Filing Status X Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW) Check only Hyou checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying midow(er) (QW) Your fint name and middle initial Lat name Your social security number ARAVIND SURYANARAYAN PENNATSA 268-23 - 7439 Home address (number and street). Hyou have a Droign address, also complete spaces below. Apt. no. Presidential Election Campaign 9339 FREDERICKSBURG 1711 Spouse's social security number 2782.40 SAN ANTOIO TX 782.40 your as obset filling jointly, want 33 Foreign country name Foreign province/state/county Foreign postal cost You Spouse filling jointly, want 33 At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? Yes No Standard Someone can claim: You as a dependent You as a dependent You Spouse Dependents, see instructions: (Pi Scial security Wes born before January 2, 1956 Is blind Dependents, see instructions: (Pi Scial security benefits and	E 1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) urn	202	0	OMB No. 1545	-0074	IRS Us	se Only	–Do not v	write or staple	in this space.	
ARAVIND SURYANARAYAN PENMATSA 268-23-7439 If joint return, spoule's first name and middle initial Last name Spoule's social security number Home address furmber and street), If you have a P.O. box, see instructions. Apt. no. Presidential Election Campaign 9339 FREDERICKSBURG 17.11 Check here if you, or your Spouse's social security number Foreign country name Foreign province/state/country Foreign posti acide you tax or effund. Foreign country name Foreign province/state/country Foreign posti acide you tax or effund. Beduction Spouse itemizes on a separate return or you were a dual-status alien Age/Bindness You: Was born before January 2, 1956 Is blind Dependents, see instructions: (1) First name Last name (2) Social security (3) Relationship (4) for dualities for fees instructions; If more beint fund You Sa a b Datable interest 2b Sa Shan Antron 1 80, 839. 1 80, 839. 2b Sa Standard Someone can claim: (2) Social security (3) Relationship (4) for dualities for fees instructions; 1 80, 839. If more	Check only	lf yo	u checked the MFS box, enter the n	ame of	-						,		, ,		
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Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Presidential Election Campaign 1711 Chy, town, or post office. If you have a foreign address, also complete spaces below. State I711 Check here if you, or your spouse if filing jointly, want S3 Foreign country name Foreign province/state/country Foreign postal code IV II or tox or refund. You Spouse itemizes on a separate return or you were a dual-status alien Separate and the order of the order dependent Age/Blindness You Were born before January 2, 1956 Are blind Spouse itemizes on a separate return or you were a dual-status alien Age/Blindness You Ware born before January 2, 1956 Are blind Spouse itemizes on a separate return or you were a dual-status alien Age/Blindness You Wares salaries, tips, etc. Attach Form(s) W-2 Itemate itemate iter order dependents Itemate	ARAVIND	SUR	YANARAYAN	PENN	IATSA							268-	23-743	9	
9939 FREDERICKSBURG 1711 Check here if you, or your City, town, or post office. If you have a foreign address, also complete spaces below. State ZP code spouse if filling jointly, wart \$3 SAN ANTONIO TX 78240 box below will not change Foreign country mame Foreign province/statk/county Foreign postal code your tax or refund. Checking a box below will not change At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? Yes No Standard Someone can claim: You as a dependent Your spouse as a dependent Your spouse as a dependent Deduction Spouse itemizes on a separate return or you were a dual-status alien Age/Blindness You Spouse: Was born before January 2, 1956 Is blind Dependents (see instructions): (2) Social security (3) Relationship (4) 4' if qualifies for (see instructions): Cheld tax credit for other dependents if more (1) First name Last name is a day b is a day, 833. ad enclock is a day b is a day, 833. is bind dependents is a day, 834. b is a day, 833. is bis day,	If joint return, s	pouse's	first name and middle initial	Last na	me							Spouse	's social se	curity number	
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Deduction, see instructions. 14 Add lines 12 and 13 12,400.		13	Qualified business income deducti	ion. Atta	ach Form	8995 or Fo	orm 8	8995-A				. 13			
15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0	Deduction,	14	Add lines 12 and 13									. 14	1	12,400.	
		15	Taxable income. Subtract line 14	from lin	ie 11. lf z	ero or less,	ente	er-0				. 15	5	63,739.	

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

Form **1040** (2020)

Form 1040 (2020))									Page 2	
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3			16	9,810.	
	17	Amount from Schedule 2, lin	ie3					[17		
	18	Add lines 16 and 17						[18	9,810.	
	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	9,810.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .				23	0.	
	24	Add lines 22 and 23. This is	your total tax					. 🕨	24	9,810.	
	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a	11,	543.			
	b	Form(s) 1099				25b					
	с	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c							25d	11,543.	
• If you have a	26	2020 estimated tax payment						[26		
qualifying child,	27	Earned income credit (EIC)			. _. No	27					
attach Sch. EIC.	28	Additional child tax credit. A	ttach Schedule	8812		28					
nontaxable combat pay,	29	American opportunity credit from Form 8863, line 8									
see instructions.	30	Recovery rebate credit. See instructions 30									
	31	Amount from Schedule 3, lin	ie 13			31					
	32	Add lines 27 through 31. The	ese are your tot a	al other paym	ents and refund	able crec	lits	. 🕨	32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				. 🕨	33	11,543.	
Refund	fund 34 If 35a A	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amou	unt you ov	verpaid	[34	1,733.	
Horana	35a	Amount of line 34 you want			is attached, che	eck here			35a	1,733.	
Direct deposit?	►b	Routing number 1 1 1			► c Type: 🛛	Checkir	ig 🗌 Sa	vings			
See instructions.	►d	Account number 4 8 8	0 4 8 9	2 5 9 5	5 0						
	36	Amount of line 34 you want a	applied to your	2021 estimate	ed tax 🕨	36					
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe	now			. 🕨	37		
You Owe		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for									
For details on how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details.									
instructions.	38	Estimated tax penalty (see in	nstructions) .		🕨	38					
Third Party		you want to allow another					7				
Designee		structions				. 🕨 🗋	-	•		X No	
		signee's me ►		Phone no.				al identific r (PIN) 🕨	ation		
0:		der penalties of perjury, I declare t	hat I have avaming					()	ha haa		
Sign		ief, they are true, correct, and com									
Here	Yo	ur signature		Date	Your occupation			If the I	RS ser	nt you an Identity	
								Protec	tion Pl	N, enter it here	
Joint return?					SOFTWARE	ENGINE	(see in	st.) 🕨			
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, k	ooth must sign.	Date	Spouse's occupa	tion			f the IRS sent your spouse an dentity Protection PIN, enter it here		
your records.	,						st.) 🕨				
	Ph	one no. (614)940-968	0	Email address	PENMATSA19	DO DOCM	ATT COM	,	,,		
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Paid		I PRIYA RAM SAGAR GUPTA TALLAM						02082	702	Self-employed	
Preparer				NAUAG INAN	GUPIA IALLAN	1 09/14				678)965-9522	
Use Only		m's name ► GLOBAL TAX m's address ► 2530 Pebbl		n Cummin	T CA 200/1						
					-			_ ⊢irm's	EIN 🕨		
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 07	/28/21 PRO			Form 1040 (2020)	

SCHEDULE	1
(Form 1040)	

Additional Income and Adjustments to Income

OMB No. 1545-0074

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									
268-23	-7439								

 Department of the Treasury Internal Revenue Service
 ► Go to www.irs.gov/F

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

Part I	Additional Income
raili	Auditional income

ARAVIND SURYANARAYAN PENMATSA

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2 a	Alimony received	2 a	
b	Date of original divorce or separation agreement (see instructions)		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-4,700.
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,		
Der		9	-4,700.
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 adjustments to income. Enter here and		
	on Form 1040, 1040-SR, or 1040-NR, line 10a	22	
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 07/28/21 PRO	Schedu	e 1 (Form 1040) 2020

•	040)	(From	n rental real estate, royalties, partners	hips, S	corpora	ations, e	states,	trusts, REM	ICs, etc.)	G	0020	
Departme	ent of the Treasury		Attach to Form 104), 1040	-SR, 104	40-NR, o	r 1041.				chment	
Internal R	evenue Service (99)		► Go to www.irs.gov/ScheduleE f	or inst	ructions	and the	latest	information.		Seq	uence No. 13	3
Name(s)	shown on return										ity number	
			AN PENMATSA						268-2	-		
Part			s From Rental Real Estate and Ro	-		,			0.			se
			instructions. If you are an individual, rep									
A Did	l you make any	payme	ents in 2020 that would require you to	o file F	orm(s) 1	099? Se	ee inst	ructions .		. 🗌	Yes 🛛 N	No
B If "	Yes," did you o	r will yo	ou file required Form(s) 1099?							. 🗆	Yes 🗌 N	No
1a	Physical addr	ess of e	each property (street, city, state, ZII	code	e)							
Α	BANJARA H	ILLS	ROAD NO:12 HYDERABAD TE	LANG	ANA II	N 5000)45					
В												
С												
1b	Type of Prop		2 For each rental real estate pro	perty l	isted		Fair	Rental	Persona	al Use	QJV	,
	(from list be	low)	above, report the number of fa	ir rent	al and		[Days	Day	S	QUI	
Α	3		personal use days. Check the if you meet the requirements t	o file a	is a	Α		365		0		
В			qualified joint venture. See ins	tructio	ns.	В						
С			_			С						
Гуре с	of Property:											
1 Sing	le Family Resid	lence	3 Vacation/Short-Term Rental	5 La	nd	7	7 Self-	Rental				
2 Mult	i-Family Reside	ence	4 Commercial	6 Ro	yalties	8	3 Othe	r (describe)				
ncom	e:		Properties:			Α		В			С	
3	Rents received			3		6	500.					
4	Royalties recei	ved.		4								
Expen												
5	Advertising .			5								
6	Auto and trave	l (see i	nstructions)	6								
7	Cleaning and r	nainter	nance	7		8	300.					
8	-			8								
9	Insurance			9								
10	Legal and othe	r profe	essional fees	10								
11	Management f	ees .		11								
12			id to banks, etc. (see instructions)	12								
13				13								
14				14		1,0	000.					
15				15			000.					
16	Taxes			16								
17	Utilities			17		2,5	500.					
18			e or depletion	18								
19	Other (list) ►			19								
20		s. Add	lines 5 through 19	20		5,3	300.					
21	-		line 3 (rents) and/or 4 (royalties). If									
			instructions to find out if you must									
	file Form 6198			21		-4,5	700.					
22	Deductible ren	tal real	l estate loss after limitation, if any,									
			nstructions)	22	(-4,7	00.)	()		
23a		-	reported on line 3 for all rental prope				23a		600.			
b			eported on line 4 for all royalty prop				23b					
С			reported on line 12 for all properties				23c					
d			reported on line 18 for all properties				23d					
e			reported on line 20 for all properties				23e		5,300.			
24			e amounts shown on line 21. Do no						. 24			
<u> </u>		-			and any		· ·			+		
2 4 25	Losses. Add ro	valtv lo	osses from line 21 and rental real estate	losse	s from li	ne 22. Fr	nter tota	al losses here	e. 25	(4,70	0.

Supplemental Income and Loss

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

For Paperwork Reduction Act Notice, see the separate instructions.

SCHEDULE E

(Form 1040)

Schedule E (Form 1040) 2020

-4,700.

26

OMB No. 1545-0074