E 104(artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		(99)	2020	0	OMB No. 1545	-0074	IRS Us	e Only	–Do not w	rite or staple	in this space.
Filing Statu Check only one box.	lf yc	Single Married filing jointly Course of the MFS box, enter the n son is a child but not your dependent	ame of				Head of ed the HOH o						
Your first name	e and m	iddle initial	Last na	me							Your so	cial securi	ty number
VARUN			MENI	U							732-	51-095	0
lf joint return, s	spouse's	s first name and middle initial	Last na	me							Spouse'	s social se	curity number
		er and street). If you have a P.O. box, see LANE SE	instructi	ons.				4	Apt. no.		Check h	nere if you,	
City, town, or p	post offi	ce. If you have a foreign address, also co	mplete s	paces below.	.	Stat	e	ZIP co	ode				ntly, want \$3 Checking a
LACEY						WA	1	985	513		Ŭ	ow will not	•
Foreign countr	ry name		1	oreign provi	nce/state/c	ount	у	Foreig	gn postal	code	your tax	or refund	
												You	Spouse
At any time du	uring 20	020, did you receive, sell, send, excl	nange, c	or otherwise	acquire a	any f	inancial intere	est in a	any virtu	ial cu	irrency?	Ves	🗙 No
Standard Deduction	_	neone can claim:	•				a dependent						
Age/Blindnes	s You	: 🗌 Were born before January 2, 1	956	Are blind	Spo	use:	Was bo	rn befo	ore Jani	uary 2	2, 1956	🗌 ls b	lind
Dependent	s (see	instructions):		(2) Soci	al security		(3) Relationsh	nip	(4)	/ if q	ualifies fo	r (see instru	uctions):
If more		irst name Last name		nu	mber		to you		Child	tax c	redit	Credit for ot	ther dependents
than four													
dependents, see instruction													
and check	13												
here 🕨 🗌													
	1	Wages, salaries, tips, etc. Attach F	orm(s)	N-2							. 1	1	08,966.
Attach	2a	Tax-exempt interest	2a			b Ta	axable interes	t.			. 2b		
Sch. B if required.	<u>3a</u>	Qualified dividends	3a			b O	rdinary divide	nds .			. 3b		
) 4a	IRA distributions	4a		I	b Ta	axable amoun	t			. 4b		
	5a	Pensions and annuities	5a		I	b Ta	axable amoun	t			. 5b		
Standard	6 a	Social security benefits	6a		I	b Ta	axable amoun	t			. 6b		
 Deduction for – Single or 	7	Capital gain or (loss). Attach Sche	dule D if	[;] required. If	f not requi	ired,	check here			▶ [7		
Married filing	8	Other income from Schedule 1, lin	e9.								. 8		-6,500.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your t	total inco	me					▶ 9	1	02,466.
 Married filing 	10	Adjustments to income:											
Jointly or Qualifying	а	From Schedule 1, line 22					10	a					
widow(er), \$24,800	b	Charitable contributions if you take	the star	dard deduc	tion. See i	instr	uctions 10	b					
 Head of 	с	Add lines 10a and 10b. These are your total adjustments to income						► 10c					
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted gr	oss inco	me					▶ 11	1	02,466.
 If you checked 	12	Standard deduction or itemized	deduct	i ons (from S	Schedule	A)					. 12		12,400.
any box under Standard	13	Qualified business income deduct	ion. Atta	ch Form 89	95 or For	m 89	995-A				. 13		
Deduction, see instructions.	14	Add lines 12 and 13											12,400.
	15	Taxable income. Subtract line 14	from lin	e 11. If zerc	o or less, e	enter	r-0				. 15		90,066.
													1040 ()

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	15,698.
	17	Amount from Schedule 2, lin	ie3							17	
	18	Add lines 16 and 17								18	15,698.
	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	15,698.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 1	0.				23	0.
	24	Add lines 22 and 23. This is	your total tax						. 🕨	24	15,698.
	25	Federal income tax withheld	from:								
	а	Form(s) W-2					25a	18	,091		
	b	Form(s) 1099					25b				
	с	Other forms (see instructions	s)				25c				
	d	Add lines 25a through 25c								25d	18,091.
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20)19 returi	ı				26	
qualifying child,	27	Earned income credit (EIC)			¹	٩ö	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	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 c	redits	. 🕨	32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					. 🕨	33	18,091.
Refund	34	If line 33 is more than line 24								34	2,393.
Refutio	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attac	hed, che	ck her	е		35a	2,393.
Direct deposit?	►b	Routing number 1 2 2			► c Ty			king		- 	
See instructions.	►d	Account number 4 5 7						Ĭ	0		
	36	Amount of line 34 you want a					1	T			
Amount	37	Subtract line 33 from line 24	This is the amo	ount vou owe	now .				. 🕨	37	
You Owe		Note: Schedule H and Sch		-							
For details on		2020. See Schedule 3, line 1			•	oont an		laxes you	0100 10		
how to pay, see instructions.	38	Estimated tax penalty (see in	-			. 🕨	38				
Third Party	Do	you want to allow another					? See				
Designee	ins	structions						🗌 Yes. C	omplete	e below.	× No
•		signee's		Phone						ntification	
		me 🕨		no. 🕨					oer (PIN)		
Sign		der penalties of perjury, I declare t									
Here		ief, they are true, correct, and com	piete. Declaration			•	ased or	i ali mormati			, ,
	Yo	ur signature		Date	Your oc	cupation					nt you an Identity IN, enter it here
Joint return?					SOFT	WARE	ENGI	NEER		e inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, k	ooth must sign.	Date		s occupa			lf t	he IRS se	nt your spouse an
Keep a copy for			Ū.								ection PIN, enter it here
your records.									(se	e inst.) 🕨	
		one no. (602)596-675		Email address	VARU	N.M19		MAIL.CC			
Paid	Pre	eparer's name	Preparer's signat				Date		PTIN		Check if:
Preparer	SYAM		SYAM PRIYA	RAM SAGAR	GUPTA	TALLAM	1 09/	24/2021	P020	82703	Self-employed
Use Only		m's name ► GLOBAL TAX							Ph	one no. (678)965-9522
	Fir	m's address ► 2530 Pebbl	le Creek L	n Cumming	g GA :	30041			Fir	m's EIN 🕨	30-1017196
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		B	٩A	RE	V 08/30/21 PRO)		Form 1040 (2020)

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

BAA

SCHEDULE	1
(Form 1040)	

Ν

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 infor

	Your soc	ial security number				
nformation.		Attachment Sequence No. 01				

lame(s) shown on	Form	1040,	1040-SR,	or 1040-NR
VARUN MENDU				

Department of the Treasury Internal Revenue Service

> Your social security nur 732-51-0950

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2 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,		
Der		9	-6,500.
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 08/30/21 PRO	Schedul	e 1 (Form 1040) 2020

	ent of the Treasury Revenue Service (99)	Go to www.irs.gov/ScheduleE fo) .		Attac	hment ence No. 13
	shown on return	ů						_			ty number
VARU	N MENDU							73	32-51-	095	0
Part	Income or Loss	From Rental Real Estate and Roy	yaltie	s Note	: If you	are in th	e business o	of renti	ing perso	nal p	roperty, use
		instructions. If you are an individual, rep	ort farr	n rental i	ncome	or loss f	rom Form 4	835 or	n page 2,	line 4	10.
A Dic	you make any payme	nts in 2020 that would require you to	file F	orm(s) 1	099? S	See inst	ructions .				Yes 🗙 No
		ou file required Form(s) 1099?									Yes 🗌 No
1a		each property (street, city, state, ZIF									
Α		NY HYDERABAD TELANGANA I									
В											
С											
1b	Type of Property	2 For each rental real estate prop	pertv li	sted		Faiı	Rental	Per	sonal U	se	0.11/
	(from list below)	above, report the number of fa	ir renta	al and		1	Days		Days		QJV
Α	3	personal use days. Check the if you meet the requirements to	o file a	ox oniy s a	Α		365		0		
В		if you meet the requirements to qualified joint venture. See inst	ructio	ns.	В						
С					С						
	of Property:										
•••	gle Family Residence	3 Vacation/Short-Term Rental	5 Lai	nd		7 Self-	Rental				
-	ti-Family Residence	4 Commercial	6 Ro	valties		8 Othe	er (describe)			
Incom		Properties:			Α	0 0 0 0 0		3			С
3	Rents received		3			600.					-
4			4								
Expen											
5			5								
6		nstructions)	6								
7	-	nance	7								
8			8		1,	300.					
9			9								
10		essional fees	10								
11			11			800.					
12	-	d to banks, etc. (see instructions)	12								
13			13								
14			14		1.	500.					
15			15			500.					
16			16		,						
17			17		2,	000.					
18		e or depletion	18								
19	Other (list)		19								
20	` '	lines 5 through 19	20		7,	100.					
21	•	line 3 (rents) and/or 4 (royalties). If									
21		instructions to find out if you must									
	(),		21		-б,	500.					
22		l estate loss after limitation, if any,									
		structions)	22	(-6,5	500.)	()()
23a	Total of all amounts r	eported on line 3 for all rental prope	rties			23a		б	00.		· · · · · · · · · · · · · · · · · · ·
b		eported on line 4 for all royalty prop				23b					
с		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	00.		
24		e amounts shown on line 21. Do no							24		
25		sses from line 21 and rental real estate		-		inter tot	al losses he	re.	25 (6,500.)
26		ate and royalty income or (loss).							Ì		,
		V, and line 40 on page 2 do not									
		40), line 5. Otherwise, include this ar							26		-6,500.

Supplemental Income and Loss

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

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

For Paperwork Reduction Act Notice, see the separate instructions.

SCHEDULE E

(Form 1040)

Schedule E (Form 1040) 2020

OMB No. 1545-0074

2

Form 85882 Department of the Treasury Internal Revenue Service (99)		Passive Activity Loss Limitations ► See separate instructions. ► Attach to Form 1040, 1040-SR, or 1041. ► Go to www.irs.gov/Form8582 for instructions and the latest information.					
Name(s) show	()		Identify				
VARUN M	IENDU		732-				
Part I	2020 Pa	ssive Activity Loss					
	Caution:	Complete Worksheets 1, 2, and 3 before completing Part I.					
		Activities With Active Participation (For the definition of active participation, a rental Real Estate Activities in the instructions.)	see				

Speci	ial Allowance for Rental Real Estate Activities in the instructions.)	•		
1a	Activities with net income (enter the amount from Worksheet 1, column (a)) . 1a	0.		
b	Activities with net loss (enter the amount from Worksheet 1, column (b)) 1b (6,500.)		
С	Prior years' unallowed losses (enter the amount from Worksheet 1, column (c)))		
d	Combine lines 1a, 1b, and 1c		1d	-6,500.
Comr	mercial Revitalization Deductions From Rental Real Estate Activities			
2a	Commercial revitalization deductions from Worksheet 2, column (a) 2a ()		
b	Prior year unallowed commercial revitalization deductions from Worksheet 2,			
	column (b))		
С	Add lines 2a and 2b		2c	()
All Ot	ther Passive Activities			
3a	Activities with net income (enter the amount from Worksheet 3, column (a)) . 3a			
b	Activities with net loss (enter the amount from Worksheet 3, column (b)) 3b ()		
С	Prior years' unallowed losses (enter the amount from Worksheet 3, column (c)))		
d	Combine lines 3a, 3b, and 3c		3d	
4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this	form with your		
	return; all losses are allowed, including any prior year unallowed losses entered on line			
	Report the losses on the forms and schedules normally used		4	-6,500.
	If line 4 is a loss and: • Line 1d is a loss, go to Part II.			

• Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.

• Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II or Part III. Instead, go to line 15.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

	Note: Enter all numbers in Part if as positive amounts. See instructions for an example.		
5	Enter the smaller of the loss on line 1d or the loss on line 4	5	6,500.
6	Enter \$150,000. If married filing separately, see instructions 6 150,000.		
7	Enter modified adjusted gross income, but not less than zero. See instructions 7 108, 966.		
	Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.		
8	Subtract line 7 from line 6		
9	Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions	9	20,517.
10	Enter the smaller of line 5 or line 9	10	6,500.
	If line 2c is a loss, go to Part III. Otherwise, go to line 15.		
Part	III Special Allowance for Commercial Revitalization Deductions From Rental Real Esta	ate Ac	tivities
	Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instruction	ns.	
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions .	11	
12	Enter the loss from line 4	12	
13	Reduce line 12 by the amount on line 10	13	
14	Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14	
Part	IV Total Losses Allowed		
15	Add the income, if any, on lines 1a and 3a and enter the total	15	0.
16	Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions		
	to find out how to report the losses on your tax return	16	6,500.
For Pa	aperwork Reduction Act Notice, see instructions. BAA REV 08/30/21 PRO		Form 8582 (2020)

OMB No. 1545-1008

2020
Attachment Sequence No. 858

Identifying number 732-51-0950

Caution: The worksheets must be filed with your tax return. Keep a copy for your records. Worksheet 1—For Form 8582, Lines 1a, 1b, and 1c (see instructions)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
SRI NAGAR COLONY	0.	6,500.			6,500.
Total Enter on Form 9592 lines to th					
Total. Enter on Form 8582, lines 1a, 1b, and 1c	0.	6,500.			

Worksheet 2—For Form 8582, Lines 2a and 2b (see instructions)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and			
<u>2b</u>			

Worksheet 3-For Form 8582, Lines 3a, 3b, and 3c (see instructions)

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 3a, 3b, and 3c					

Worksheet 4-Use This Worksheet if an Amount Is Shown on Form 8582, Line 10 or 14. See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)		(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
SRI NAGAR COLONY	E Ln 22	6,500.	1.00000000	6,500.	0.
Total		6,500.	1.00	6,500.	0.

Worksheet 5—Allocation of Unallowed Losses (see instructions)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
Total			1.00	