#### 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.

Submission Identification Number (SID)

Taxpayer's name				y numb	er
RAJ	INIKANTH NAKKALA	159	9-23-	-3434	1
Spouse's name				ial secu	ırity number
Par	Tax Return Information – Tax Year Ending December 31, 2020 (Enter	year	you ai	re aut	horizing.)
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.				
1	Adjusted gross income			1	72,127.
2	Total tax			2	9,111.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	11,488.
4	Amount you want refunded to you			4	2,377.
5	<u>A</u> mount you owe			5	
				-	

#### Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

#### Taxpayer's PIN: check one box only

GT OD TT	<b>ma 17 m a</b>	<b>T T A</b>		
GLOBAL	TAXES	ЪЦС	to enter or generate my	PIN

3	3	4	3	4	
	er fiv i't er				as

my

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

#### Spouse's PIN: check one box only

I authorize

X I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's sign	ature 🕨 🛛 Da	ate 🕨								
Practitioner PIN Method Returns Only—continue below										
Part III C	ertification and Authentication – Practitioner PIN Method Only									
ERO's EFIN/P	PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8	7		 	6 all ze	 9	8	9

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨	
ERO Must Retain This F Don't Submit This Form to the I			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/23/21 PRO	Form 8879 (Rev. 01-2021)

E1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		<sup>(99)</sup> 202	20	OMB No. 1545	-0074	IRS Use	e Only-	–Do not w	rite or staple	in this space.	
Filing Status Check only one box.	lf yo	Single Married filing jointly unchecked the MFS box, enter the n son is a child but not your dependent	ame of y	ed filing separatel /our spouse. If yo									
Your first name	and mi	iddle initial	Last na	me						Your so	cial securi	ty number	
RAJINIKA	ANTH		NAKK	ALA						159-23-3434			
lf joint return, s	pouse's	first name and middle initial	Last nai	me						Spouse'	s social se	curity number	
Home address 26 BRIAI		er and street). If you have a P.O. box, see D LANE	instructio	ons.				Apt. no. 10		Check h	nere if you,		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	St	ate	ZIP c	ode				ntly, want \$3 Checking a	
WESTBOR	DUGH				M	ΊA	01	581		0	ow will not	0	
Foreign country	/ name		F	oreign province/sta	te/cou	nty	Forei	gn postal c	ode		or refund.	0	
											You	Spouse	
At any time du	ring 20	020, did you receive, sell, send, excl	nange, o	r otherwise acqu	ire any	/ financial intere	est in	any virtua	al cui	rrency?	Yes	🗙 No	
Standard Deduction		eone can claim: DYou as a de Spouse itemizes on a separate retur	•			s a dependent n							
Age/Blindness	S You:	Were born before January 2, 1	956	Are blind	Spous	e: 🗌 Was bo	rn bef	ore Janu	ary 2	, 1956	🗌 ls bl	ind	
Dependents	s (see	instructions):		(2) Social secu	irity	(3) Relationsh	nip	(4) 🖌	íf qu	ualifies for	r (see instru	uctions):	
If more		irst name Last name		number		to you		Child t				her dependents	
than four													
dependents, see instruction													
and check	5												
here 🕨 🗌													
	1	Wages, salaries, tips, etc. Attach F	<sup>-</sup> orm(s) \	N-2						. 1		79,456.	
Attach	2a	Tax-exempt interest	2a		b	Taxable interes	t.			2b		1.	
Sch. B if required.	3a	Qualified dividends	3a	2.	b	Ordinary divide	nds .			3b		2.	
	4a	IRA distributions	4a		b	Taxable amoun	t			4b		1,811.	
	5a	Pensions and annuities	5a		b	Taxable amoun	t			. 5b			
Standard	6a	Social security benefits	6a		b	Taxable amoun	t			6b			
Deduction for-	7	Capital gain or (loss). Attach Sche	dule D if	required. If not r	equire	d, check here			►□	7		-1,159.	
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, lin	e9							. 8		-7,984.	
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your <b>total i</b>	ncom	е			. 1	▶ 9		72,127.	
Married filing	10	Adjustments to income:											
jointly or Qualifying	а	From Schedule 1, line 22				10	a						
widow(er),	b	Charitable contributions if you take	the stan	dard deduction.	See ins	tructions 10	b						
\$24,800 • Head of	с	Add lines 10a and 10b. These are	your <b>tot</b>	al adjustments t	o inco	ome			. 1	► 10c	>		
household, \$18,650	11	Subtract line 10c from line 9. This	-	-					. 1	▶ 11		72,127.	
<ul> <li>If you checked</li> </ul>	12	Standard deduction or itemized	-							12		12,400.	
any box under Standard	13	Qualified business income deduct			,					13			
Deduction,	14									14		12,400.	
see instructions.	15	Taxable income. Subtract line 14										59,727.	
						-						1010	

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

Form **1040** (2020)

Form 1040 (2020	D)						_			Page 2
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3			. 16	8,930.
	17	Amount from Schedule 2, lir	ie3						. 17	
	18	Add lines 16 and 17							. 18	8,930.
	19	Child tax credit or credit for	other dependen	ts					. 19	
	20	Amount from Schedule 3, lin	ie7						. 20	
	21	Add lines 19 and 20							. 21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					. 22	8,930.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .				. 23	181.
	24	Add lines 22 and 23. This is	your <b>total tax</b>						▶ 24	9,111.
	25	Federal income tax withheld	from:							
	а	Form(s) W-2				25a	11	,48	8.	
	b	Form(s) 1099				25b				
	с	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c							. 25d	11,488.
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20	19 return				. 26	
qualifying child,	27	Earned income credit (EIC)			. No .	27				
attach Sch. EIC.	28	Additional child tax credit. A	ttach Schedule 8	3812		28				
nontaxable	29	American opportunity credit	from Form 8863	8, line 8		29				
combat pay, see instructions.	30	Recovery rebate credit. See	instructions .			30				
	31	Amount from Schedule 3, lir				31				
	32	Add lines 27 through 31. The	ese are your <b>tot</b> a	al other paym	ents and refund	lable cr	edits		▶ 32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments					▶ 33	11,488.
Refund	34	If line 33 is more than line 24							. 34	2,377.
neiuliu	35a	Amount of line 34 you want	refunded to you	I. If Form 8888	is attached, che	eck here	э		35a	2,377.
Direct deposit?	►b	Routing number 0 7 2				Chec		Savin	gs	
See instructions.	►d	Account number 3 7 5	0 1 4 3	5 1 6 7			Ŭ		Ŭ	
	36	Amount of line 34 you want a	applied to your	2021 estimate	ed tax 🕨	36	T			
Amount	37	Subtract line 33 from line 24	. This is the <b>amo</b>	ount vou owe	now				▶ 37	
You Owe		Note: Schedule H and Sch		-					for	
For details on		2020. See Schedule 3, line 1					taxoo you	00		
how to pay, see instructions.	38	Estimated tax penalty (see in				38				
Third Party	Do	you want to allow another				? See				
Designee	ins	structions				. 🕨	<b>Yes.</b> C	omple	ete below.	× No
-		signee's		Phone					lentification	
		me 🕨		no. 🕨				ber (Pl		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com								
Here					1, 2, 7,		an morman			, 0
	YO	ur signature		Date	Your occupation					nt you an Identity PIN, enter it here
Joint return?					SOFTWARE	ENGI	NEER		(see inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupa				f the IRS se	nt your spouse an
Keep a copy for your records.										ection PIN, enter it here
your records.									(see inst.) 🕨	
		one no.		Email address						1
Paid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:
Preparer	RV	SSMANIKUMARAPPANA	RVSSMANIK	UMARAPPAN	JA	03/	28/2021	P02	090332	Self-employed
Use Only	Fir	m's name 🕨 GLOBAL TA	XES LLC						Phone no.	(646)727-7157
	Fir	m's address ► 2530 Pebb	le Creek L	n Cumming	g GA 30041				Firm's EIN I	> 30-1017196
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV	/ 03/23/21 PRO			Form <b>1040</b> (2020)

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

BAA

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SCHEDULE	1
(Form 1040)	

Department of the Treasury

# Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR. to www.irs.gov/Form1040 for instructions and the latest information

	2020
ion.	Attachment Sequence No. <b>01</b>

Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest inform
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR
RAJINIKANTH NA	AKKALA

~

.

Your social security number 159-23-3434

OMB No. 1545-0074

### Part 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	-7,984.
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,	8	
9		9	-7,984.
Par	t II Adjustments to Income		
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions)		
19	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	
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 03/23/21 PRO	Schedu	e 1 (Form 1040) 2020

SCHE	DULE	2
(Form	1040)	

Department of the Treasury

Internal Revenue Service

# **Additional Taxes**

OMB No. 1545-0074

Attachment Sequence No. 02

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 Fo	ial security number		
RAJINIKANTH NA	159	9-23-3434	
Part I Tax			

I a			
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 .	3	
Par	t II Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	
5	Unreported social security and Medicare tax from Form: $\mathbf{a} \Box 4137$ $\mathbf{b} \Box 8919$ .	5	
6	Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required	6	181.
7a	Household employment taxes. Attach Schedule H	7a	
b	Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required	7b	
8	Taxes from: <b>a</b> 🗌 Form 8959 <b>b</b> 🗌 Form 8960		
	c 🗌 Instructions; enter code(s)	8	
9	Section 965 net tax liability installment from Form 965-A 9		
10	Add lines 4 through 8. These are your <b>total other taxes.</b> Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b	10	181.
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 03/23/21 PRO	Schedu	le 2 (Form 1040) 2020

# SCHEDULE D

(Form 1040)

# **Capital Gains and Losses**

OMB No. 1545-0074

20

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/ScheduleD for instructions and the latest information.
► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Attachment Sequence No. **12** 

20

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

Department of the Treasury

RAJINIKANTH NAKKALA

Your social security number 159-23-3434

Did you dispose	of any investme	ent(s) in a qualified	d opportunity fund during the tax year?	Yes	X No
16 437 11 11 1					

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

### Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	<b>(g)</b> Adjustment to gain or loss Form(s) 8949, I line 2, columr	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	26,376.	28,044.	5	09.	-1,159.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	5				
6	6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover</b> Worksheet in the instructions					( )
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise		7	-1,159.		

#### 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. This form may be easier to complete if you round off cents to		<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949,	from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
	e dollars.	line 2, column				
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 <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
<b>11</b> Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824						
12	Net long-term gain or (loss) from partnerships, S corporat	12				
13	Capital gain distributions. See the instructions	13				
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	14	( )			
15	Net long-term capital gain or (loss). Combine lines 8a on the back	•			15	

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	-1,159.
	• If line 16 is a <b>gain,</b> 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.		
	• If line 16 is <b>zero,</b> 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 <b>both</b> gains? <b>Yes.</b> Go to line 18.		
	<b>No.</b> Skip lines 18 through 21, and go to line 22.		
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (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	<ul> <li>Are lines 18 and 19 both zero or blank and are you not filing Form 4952?</li> <li>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.</li> </ul>		
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:		
	The loss on line 16; or     (\$3,000), or if married filing separately, (\$1,500)	21	( 1,159.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?		
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.		
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

REV 03/23/21 PRO

Schedule D (Form 1040) 2020

8949

Department of the Treasury

Internal Revenue Service

# 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 20 20 Attachment

Sequence No. 12A

Name(s) shown on return Social	Social security number or taxpayer identification number				
RAJINIKANTH NAKKALA 159	9-23-3434				

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)

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

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

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis. See the <b>Note</b> below	enter a code in column (f). See the separate instructions.		If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		, (h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	v vr) (see instructions) in the senarate				from column (d) and combine the result with column (g)			
Robinhood Crypto LLC	Various	12/01/20	4,280.	4,314.			-34.			
Robinhood Securities LLC	Various	12/01/20	22,096.	23,730.	W	509.	-1,125.			
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), <b>lir</b>	lude on your <b>1e 2</b> (if <b>Box B</b>	26,376.	28,044.		509.	-1,159.			

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

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

SCHEDULE	Е
(Form 1040)	

### Supplemental Income and Loss

OMB No. 1545-0074

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

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

20 20 Attachment Sequence No. 13

Name(s)	shown on return								Your social	securit	y number	
-	NIKANTH NAKKALA								159-23-			
Part		s From Rental Real instructions. If you are		-		•			÷ .	•		;
	you make any payme											0
	Yes," did you or will yo				. ,							
<u>1a</u>	Physical address of	each property (street	city state 7		<u>, , ,</u>							<u> </u>
A	MIYAPUR HYDERA			coue	7)							
B	MITAPOK HIDERA	ADAD IELIANGANA	IN 300049									
<u> </u>												
 1b	Type of Property	0					Eair	Rental	Personal L			
1D	(from list below)	above report t	I real estate prop the number of fa	ir rent	al and			ays	Days	30	QJV	
	, ,	personal use d	ays. Check the requirements to	QJV b	ox only	•	-	-				
<u>A</u>	1	If you meet the	e requirements to venture. See inst	o file a	sa ns	A		365	C			
<u> </u>				liuolio	-	B						
						С						
	of Property:							<b>-</b>				
	le Family Residence	3 Vacation/Shor	t-Term Rental				7 Self-					
Incom	ti-Family Residence	4 Commercial	Properties:	6 R0	yalties		8 Othe	r (describe)				
	-		-	-		Α	500	E			С	
<u>3</u> 4	Rents received			3			500.					
	Royalties received .			4								
Expen				5								
5 6	Advertising Auto and travel (see in			6								
7	Cleaning and mainter	,		7			140					
8	Commissions			8			140. 350.					
o 9				9			350.					
9 10	Insurance			10								
11	Legal and other profe Management fees .			11								
12	Mortgage interest pai			12								
12	Other interest		,	13								
13	Repairs.			14		<u>ົ</u>	489.					
15	Supplies			15			045.					
16	Taxes			16		4,	015.					
17	Utilities			17		1	460.					
18	Depreciation expense			18		±,	100.					
19		·		19								
20	Total expenses. Add	lines 5 through 19		20		8.	484.					
21	Subtract line 20 from	-										
21	result is a (loss), see											
	file Form 6198		,	21		-7,	984.					
22	Deductible rental rea											
	on Form 8582 (see in			22	(	-7,9	84.)	(				
23a	Total of all amounts r	,					23a	•	500.			
b	Total of all amounts r	•					23b					
С	Total of all amounts r	•					23c					
d	Total of all amounts r	-					23d					
е	Total of all amounts r	•					23e		8,484.			
24	Income. Add positiv	•			ide any l	osses			. 24			
25	Losses. Add royalty lo						nter tota	al losses her	e. <b>25</b> (		7,984	
26	Total rental real est	ate and rovalty inco	ome or (loss).	Comb	ine lines	24 an	d 25. E	nter the rea	sult			
	here. If Parts II, III, I											
	Schedule 1 (Form 104								. 26		-7,98	4.

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

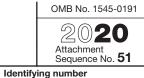
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# **Investment Interest Expense Deduction**

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

Attach to your tax return.



159-23-3434

Name(s) shown on return

RAJINIKANTH NAKKALA

## Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 2020 (see instructions)	1	44.
2	Disallowed investment interest expense from 2019 Form 4952, line 7	2	
3	Total investment interest expense. Add lines 1 and 2	3	44.

### Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from		
	the disposition of property held for investment)		
b	Qualified dividends included on line 4a         4b         2		
С	Subtract line 4b from line 4a	4c	1.
d	Net gain from the disposition of property held for investment		
е	Enter the <b>smaller</b> of line 4d or your net capital gain from the disposition of property held for investment. See instructions		
f	Subtract line 4e from line 4d	4f	0.
g	Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions	4g	
h	Investment income. Add lines 4c, 4f, and 4g	4h	1.
5	Investment expenses (see instructions)	5	
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0	6	1.
Part III Investment Interest Expense Deduction			
7	Disallowed investment interest expense to be carried forward to 2021. Subtract line 6 from		
	line 3. If zero or less, enter -0	7	43.
8	Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions	8	1.
For Pa	perwork Reduction Act Notice, see page 4. BAA REV 03/23/21 PRO		Form <b>4952</b> (2020)