£1040

Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return

2020

OMB No. 1545-007

IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly u checked the MFS box, enter the son is a child but not your depende	name of y	ed filing separately your spouse. If you				, ,	_			. , . ,
Your first name			Last na	me					Your	social sec	curity r	number
SUMA RE	DDY		VENN	IAVARAM						361-91-9341		
If joint return, spouse's first name and middle initial Last			Last na	me					Spous	e's social	l secur	ity number
Home address 5403 96	•	er and street). If you have a P.O. box, se	ee instruction	ons.				Apt. no. 1217	Checl	k here if y	ou, or	•
		ce. If you have a foreign address, also o	complete s	paces below.	Sta		ZIP			to this fu		, want \$3 ecking a
WESTMIN					C		_	020	_	elow will		ange
Foreign country	y name			Foreign province/state	e/coun	ty	Fore	ign postal cod	le your t	tax or refu	_	Spouse
At any time du	ıring 20	020, did you receive, sell, send, ex	change, c	or otherwise acquir	e any	financial intere	est in	any virtual	currency	? Y	es [X No
Standard Deduction		eone can claim:	•									
Age/Blindness	You	Were born before January 2,	1956	Are blind S	oouse	: Was bo	rn be	fore Januar	y 2, 1956	3 🗌 l	s blinc	d
Dependents	s (see	instructions):		(2) Social securi	ity	(3) Relationsh	nip	(4) 🗸 i	f qualifies	for (see in	struction	ons):
If more		irst name Last name		number to yo		to you	Child tax cr		credit	Credit fo	or other	dependents
than four]			
dependents, see instruction	s ——]			
and check											ᆜ	
here ▶									<u> </u>	Ц		
Attach		Wages, salaries, tips, etc. Attach	1` ′	N-2					_	1	68	,059.
Sch. B if	2a	Tax-exempt interest	2a			axable interes			. –	2b		
required.	3a	Qualified dividends	3a			Ordinary divide			. –	3b		
	4a	IRA distributions	4a			axable amoun			_	4b		
	5a	Pensions and annuities	5a			axable amoun				5b		
Standard Deduction for—	6a	Social security benefits	6a			axable amoun	it.			6b		
Single or	7	Capital gain or (loss). Attach Sch		•		•		▶		7		
Married filing separately,	8	Other income from Schedule 1, li					٠		_	8		,200.
\$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8. T	his is your total in	come					9	62	,859.
Married filing jointly or	10	Adjustments to income:				1 .	1					
Qualifying	а	•				10	_					
widow(er), \$24,800	b	Charitable contributions if you tak					b					
Head of household,	С	Add lines 10a and 10b. These are	e your tot	al adjustments to	inco	me			► <u>1</u>	0с		
\$18,650	11	Subtract line 10c from line 9. This	•	•						11		,859.
If you checked any box under	12	Standard deduction or itemized		•						12	12	,400.
Standard	13	Qualified business income deduc	ction. Atta	ich Form 8995 or F	orm 8	3995-A			. 1	13		
Deduction, see instructions.	14	Add lines 12 and 13							-	14		,400.
	15	Taxable income. Subtract line 1	4 from lin	e 11. If zero or less	s, ente	er -0			. 1	15	50	,459.

Form 1040 (2020	0)									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			. 16	6,895.
	17	Amount from Schedule 2, lin	ie3						. 17	
	18	Add lines 16 and 17							. 18	6,895.
	19	Child tax credit or credit for	other dependen	ts					. 19	
	20	Amount from Schedule 3, lin	ie 7						. 20	
	21	Add lines 19 and 20							. 21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					. 22	6,895.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 10 .				. 23	0.
	24	Add lines 22 and 23. This is	your total tax						▶ 24	6,895.
	25	Federal income tax withheld					1			
	а	Form(s) W-2				25a	9	, 29	2.	
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	,							
	d	Add lines 25a through 25c							. 25d	9,292.
If you have a	26	2020 estimated tax payment							. 26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			· · ' _N o ·	27				
If you have	28	Additional child tax credit. A	ttach Schedule 8	8812		28				
nontaxable combat pay,	29	American opportunity credit		-		29				
see instructions.	30	Recovery rebate credit. See				30	1	,80	0.	
	31	Amount from Schedule 3, lin	ie 13			31				ı
	32	Add lines 27 through 31. The	•						-	1,800.
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments						11,092.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amou	unt you	overpaid		. 34	4,197.
	35a	Amount of line 34 you want			is attached, che	eck here	e	▶ [35a	4,197.
Direct deposit? See instructions.	►b	Routing number 0 7 4			▶ c Type: ∑	Chec	king 🗌 S	Savin	gs	
See instructions.	►d	Account number 8 7 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 1				1	1			
instructions.	38	Estimated tax penalty (see in				38				
Third Party		you want to allow another					□ v 0.		to bottom	V N
Designee		structions					☐ Yes. Co	•		
		signee's ne ▶		Phone no. ▶			numb		entification N) ►	
Sign		der penalties of perjury, I declare t	hat I have examine		accompanying sc	hedules				st of mv knowledge and
•		ief, they are true, correct, and com	plete. Declaration of	of preparer (othe	than taxpayer) is b	ased on	all informatio	n of w		
Here	Yo	ur signature		Date	Your occupation					nt you an Identity
	k					0000			Protection P see inst.) ▶	PIN, enter it here
Joint return? See instructions.	Cr	ouse's signature. If a joint return, t	the manual airm	Date	RPA DEVEL					nt.vava an avaa an
Keep a copy for	Sp	ouse's signature. If a joint return, t	oth must sign.	Date	Spouse's occupa	llion				nt your spouse an ection PIN, enter it here
your records.								see inst.) ►		
	Ph	one no. (260)705-324	7	Email address	SUMAREDDY	47@GI	MAIL.CO	M		
Doid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN	I	Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAN	1 09/	16/2021	P02	082703	Self-employed
Preparer	Fire	m's name ► GLOBAL TAX	XES LLC					F	Phone no.	(678)965-9522
Use Only	Fire	m's address ▶ 2530 Pebb	le Creek L	n Cummin	g GA 30041				Firm's EIN	
Go to www.irs.g	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

2020
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

SUMA REDDY VENNAVARAM

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

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

Sequence No. 01
Your social security number
361-91-9341

Par	Additional Income		
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	-5,200.
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,		F 000
Dar	line 8	9	-5,200.
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	

SCHEDULE E

Department of the Treasury

(Form 1040)

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.

Attachment

OMB No. 1545-0074

▶ Go to www.irs.gov/ScheduleE for instructions and the latest information. Internal Revenue Service (99) Name(s) shown on return

Sequence No. 13 Your social security number

SUMA REDDY 361-91-9341 VENNAVARAM Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions Physical address of each property (street, city, state, ZIP code) Α Velair WARANGAL TELANGANA IN 506142 В C 1b Fair Rental **Personal Use** Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days Days** personal use days. Check the **QJV** box only if you meet the requirements to file as a 365 0 Α Α qualified joint venture. See instructions. В В С С Type of Property: Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: **Properties:** Α 3 Rents received . 3 600. 4 Royalties received 4 Expenses: Advertising 5 5 6 Auto and travel (see instructions) . . . 6 7 Cleaning and maintenance . . . 7 500. 8 8 Commissions. 9 9 Insurance 10 Legal and other professional fees . . . 10 11 11 500. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 Other interest. 13 14 Repairs. 14 1,000. 15 800. 15 Supplies . Taxes 16 16 17 17 3,000. 18 Depreciation expense or depletion . . 18 19 19 Total expenses. Add lines 5 through 19 20 20 5,800. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -5,200. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) -5,200.) 600 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b 23c **c** Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 5,800. Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 5,200. 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 26 -5,200.



208453 11555

DR 8453 (10/06/20)
COLORADO DEPARTMENT OF REVENUE
Denver CO 80261-0005
Tax.Colorado.gov
Page 1 of 1

State of Colorado Individual Income Tax Declaration for Electronic Filing Do not mail this form to the IRS or the Colorado Department of Revenue. Retain with your records.

Taxpayer SSN or ITIN	Spouse SSN o	r ITIN (If Joint Re	eturn)	Submission ID)				
361-91-9341									
Taxpayer Last Name			Taxpayer Fir	st Name			Midd	dle Initial	
VENNAVARAM			SUMA RE	DDY					
Spouse Last Name (If Joint Return)			Spouse First	Name (If Joint	Return)				
Street Address					Phone	Number			
5403 96TH W AVE APT 1217					(26)	0)705-32	47		
City					State	Zip			
WESTMINSTER					СО	80020			
	Part	I — Tax Retu	ırn Informa	ation					
1. Total Income, line 9 from your fe	deral Form 10	040			1 \$		6	2859	
2. Taxable Income, line 15 on feder	ral Form 1040)			2 \$		5	0459	
3. Colorado Tax, line 19 on Colorado	do Form 104				3 \$			2296	
4. Colorado Tax Withheld, line 20 on Colorado Form 104								2817	
5. Refund, line 32 Colorado Form 104 5								521	
6. Amount You Owe, line 37 on Colorado Form 104									
·		l — Declarat	ion of Tax	Payer	1.				
Under penalties of perjury, I declare tha with the amounts shown on my 2020 Fec are true, correct, and complete to the bapplicable) may be required to provide upon request by the Colorado Department.	deral/Colorado i best of my know paper copies o	ncome tax retur vledge and beli f this declaratio	ns, and that s lef. I understan, m, my returns	said tax returns and that I (or r s, withholding s	, statement ny Electron statements,	s, schedules ic Return O schedules,	and attacl riginator (E and attacl	hments ERO) if	
Signature		Date	Spouse's S	Signature (If Join	t Return, Bo	th Must Sign) Date		
Р	art III — Dec	laration of E	RO/Prepare	er/Transmitt	er				
If the transmitter did not prepare the	e tax return, c	heck here							
If I am not the preparer, I declare only that Colorado income tax returns. If I am the propared colorado income tax returns and that the amounts shown on said tax returns, and best of my knowledge and belief. As prephave provided the taxpayer with copies of covered by the Colorado statute of limitational attachments upon request by the Colorado statute.	oreparer, under e information pro that said tax re arer, I further de of all forms and tions, and to pro	penalties of per povided to me by turns, statemen clare that I have information file ovide paper copi	jury I declare the taxpaye ts, schedules obtained the d. I also agre es of this dec	that I have rever and the amount, and attachment taxpayer's signer to maintain the claration, said reuring this perior	iewed the a unts shown ents are true nature on the his signed feturns, with d.	bove taxpay in Part I abo e, correct, ar his form at the Form (DR 84 holding state	ver's 2020 F cove agree on and complet ue time of fil 453) for the ements, scl	ederal/ with the e to the ling and e period hedules	
ERO's Signature					Preparer Ide	entification Nu	umber or Yo	ur SSN	
SYAM PRIYA RAM SAGAR GUPT	A TALLAM				P020827	03		_	
					Date (MM/DD/	ate (MM/DD/YY)			
Check if also Preparer x					09/16/2	9/16/21			





DR 0104 (10/19/20)
COLORADO DEPARTMENT OF REVENUE
Tax. Colorado.gov
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(0013)

2020 Colorado Individual Income Tax Return

non-res	r or Nonresident (or reside ident combination) clude DR 0104PN	ent, part-	year,] Ma	rk if Abroa	ıd on	due	date – see	e instrud	ctions
Your Last Name		Your Fi	rst Nam	е						Midd	le Initial
VENNAVARAM		SUMA	A REDI	DY							
Date of Birth (MM/DD/YYYY)	SSN or ITIN	Deceas	sed							,	
02/01/1994	361-91-9341	If checked and claiming a ref the DR 0102 and death certif									
Enter the following information from your current			f Issue	L	ast 4 o	characters of	ID nu	ımber	Date of Issu	ance	
driver license or state identification card.					4534	ł			10/02/	10/02/20	
If Joint, Spouse's Last Name		Spouse	's First I	Name						Midd	le Initial
Spouse's Date of Birth (MM/DD/YYYY)	Spouse's SSN or ITIN	Deceas	sed						refund, you ertificate wit		
Enter the following informatio current driver license or state	n from your spouse's identification card.	State o	of Issue	L	ast 4 o	characters of	ID nu	ımber	Date of Issu	ance	
Mailing Address								Pho	ne Number		
5403 96TH W AVE APT 1	.217							(26	60)705-3	247	
City			State	Zip (Code		Fo	reign (Country (if ap	plicable)	
WESTMINSTER			CO	800	020						
								Ro	ound To The	Nearest	Dollar
Enter Federal Taxable Inco or 1040 SR line 15	ome from your federal in	come t	ax forn	n: 10	40 lin	e 15 ● 1				5045	00
Include W-2s and 1099s with	CO withholding.										
	Additions to										
2. State Addback, enter the s			your f	eder	al for						
1040 or 1040 SR schedule	: A, line ba (see instructi	ions)				• 2					0 0
3. Business Interest Expense	Deduction Addback (se	ee instr	uctions	s)		• 3					0 0



21555

DR 0104 (10/19/20) COLORADO DEPARTMENT OF REVENUE Tax.Colorado.gov

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200104 21555	raye 2 01 4		CON an ITINI	
Name		3	SSN or ITIN	
SUMA REDDY VENNAVARAM			361-91-9341	
4. Excess Business Loss Addback (see instruc	etions) • 4			0.0
5. Net Operating Loss Addback (see instructio	ns) • 5	5		0.0
6. Other Additions, explain (see instructions)	• 6	:		0.0
Explain:		'		0 0
7 Subtatal aum of lines 1 through 6	7	,	50459	0.0
7. Subtotal, sum of lines 1 through 6	Colorado Subtractions			00
8. Subtractions from the DR 0104AD Schedule				
DR 0104AD schedule with your return.	• 8			00
•			50459	
9. Colorado Taxable Income, subtract line 8 fro				0 0
	4 Book for full-year tax table and part-ye	ar DR 0104P	N Schedule	
10. Colorado Tax from tax table or the DR 0104	· ·		2296	
the DR 0104PN with your return if applicable		0		0 0
11. Alternative Minimum Tax from the DR 0104/	· ·			0 0
DR 0104AMT with your return.	• 1	1		00
12. Recapture of prior year credits	• 1	2		0 0
13. Subtotal, sum of lines 10 through 12	1	3	2296	0 0
14. Nonrefundable Credits from the DR 0104CF		-		00
cannot exceed line 13, you must submit the		1		00
15. Total Nonrefundable Enterprise Zone credits				1
or from the DR 1366 line 87, the sum of lines	s 14, 15, and 16 cannot exceed line 13,			
you must submit the DR 1366 with your retu	rn. • 1	5		0 0
16. Strategic Capital Tax Credit from DR 1330, t				
exceed line 13, you must submit the DR 133	0 with your return. • 1	6		0.0
47. Not become Tour come of lines 44. 45. and 40	Culative at the at assess from the a 40	_	2296	0.0
 Net Income Tax, sum of lines 14, 15, and 16 Use Tax reported on the DR 0104US sched 		7		0.0
the DR 0104US with your return.	• 1	8		0 0
and Bix one recommit your return.	<u> </u>		2225	
19. Net Colorado Tax, sum of lines 17 and 18	1	9	2296	0.0
20. CO Income Tax Withheld from W-2s and 10			2817	
and/or 1099s claiming Colorado withholding	with your return. • 2	0	2017	0.0
21. Prior-year Estimated Tax Carryforward	• 2	4		0.0
22. Estimated Tax Payments, enter the sum of t				00
remitted for this tax year	• 2	2		0 0
-				
3. Extension Payment remitted with the DR 01	58-I • 2	3		0.0
24. Other Prepayments: DR 0104BEP	☐ • DR 0108 ☐ • DR 1079 • 2	4		
				0 (



DR 0104 (10/19/20)
COLORADO DEPARTMENT OF REVENUE
Tax.Colorado.gov

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200104	31333			
Name			SSN or ITIN	
SUMA REDDY VE	INNAVARAM		361-91-9341	
	ation Easement Credit from the DR 1305G line 33, you must			
	305G with your return.	• 25		0.0
	r Vehicle Credit from the DR 0617, you must submit each		0	
DR 0617 with yo		• 26		0 0
	dits from the DR 0104CR line 9, you must submit the			
DR 0104CR with	n your return.	• 27		0.0
28. Subtotal sum of	f lines 20 through 27	28	2817	0 0
	d Gross Income from your federal income tax form: 1040 lin			"
or 1040 SR line		• 29	62859	00
			521	
30. Overpayment, if	f line 28 is greater than line 19 then subtract line 19 from line	e 28 30	271	00
	-			
31. Estimated Tax C	Credit Carryforward to 2021 first quarter, if any.	• 31		0.0
32. Refund, subtrac	t line 31 from line 30 (see instructions)	• 32	521	00
Direct Routing	g Number 0 7 4 0 0 0 0 1 0 Type: X Check	ing Sav	ings CollegeInvest 5	529
D '4	nt Number 8 7 0 5 7 9 7 9 9			
For questions r	regarding CollegeInvest direct deposit or to open an account, visit	CollegeInvest.or	g or call 800-448-2424.	
33. Net Tax Due, su	ubtract line 28 from line 19	33		0.0
34. Delinquent Payr	ment Penalty (see instructions)	• 34		0.0
35 . Delinguent Pavr	ment Interest (see instructions)	• 35		0.0
	Penalty, you must submit the DR 0204 with your return.			
(see instructions	• •	• 36		00
(4			1
37. Amount You Ow	ve, sum of lines 33 through 36	• 37		
	<u> </u>		received by the State. If converted	VOUE
check will not be returned. If y electronically.	check to a one-time electronic banking transaction. Your bank account may be debited as e your check is rejected due to insufficient or uncollected funds, the Department of Revenue m	nay collect the paymen	t amount directly from your bank acc	count



200104

DR 0104 (10/19/20) **COLORADO DEPARTMENT OF REVENUE**

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Name			SSN or ITIN		
SUMA REDDY VENNAVARAM			361-91-9341		
	Third Party Designee				
Do you want to allow another person to discuss this return and any related information with the Colorado Department of Revenue? See the instructions.	No Yes. Comple	ete the fo	ollowing:		
Designee's Name		Phone N	lumber		
•					
Sign Below Under penalties of perjury, I declare that to the	e best of my knowledge and belief, this return is tru	ue, correct	and complete.		
Your Signature	•		Date (MM/DD/YY)		
Spouse's Signature. If joint return, BOTH must sign.			Date (MM/DD/YY)		
Paid Preparer's Name		Paid Prep	parer's Phone		
GLOBAL TAXES LLC		(678)	965-9522		
Paid Preparer's Address	City	State	Zip		
2530 PEBBLE CREEK LN	CUMMING	GA	30041		

File and pay at: Colorado.gov/RevenueOnline

If you are filing this return with a check or payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE

Denver, CO 80261-0006

If you are filing this return without a check or

payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE

Denver, CO 80261-0005

These addresses and zip codes are exclusive to the Colorado Department of Revenue, so a street address is not required.

REV 04/06/21 PRO