earlier years. . . . . . . . . 14 6,000 Subtract line 12 from line 7 15a 15a Enter the amount on line 15a attributable to qualified disaster distributions from 2020 Forms 8915-C, 8915-D, and 8915-E (see instructions). Also, enter this amount on 2020 Form 8915-C, line 23; 2020 15b Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on 2020 

59 1/2 at the time of the distribution. See instructions.

Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age

# Form **8867**

Department of the Treasury

#### Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and
Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.

► Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074 2020

Attachment

Internal Revenue Service Taxpayer name(s) shown on return

SRINIVASA RAO BALLE & PADMA NEELAKANTAM

Sequence No. Taxpayer identification number

388-73-6338

Enter pre	eparer's name and PTIN			
MANO	DJ KUMAR NAGULA P02060896			
Part	Due Diligence Requirements			
Please	check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I-V	,		
for the b		TC	□ нс	Н
1	Did you complete the return based on information for tax year 2020 provided by the taxpayer or	Yes	No	N/A
	reasonably obtained by you?	X		
2	If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC			
	worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS instructions, and/or the			
	AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same			
	information, and all related forms and schedules for each credit claimed?	X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of			
	the following.			
	<ul> <li>Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.</li> </ul>			
	<ul> <li>Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of any credit(s)</li> </ul>	X		
4	Did any information provided by the taxpayer or a third party for use in preparing the return, or			
•	information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes,"			
	answer questions 4a and 4b. If "No," go to question 5.)		X	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent information?	Η̈́	Ä	
	Did you contemporaneously document your inquiries? (Documentation should include the questions			
	you asked, whom you asked, when you asked, the information that was provided, and the impact the			
	information had on your preparation of the return.)			
_				
5	Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in 4b, a copy of this Form 8867, a copy of any			
	applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form			
	8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the			
	taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filling status or to figure			
	the amount(s) of the credit(s) $ \begin{array}{ccccccccccccccccccccccccccccccccccc$	X		
	List those documents provided by the taxpayer, if any, that you relied on:			
	TP FILLED OUT OUR DEPENDENT FORM			
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the			
•	credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her			
	return is selected for audit?	X		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year?	X	П	П
	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)			
а	Did you complete the required recertification Form 8862?			
8	If the taxpayer is reporting self-employment income, did you ask guestions to prepare a complete and			

correct Schedule C (Form 1040)?

EEA

Form 8	867 (2020) SRINIVASA RAO BALLE & PADMA NEELAKANTAM 388-73-633	8		Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go to Part III.)			
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children	Yes	No	N/A
	claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC			
	and does not have a qualifying child, go to question 10.)			
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer			
	has supported the child the entire year?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of			
	more than one person (tiebreaker rules)?			
Part	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not claim CTC,	ACTC,		
	or ODC, go to Part IV.)			
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is	Yes	No	N/A
	a citizen, national, or resident of the United States?	X		
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the taxpayer has not lived			
	with the child for over half of the year, even if the taxpayer has supported the child, unless the child's			
	custodial parent has released a claim to exemption for the child?	X		
12	Dld you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or			
	separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar			
	statement to the return?	X		
Part				
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qualified		Yes	No
	tuition and related expenses for the claimed AOTC?			П
Part				
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax year		Yes	No
	and provided more than half of the cost of keeping up a home for the year for a qualifying person?			П
Part				
	► You will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filing			
	status on the return of the taxpayer identified above if you:			
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responses on the return of	or		
	in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) and/or HOH filin			
	status and to figure the amount(s) of the credit(s);	9		
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checklist for any applicable	e		
	credit(s) claimed and HOH filing status, if claimed;			
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 8867 instructions und	der		
	Document Retention.			
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for the			
	credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).			
	4. A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s) w	as		
	obtained.			
	5. A record of any additional information you relied upon, including questions you asked and the taxpayer's reponses,	to		
	determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s)			
	► If you have not complied with all due diligence requirements, you may have to pay a \$540 penalty for each failure			
	comply related to a claim of an applicable credit or HOH filing status.			
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and	[	Yes	No
	20 jour 25. a. j all of the different of the cost and, to the booter you knowledge, the journey		.55	

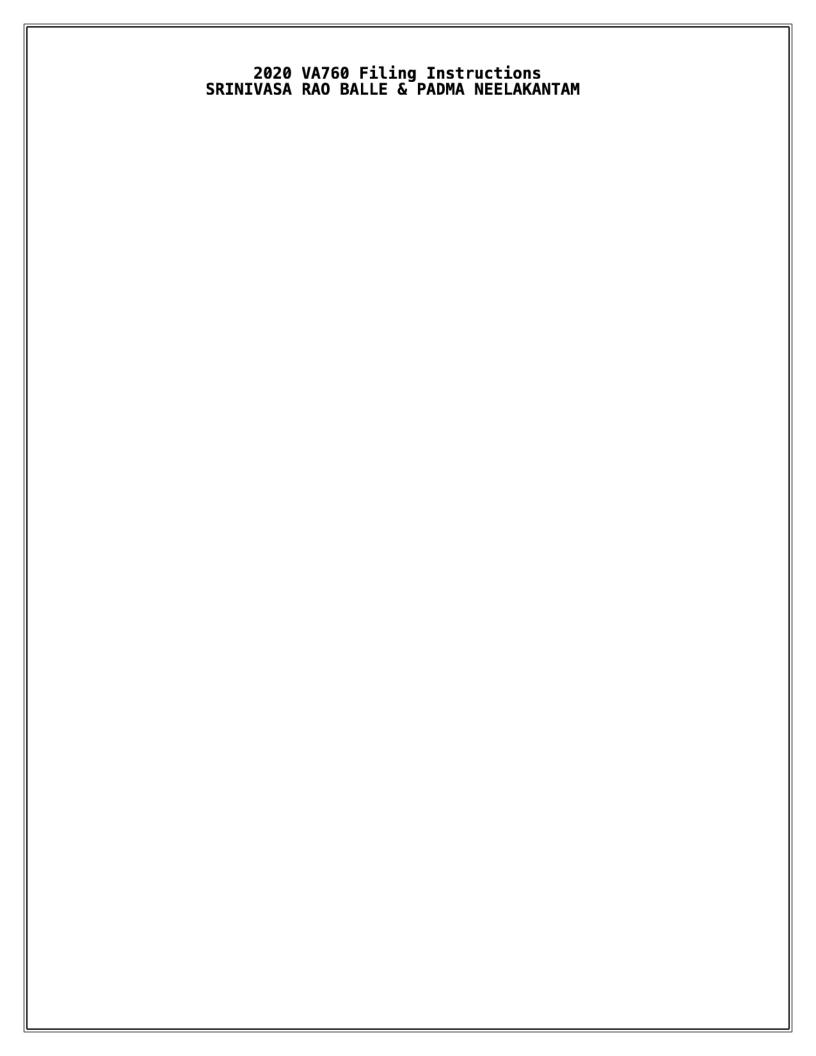
# TAX RETURN COMPARISON 2018 / 2019 / 2020

Name(s) as shown on return

SRINIVASA RAO BALLE & PADMA NEELAKANTAM

Identifying number 388-73-6338

Estimated tax payments		0040	2012	2000	
Income		2018	2019		Difference 2019-2020
Trace   Trac	-				-
Wages, salaries, tips, etc.   131,847   131,847   131,847   Taxable interest and dividends   337   3	Number of Dependents			1	1
Taxable interest and dividends   337   337   337   337   7337	Income				
Taxable interest and dividends   337   337   337   337   7337	Wages, salaries, tips, etc.			131.847	131.847
Taxable state and local refunds . Alimory					
Alimony   Business income (loss)   Gains (losses)   G, 564   G, 564     Pensions and IFA distributions   Rent and royally income (loss)     Part, S-corps, trusts income (loss)   Part, S-corps, trusts income (loss)     Part, S-corps, trusts income (loss)   Part, S-corps, trusts income (loss)     Total income (loss)   Total income (loss)     Total lincome   Total SS benefits   Total income   Total SS benefits   Total income   Total SS benefits   Total income   Total	Taxable state and local refunds				
Business income (loss)   Gains (losses)   G,564   G,564					
Gains (losses)   6,564   6,564	•				
Pensions and IRA distributions   Rent ard royalty income (loss)   Part. S-corps, trusts income (loss)   Pa				6.564	6.564
Rent and royalty income (loss) Part. S-corps, trusts income (loss) Farm income (loss) Unemployment compensation Total SS benefits received. Taxable SS benefits received. Tax and Credits Tax	` '			5,201	5,25.
Part, S-corps, trusts income (loss) . Farm income (loss)	_				
Farm income (loss)					
Unemployment corpensation Total SS benefits received.  Taxable SS benefits.  Other income (loss).  Total income					
Total SS benefits received. Taxable SS benefits. Other income (loss). Total Income.  138,748  138,748  138,748  138,748  Adjusted Gross Income Half of self-employment tax IPA deduction. Grow deductions. IPA deduction. Grow deductions Grow deductions Medical deductiors. State and local taxes Interest. Contributions. Employee business expenses Standard or other deductions Total Hemized or Standard Ded Qualified Business Income Deduction Tax and Credits Taxable Income 107,904					
Taxable SS benefits					
Other income (loss)					
Total Income					
Adjusted Gross Income   Half of self-employment tax   IPA deduction   6,000   6,000   6,000   Other adjustments   44   44   44   44   Total Adjusted Gross Income   132,704	` '			120 740	120 7/10
Half of self-employment tax				130,740	130,740
IRA deduction					
Other adjustments         44         44           Total Adjusted Gross Income         132,704         132,704           Deductions         Medical deductions         8           State and local taxes         Interest         1           Contributions         24,800         24,800           Employee business expenses         24,800         24,800           Standard or other deductions         24,800         24,800           Total Itemized or Standard Ded         24,800         24,800           Qualified Business Income Deduction         107,904         107,904           Tax and Credits         15,312         15,312           Taxa.         15,312         15,312           Credits         2,000         2,000           Self-employment tax         3         3,312           Other taxes         13,312         13,312           Total Tax         13,312         13,312           Payments         11,116         11,116           Estimated tax payments         3,500         3,500           Estimated tax penalty         0         1,304         1,304           Overpayment Applied         1,304         1,304           Refund         1,304         1,304				6 000	6 000
Total Adjusted Gross Income   132,784   132,784					
Deductions         Medical deductions           State and local taxes         Interest           Contributions         24,800           Employee business expenses         24,800           Standard or other deductions         24,800           Total Itemized or Standard Ded         24,800           Qualified Business income Deduction         107,904           Tax and Credits         15,312           Tax.         15,312           Credits         2,800           Self-employment tax         2,800           Other taxes         13,312           Total Tax         13,312           Withholdings         11,116           Withholdings         11,116           Earned income credit         3,500           Other payments and credits         3,500           Estimated tax penalty         0           Overpayment         1,304         1,304           Overpayment Applied         1,304         1,304           Refund         1,304         1,304           Balance Due         22.00         22.00					
Medical deductions       State and local taxes         Interest       Contributions         Employee business expenses       24,800       24,800         Standard or other deductions       24,800       24,800         Total Itemized or Standard Ded       24,800       24,800         Qualified Business income Deduction       107,904       107,904         Tax and Credits       15,312       15,312         Tax and Credits       2,000       2,000         Tax       15,312       15,312         Credits       2,000       2,000         Self-employment tax       3,312       13,312         Other taxes       13,312       13,312         Payments       11,116       11,116         Withholdings       11,116       11,116         Estimated tax payments       3,500       3,500         Estimated tax penalty       0verpayment       1,304       1,304         Overpayment Applied       0verpayment Applied       1,304       1,304         Marginal tax rate       22.00       22.00       22.00		_		132,704	132,704
State and local taxes   Interest   Interes					
Interest					
Contributions					
Employee business expenses					
Standard or other deductions					
Total Itemized or Standard Ded   24,800   24,800   24,800					
Qualified Business Income Deduction       107,904       107,904         Tax and Credits       15,312       15,312       15,312         Tax					
Tax and Credits       107,904       107,904         Tax.       15,312       15,312         Credits       2,000       2,000         Self-employment tax       2,000       2,000         Other taxes       3,312       13,312         Payments       11,116       11,116         Withholdings       11,116       11,116         Estimated tax payments       2,000       3,500         Estimated tax penalty       3,500       3,500         Overpayment       1,304       1,304         Overpayment Applied       1,304       1,304         Refund       1,304       1,304         Balance Due       22.00       22.00				24,800	24,800
Taxable Income         107,904         107,904           Tax         15,312         15,312           Credits         2,000         2,000           Self-employment tax         0ther taxes         13,312         13,312           Total Tax         13,312         13,312         13,312           Payments         11,116         11,116         11,116           Estimated tax payments         2,000         3,500         3,500           Estimated tax penalty         3,500         3,500         3,500           Overpayment         1,304         1,304         1,304           Overpayment Applied         1,304         1,304         1,304           Balance Due         22.00         22.00         22.00					
Tax					
Credits       2,000       2,000         Self-employment tax					
Self-employment tax	Tax				
Other taxes       13,312       13,312         Payments       11,116       11,116         Withholdings       11,116       11,116         Estimated tax payments       3,500       3,500         Estimated tax penalty       3,500       3,500         Estimated tax penalty       1,304       1,304         Overpayment Applied       1,304       1,304         Refund       1,304       1,304         Balance Due       22.00       22.00				2,000	2,000
Total Tax	Self-employment tax				
Payments       11,116       11,116         Withholdings					
Withholdings       11,116       11,116         Estimated tax payments       20       22.00         Estimated tax payments and credits       3,500       3,500         3,500       3,500       3,500         Setimated tax penalty       1,304       1,304         Overpayment Applied       1,304       1,304         Balance Due       22.00       22.00	Total Tax			13,312	13,312
Estimated tax payments	Payments				
Earned income credit	Withholdings			11,116	11,116
Other payments and credits       3,500       3,500         Estimated tax penalty       1,304       1,304         Overpayment       1,304       1,304         Refund       1,304       1,304         Balance Due       22.00       22.00	Estimated tax payments				
Estimated tax penalty       1,304         Overpayment       1,304         Overpayment Applied       1,304         Refund       1,304         Balance Due       22.00         Marginal tax rate       22.00	Earned income credit				
Estimated tax penalty       1,304         Overpayment       1,304         Overpayment Applied       1,304         Refund       1,304         Balance Due       22.00         Marginal tax rate       22.00	Other payments and credits			3,500	3,500
Overpayment Applied	Estimated tax penalty				
Overpayment Applied	Overpayment			1,304	1,304
Refund         1,304         1,304           Balance Due         22.00         22.00	Overpayment Applied				
Balance Due				1,304	1,304
Marginal tax rate	Balance Due				
				22.00	22.00



# 2020 VA760CG Page 1 Individual Income Tax Retum







**ALDIE** VA 20105

SSN-You BALL		388736338	Vendor ID 1024		xxxxx ¬
SSN - Spouse NEEL		236575943			
Fed Adj Gross Income (FAGI)	1.	132704.	Withholding (VA) - You	19A.	6777.
Additions	2.		Withholding (VA) - Spouse	19B.	97.
Subtotal	3.	132704.	Estimated Payments	20.	
Age Deduction - You	4A.		2019 Overpayment	21.	
Age Deduction - Spouse	4B.		Extension Payments	22.	
Soc Sec & Tier 1 Railroad	5.		Credit - Low-Income or EIC	23.	
State Income Tax Overpayment	6.		Credit - Schedule OSC	24.	
Subtractions	7.		Credits - Schedule CR	25.	
Subtotal Subtractions	8.		Total Payments / Credits	26.	6874.
Total VA Adj Gross Income (VAGI)	9.	132704.	Tax You Owe		
Itemized Deductions - VA Sch A	10.		Tax Overpayment		179.
Standard Deduction	11.	9000.	Overpayment Credited to Next Year 2		
Exemptions	12.	2790.	VAC - Virginia 529 / ABLEnow	30.	
Deductions	13.		VAC - Other Contributions	31.	
Subtotal (Deductions & Exemptions)	14.	11790.	Addition to Tax, Penalty & Inter	rest 32.	
VA Taxable Income	15.	120914.	Sales and Use Tax	33.	
Amount of Tax	16.	6695.	Amount You Owe		
Spouse Tax Adjustment (STA)	17.		Will Pay by Credit/Debit Card  Your Refund		179.
VAGI - Spouse	17A.				061000052
Net Amount of Tax	18.	6695.	Bank Routing #	C 224040	
L			Bank Account #	33404	9152879
		LARD	LARDTDLTI	D \$	Page 1 of 2

#### 2020 VA760CG Page 2

388736338





Filing Status, Age & License Information Additional Filing Information 107 Filing Status 2 Locality Federal Head of Household Name or Filing Status Change DOB - You 06281982 Address Change C62494951 VA Driver's License ID - You VA Return Not Filed Last Year VA Driver's License - Iss. Date - You 10182019 Dependent on Another's Return Spouse Name (Filing Status 3 Only) Farmer / Fisherman / Merchant Seaman Amended 08061982 DOB - Spouse Reason Code VA Driver's License ID - Spouse Overseas on Due Date VA Driver's License - Iss. Date - Spouse Federal EIC & Amount Exemptions (A) Exemptions (B) You 65 & Over - You Deceased Indicator 65 & Over - Spouse Х Spouse No Sales & Use Tax Due Indicator Dependents Blind - You Obtain Electronic 1099G Total (A) 3 Blind - Spouse ID Theft PIN Total (B) **Contact Information** I (We), the undersigned, declare under penalty of law that I (we) have examined this return & to the best of my (our) knowledge, it is a true, correct & complete return. If you are requesting direct

\_\_\_\_

 Signature - Preparer
 Date
 052521
 Phone - Preparer
 8447466692

Date

deposit of your refund by providing bank information on your return, you are certifying that the information provided is for a domestic account within the territorial jurisdiction of the United States.

052521 Phone - You

052521 Phone - Spouse

The Tax Department may discuss my/our return with my/our preparer.

Preparer Information

P02060896

4049035248

File by May 1, 2021 Include Page 1, Page 2 and all supporting 760CG documents.

Signature - You

Signature - Spouse

MANOJ KUMAR NAGULA SHOONYA TAX SOLUTIONS INC 16192 COASTAL HIGHWAY Lewes, DE 19958

### 2020 Schedule INC/CG

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

SRINIVASA RA

**BALLE** 

PADMA BRINDA NEELAKANTAM



388736338

Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
388736338	W	6777.	541780389	30541780389F001	128146.
236575943	W	97.	161309424	30161309424F001	3701.

Total VA Withholding	SSN	VA Withholding
You	388736338	6777.
Spouse	236575943	97.
Total # of W-2s, 1099s & VK-1s	2	

VA-COMP	Three-year State Tax Return Comparison	2020
Name(s) as shown on SRINIVASA RA	retum O BALLE & PADMA NEELAKANTAM	Taxpayer ID Number 388–73–6338

[State] Income Tax Return	2018	2019	2020	Difference 2019-2020
Filing Status			MFJ	20.000 2010 2020
Gross Income			132,704	132,704
Standard Deduction			9,000	9,000
Itemized Deduction				_
Deductions				
Taxable Income			120,914	120,914
Actual State Income			120,914	120,914
State Income Tax			6,695	6,695
Local Taxes				
Use Tax				
Contributions				
Income Tax Withheld			6,874	6,874
Estimates and Extension payments				
Underpayment Penalty				
Overpayment Applied to Next Year				
Refund			179	179
Balance Due				
Marginal tax rate			5.750000	5.750000
Effective tax rate			5.540000	5.540000