E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

Filing Status Check only one box.	If yo	Single Married filing jointly but checked the MFS box, enter the son is a child but not your dependent	name o	ried filing separately	. ,	_		,		_			
Your first name	and m	iddle initial	Last n	name					,	Your social security number			
SATYA S	URYA	SUBRAMAN	VED	ULA						323-83-2160			
If joint return, s	pouse's	s first name and middle initial	Last n	name					:	Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, se	e instruc	tions.				Apt. no.		Preside	ntial Election	on Campaign	
601 CAR	LTON	COMMONS LANE									nere if you,		
City, town, or p	oost offi	ce. If you have a foreign address, also c	omplete	spaces below.	Sta	ate	ZIP	code				ntly, want \$3	
CARY				NC				1 07510			to go to this fund. Checking a box below will not change		
Foreign countr	y name			Foreign province/state	/coun	county Fc					or refund.	•	
											You	Spouse	
At any time du	uring 2	020, did you receive, sell, send, exc	change,	or otherwise acquire	any	financial int	erest ir	any virtua	al curr	ency?	Yes	⊠ No	
Standard Deduction		neone can claim:  You as a d Spouse itemizes on a separate retu	•				nt						
Age/Blindnes	s You	: Were born before January 2,	1956	Are blind Sp	ouse	e: 🗆 Was	born be	efore Janua	arv 2.	1956	☐ Is bl	ind	
Dependent	-			(2) Social securi		(3) Relatio					r (see instru		
If more		irst name Last name		number	. y	to you		Child tax cred		- 1		her dependents	
than four												$\overline{}$	
dependents,												<del></del>	
see instruction and check	s —												
here ▶ □													
	1	Wages, salaries, tips, etc. Attach	Form(s)	) W-2						1		96,080.	
Attach	2a	Tax-exempt interest	2a		b T	axable inte	rest			2b			
Sch. B if	За	Qualified dividends	3a		b C	Ordinary divi	dends			3b			
required.	4a	IRA distributions	4a				Taxable amount			4b			
	5a	Pensions and annuities	5a		b T	axable amo	ount .			5b			
Standard	6a	Social security benefits	6a		b T	axable amo	unt .			6b			
Deduction for—	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶								7			
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, line 9								8	-	-6,500.	
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								9	- {	89,580.	
<ul> <li>Married filing</li> </ul>	10	Adjustments to income:											
jointly or Qualifying	а	From Schedule 1, line 22											
widow(er),	b	Charitable contributions if you take the standard deduction. See instructions 10b											
\$24,800  • Head of  • Add lines 10a and 10b. These are your <b>total adjustments to income</b>									. ▶	100	>		
household, \$18,650	11	Subtract line 10c from line 9. This	s is your	adjusted gross inc	ome				. ▶	11	- {	89,580.	
If you checked	12	Standard deduction or itemized	d deduc	ctions (from Schedul	e A)					12		12,400.	
any box under Standard	13	Qualified business income deduc	Qualified business income deduction. Attach Form 8995 or Form 8995-A							13			
Deduction, see instructions.	14	Add lines 12 and 13								14		12,400.	
	15	Taxable income. Subtract line 14	4 from li	ine 11. If zero or less	, ente	er -0				15	.	77,180.	

Form 1040 (2020	))									Page 2		
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			16	12,769.		
	17	Amount from Schedule 2, lin	e3						17			
	18	Add lines 16 and 17							18	12,769.		
	19	Child tax credit or credit for	other dependen	ts					19			
	20	Amount from Schedule 3, lin	e7						20			
	21	Add lines 19 and 20							21			
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	12,769.		
	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 <b>total tax</b>					. ▶	24	12,769.		
	25	Federal income tax withheld	from:									
	а	Form(s) W-2				25a	14	,919.				
	b	Form(s) 1099				25b						
	С	Other forms (see instructions	s)			25c						
	d	Add lines 25a through 25c							25d	14,919.		
If you have a	26	2020 estimated tax payment	s and amount a	pplied from 20	119 return				26			
qualifying child,	27	Earned income credit (EIC)				27						
attach Sch. EIC.	28	Additional child tax credit. A				28						
nontaxable	29	American opportunity credit	from Form 8863	8, line 8		29						
combat pay, see instructions.	30	Recovery rebate credit. See		•		30		471.				
	31	Amount from Schedule 3. lin	e 13			31						
	32	Add lines 27 through 31. These are your total other payments and refundable credits								471.		
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>								15,390.		
Defend	34	If line 33 is more than line 24							33	2,621.		
Refund	35a									2,621.		
Direct deposit?	▶b	Routing number 0 5 3	35a	2,0221								
See instructions.	▶d	Account number 2 3 7				Check		Savings				
	36	Amount of line 34 you want a				36	Γ'					
Amount	37	Subtract line 33 from line 24							37			
You Owe	31			•								
For details on		<b>Note:</b> Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.										
how to pay, see instructions.	38	Estimated tax penalty (see in	-			38						
Third Party		you want to allow another										
Designee		structions	•				Yes. Co	mplete	below.	X No		
_ 00.g00	De	signee's		Phone				•	tification			
		me ▶		no. 🕨				er (PIN)				
Sign		der penalties of perjury, I declare t										
Here		lief, they are true, correct, and com	plete. Declaration of			ased on	all informatio			,		
	Yo	ur signature		Date Your occupation					If the IRS sent you an Identity Protection PIN, enter it here			
Joint return?			SOFTWARE ENGINEER					see inst.)				
See instructions.	Sp	ouse's signature. If a joint return, t	Date	Spouse's occupa		10010	If th	ne IRS se	nt your spouse an			
Keep a copy for		, -		Opodoc o occupation					dentity Protection PIN, enter it here			
your records.								(see	e inst.) 🕨			
		one no. (757)408-640	2	Email address	RAVITEJA.2	1114@0	MAIL.CO	M				
Paid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:		
Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAN	1 09/2	22/2021	P0208	32703	Self-employed		
Use Only	Fir	Firm's name ► GLOBAL TAXES LLC Phone							one no. (	e no. (678)965-9522		
Use Only	Fir	m's address ▶ 2530 Pebb	le Creek L	n Cummin	g GA 30041			Firr	n's EIN 🕨	30-1017196		
Go to www.irs.go	ov/Forr	n1040 for instructions and the late	st information.		BAA	REV	08/30/21 PRO			Form <b>1040</b> (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

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

SATYA SURYA SUBRAMAN VEDULA

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

Your social security number 323-83-2160

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
<b>2</b> a	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	-6,500.
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	C
Par	tili Adjustments to Income	9	-6,500.
		40	
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your <b>adjustments to income.</b> Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

## **SCHEDULE E**

(Form 1040)

## **Supplemental Income and Loss**

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

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

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

OMB No. 1545-0074

Attachment Sequence No. **13** 

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

Your social security number 222 02 2160

	A SURYA SUBRAMA				16				23-83-2			
Part		s From Rental Real Estate and Roy instructions. If you are an individual, repo	-		-						erty, use	
A Dic	d you make any payme	nts in 2020 that would require you to	file F	orm(s) 1	099? 5	See insti	uctions .		[	Ye	s 🛛 No	
B If "	Yes," did you or will yo	ou file required Form(s) 1099?							[	Ye	s 🗌 No	
1a	Physical address of	each property (street, city, state, ZIF	code	e)								
Α	VIVEKANANDA NA	GAR COLONY HYDERABAD TEL	LANG	ANA IN	500	072						
В												
С												
1b	Type of Property	2 For each rental real estate prop	erty I	isted		Fair	Rental	Per	sonal Us	se QJV		
	(from list below)	above, report the number of fair personal use days. Check the	ir rent	rental and			ays	Days				
Α	3	if you meet the requirements to	o file a	as a Íl	Α		365		0			
В		qualified joint venture. See inst	ructio	ns.	В							
C					С							
	of Property:											
	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd		7 Self-	Rental					
	ti-Family Residence		6 Ro	yalties		8 Othe	r (describe)	)				
Incom		Properties:			Α		E	3			С	
3			3			650.						
4			4									
Expen												
5			5									
6		nstructions)	6									
7		nance	7		1,	300.						
8			8									
9			9									
10		essional fees	10									
11			11			550.						
12		d to banks, etc. (see instructions)	12									
13			13									
14			14			500.						
15			15		1,	500.						
16			16									
17			17		2,	300.						
18		e or depletion	18									
19	Other (list)		19									
20	•	lines 5 through 19	20		7,	150.						
21		line 3 (rents) and/or 4 (royalties). If										
		instructions to find out if you must			_							
	file <b>Form 6198</b>		21		-6,	500.						
22		l estate loss after limitation, if any,		,			,					
	•	structions)	22	[(	-6,	500.)	(		)(			
23a		eported on line 3 for all rental proper				23a		6	50.			
b		eported on line 4 for all royalty properties				23b						
C		eported on line 12 for all properties				23c						
d		eported on line 18 for all properties				23d						
е		eported on line 20 for all properties				23e		7,1				
24	•	e amounts shown on line 21. <b>Do no</b>		-					24			
25	Losses. Add royalty lo	sses from line 21 and rental real estate	losse	s from lir	ne 22. E	nter tota	al losses her	е.	25 (		6,500.	
26		ate and royalty income or (loss).										
		V, and line 40 on page 2 do not a		-					26		-6.500.	
	Schedule 1 (Form 10)	AUI TIME S CITNERWISE INCITION THIS AR	TIOLIN'	I IN THE T	ntal or	1 IINA 41	on page 2		ンわ		- n . n	