Ε <b>4</b>	1	0.10	Department of the Treasury-Internal Revenue Service						
Ē		<b>U4U</b>	Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax R	eturr					

2020

OMB No. 1545-0074 RS Use Only—Do not write or staple in this space.

-					-		-				
Filing Status Check only				ed filing separately (M							
one box.		u checked the MFS box, enter the nation is a child but not your dependent	-	our spouse. II you cr	iecked the H	JH OF QV	v box, enter ti	ne chila s	name II u	ne quantying	
Your first name and middle initial				me				Your social security number			
SAI MANISH				ULA MADHUSUD	HANR			278-45-6112			
If joint return, s	pouse's	s first name and middle initial	Last nar	me				Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			Apt. no.	Preside	ntial Electi	ion Campaign	
3001 CO	LONI	AL PKWY					9104		here if you,		
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete sp	oaces below.	State	ZIP	code	spouse if filing jointly, want \$3 to go to this fund. Checking a			
CEDAR P	ARK				TX	78	3613	box below will not change			
Foreign countr	y name		F	oreign province/state/c	ounty	For	eign postal code	your tax	x or refund.	<u> </u>	
									You	Spouse	
At any time du	ring 20	020, did you receive, sell, send, exch	nange, o	r otherwise acquire a	any financial i	nterest ir	any virtual c	urrency?	☐ Yes	<b>⋈</b> No	
Standard	Som	eone can claim: You as a de	pendent	Your spouse	as a depend	ent		7			
Deduction		Spouse itemizes on a separate return	n or you	were a dual-status a	llien						
A a a /Dlinda a a	. V	. □ Warra harra hafarra Januara O 1	050 [	And blind Co.		a ham h	of and I amount	0 1050		line of	
		Were born before January 2, 19	956 _	Are blind Spo			efore January		☐ Is bl		
Dependent		instructions): irst name Last name		(2) Social security number	(3) Relation		Child tax of		r (see instru	uctions): ther dependents	
If more than four	(1)	Last Harrie						reuit	Credit for ot	Their dependents	
dependents,											
see instruction	s										
and check here ▶ □	_					-				<del>-</del>	
	1	Wages, salaries, tips, etc. Attach F	orm(s) \	N-2	12 12 12			. 1		81,807.	
Attach	2a		2a		b Taxable int	oract		2b		<u> </u>	
Sch. B if	3a		3a		b Ordinary d			3b			
required.	4a	THE PERSON OF TH	4a		b Taxable an			. 4b			
	5a		5a		b Taxable an			. 5b			
Standard	6a		6a		<b>b</b> Taxable an			. 6b			
Deduction for -	7	Capital gain or (loss). Attach Scheo	dule D if	required. If not requi	red, check he	ere .	🕨	□ 7			
Single or Married filing	8	Other income from Schedule 1, line 9								-5 <b>,</b> 720.	
separately, \$12,400	9									76 <b>,</b> 087.	
Married filing	10	Adjustments to income:									
jointly or Qualifying	а	From Schedule 1, line 22				10a					
widow(er), \$24,800	b	Charitable contributions if you take	the stan	dard deduction. See	instructions	10b					
Head of	С	Add lines 10a and 10b. These are your total adjustments to income									
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted gross inco	me			<b>▶</b> 11		76,087.	
If you checked	12	Standard deduction or itemized	deducti	ons (from Schedule	A)			. 12	2	12,400.	
any box under Standard	13	Qualified business income deducti	on. Atta	ch Form 8995 or For	m 8995-A .			. 13	,		
Deduction, see instructions.	14	Add lines 12 and 13					* * * *	_		12,400.	
	15	Taxable income. Subtract line 14	from line	e 11. If zero or less, e	enter -0			. 15	;	63,687.	

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

Form **1040** (2020)

Form 1040 (2020	0)							Page <b>2</b>
	16	Tax (see instructions). Check if any from Form	n(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	9,799.
	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	9,799.
	19	Child tax credit or credit for other dependen	its				19	
	20	Amount from Schedule 3, line 7					20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero or less,	enter -0				22	9,799.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 10 .			23	0.
	24	Add lines 22 and 23. This is your total tax				. ▶	24	9,799.
	25	Federal income tax withheld from:						
	а	Form(s) W-2			<b>25a</b> 11	,335.		
	b	Form(s) 1099			25b			
	C	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	11,335.
• If you have a	26	2020 estimated tax payments and amount a	applied from 20	19 return			26	
qualifying child,	27	Earned income credit (EIC)			27			
attach Sch. EIC.	28	Additional child tax credit. Attach Schedule	8812		28			
nontaxable	29	American opportunity credit from Form 8863	3, line 8		29	2//		
combat pay, see instructions.	30	Recovery rebate credit. See instructions .			30	7		
	31	Amount from Schedule 3, line 13			31			
	32	Add lines 27 through 31. These are your total	al other paym	ents and refunda	able credits	. ▶	32	
	33	Add lines 25d, 26, and 32. These are your to	otal payments			. ▶	33	11,335.
Refund	34	If line 33 is more than line 24, subtract line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	1,536.
Herana	35a	Amount of line 34 you want refunded to you		is attached, che	ck here		35a	1,536.
Direct deposit?	▶b	Routing number 1 1 1 1 0 0 0 0	2 5	▶ c Type: 🔀	Checking	Savings		
See instructions.	▶d	Account number 5 8 6 0 3 4 8	5 5 9 4	2 3				
	36	Amount of line 34 you want applied to your	2021 estimate	ed tax 🕨	36			
Amount	37	Subtract line 33 from line 24. This is the amount	ount you owe	now		. •	37	
You Owe		Note: Schedule H and Schedule SE filers,	line 37 may r	not represent all	of the taxes you	owe for		
For details on how to pay, see		2020. See Schedule 3, line 12e, and its instr						
instructions.	38	Estimated tax penalty (see instructions) .			38			
<b>Third Party</b>	Do	you want to allow another person to disc	cuss this retu	n with the IRS?				
Designee	ins	tructions	omplete	below.	X No			
		signee's	onal ident		<del></del>			
<u> </u>		ne   der penalties of perjury, I declare that I have examine	no.	d accompanying cale		ber (PIN)		of my length and a sold
Sign		ef, they are true, correct, and complete. Declaration						
Here	Yo	ur signature	Date	Your occupation		If th	e IRS sen	t you an Identity
	\			, con occupanion		Prof	tection PIN	N, enter it here
Joint return?				SOFTWARE I	ENGINEER	(see	e inst.) ▶	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat	ion			t your spouse an
your records.	,						inst.)	ction PIN, enter it here
	Dh	one no.	Email address			(000		
-		parer's name Preparer's signa	THE CASE PERSONS ASSESSED.		Date	PTIN	$\overline{}$	Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA		СПРТА ТАТ.Т.АМ	A CONTRACTOR OF THE CONTRACTOR	P0208		Self-employed
Preparer		n's name ► GLOBAL TAXES LLC	TATA DUQUI	COLIN INDIAN	02/13/2021			678) 965–9522
Use Only	_	n's address > 2530 Pebble Creek I	n Cummin	r GA 30041				30-1017196

## **SCHEDULE 1** (Form 1040)

Department of the Treasury Internal Revenue Service

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074 Attachment Sequence No. **01** 

► 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 Form 1040, 1040-SR, or 1040-NR Your social security number SAI MANISH BACHULA MADHUSUDHANR 278-45-6112

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
<b>2</b> a	Alimony received	<b>2</b> 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	<b>-</b> 5,720.
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	-5 <b>,</b> 720.
Par	t II. Adjustments to Income		3,720.
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.)

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

20**20**Attachment

OMB No. 1545-0074

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

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

Sequence No. 13
Your social security number

SAI	MANISH BACHULA MADHUSUDHANR								278-45-6112			
Part	Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.											
		nts in 2020 that would require you to										
	Yes," did you or will yo	ou file required Form(s) 1099?							🗀	Yes No		
1a	Physical address of each property (street, city, state, ZIP code)											
A	H.NO10-243/11/	11/1, VASANTPURI MALKAJGIRI, HYDERABAD TELANGANA IN 500047										
B							4					
C				use 1997		-	D		10			
1b	Type of Property (from list below)	For each rental real estate pro above, report the number of fa personal use days. Check the	ir rental and				Rental Days	Per	sonal Use Days	QJV		
A	3	if you meet the requirements to	o file a	ofile as a A			365		0			
B		qualified joint venture. See ins	tructio	ons.	В			<sup>7</sup>				
С					С		M					
	of Property:											
	gle Family Residence	3 Vacation/Short-Term Rental					Rental					
	ti-Family Residence	4 Commercial	6 Ro	oyalties	8	Othe	r (describe)					
Incom		Properties:		1	Α		E	3		С		
3			3		1	550.						
4			4	1								
Expen												
5			5			L00.						
6		nstructions)	6			330.						
7		nance	7			L60.					_	
8			8									
9			9									
10	_	ssional fees	10									
11			11	-								
12		d to banks, etc. (see instructions)	12									
13			13			500.						
14	•		14	1	13	L80.						
15	• •		15	-								
16			16	-								
17	Utilities		17	-								
18		e or depletion	18	-								
19	Other (list)		19	-		270					—	
20		lines 5 through 19	20	-	0,2	270.					—	
21		line 3 (rents) and/or 4 (royalties). If										
		instructions to find out if you must	21		-5,7	720						
20		estate loss after limitation, if any,	21	+	٠, ١	120.					_	
22			22	(	<b>-5,</b> 7:	20 )	(		1/		١	
23a		structions)	17 10 17		-5, /.	23a		5	50.			
		eported on line 3 for all rental prope eported on line 4 for all royalty prop				23b		J.	30.			
b		eported on line 4 for all royally properties				23c						
c d		eported on line 18 for all properties				23d						
e		eported on line 20 for all properties				23e		6,2	70			
24		e amounts shown on line 21. <b>Do no</b>				236		0,2	24			
2 <del>4</del> 25	·	sses from line 21 and rental real estate		-		tor tota		_	25 (	5,720.	_	
									20 (	J, 120.		
26		ate and royalty income or (loss). V, and line 40 on page 2 do not										

-5,720.

26\_

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