

U.S. Return of Partnership Income

For calendar year 2020, or tax year beginning _____, 2020, ending _____, 20_____.

2020

▶ Go to www.irs.gov/Form1065 for instructions and the latest information.

A Principal business activity <u>EDUCATION</u>	Type or Print	Name of partnership <u>RNM EDUCATION LLC</u>	D Employer identification number <u>81-4984036</u>
B Principal product or service <u>SERVICE</u>		Number, street, and room or suite no. If a P.O. box, see instructions. <u>18200 S PARK VIEW DR</u>	E Date business started <u>10/11/2016</u>
C Business code number <u>611000</u>		City or town, state or province, country, and ZIP or foreign postal code <u>Houston TX 77084</u>	F Total assets (see instructions) <u>\$ 189,492.</u>

- G** Check applicable boxes: (1) Initial return (2) Final return (3) Name change (4) Address change (5) Amended return
- H** Check accounting method: (1) Cash (2) Accrual (3) Other (specify) ▶ _____
- I** Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year ▶ _____ **4**
- J** Check if Schedules C and M-3 are attached ▶
- K** Check if partnership: (1) Aggregated activities for section 465 at-risk purposes (2) Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 22 below. See instructions for more information.

Income	1a Gross receipts or sales	1a	<u>215,297.</u>	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a			1c <u>215,297.</u>
	2 Cost of goods sold (attach Form 1125-A)			2
	3 Gross profit. Subtract line 2 from line 1c			3 <u>215,297.</u>
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)			4
	5 Net farm profit (loss) (attach Schedule F (Form 1040))			5
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			6
7 Other income (loss) (attach statement)			7	
8 Total income (loss). Combine lines 3 through 7			8 <u>215,297.</u>	
Deductions (see instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)			9 <u>93,973.</u>
	10 Guaranteed payments to partners			10
	11 Repairs and maintenance			11 <u>14,523.</u>
	12 Bad debts			12
	13 Rent			13 <u>79,164.</u>
	14 Taxes and licenses			14
	15 Interest (see instructions)			15
	16a Depreciation (if required, attach Form 4562)	16a		
	b Less depreciation reported on Form 1125-A and elsewhere on return	16b		16c
	17 Depletion (Do not deduct oil and gas depletion.)			17
	18 Retirement plans, etc.			18
19 Employee benefit programs			19	
20 Other deductions (attach statement) <u>See Stmt</u>			20 <u>43,913.</u>	
21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20			21 <u>231,573.</u>	
22 Ordinary business income (loss). Subtract line 21 from line 8			22 <u>-16,276.</u>	
Tax and Payment	23 Interest due under the look-back method—completed long-term contracts (attach Form 8697)			23
	24 Interest due under the look-back method—income forecast method (attach Form 8866)			24
	25 BBA AAR imputed underpayment (see instructions)			25
	26 Other taxes (see instructions)			26
	27 Total balance due. Add lines 23 through 26			27
	28 Payment (see instructions)			28
	29 Amount owed. If line 28 is smaller than line 27, enter amount owed			29
	30 Overpayment. If line 28 is larger than line 27, enter overpayment			30 <u>0.</u>

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.

Signature of partner or limited liability company member _____ Date _____

May the IRS discuss this return with the preparer shown below? See instructions. Yes No

Paid Preparer Use Only	Print/Type preparer's name <u>SYAM PRIYA RAM SAGAR GUPTA TALLAM</u>	Preparer's signature <u>SYAM PRIYA RAM SAGAR GUPTA TALLAM</u>	Date <u>08/06/2021</u>	Check <input type="checkbox"/> if self-employed	PTIN <u>P02082703</u>
	Firm's name ▶ <u>GLOBAL TAXES LLC</u>	Firm's EIN ▶ <u>30-1017196</u>			
	Firm's address ▶ <u>2530 Pebble Creek Ln Cumming, GA 30041</u>	Phone no. (678) 965-9522			

Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:	Yes	No
a <input checked="" type="checkbox"/> Domestic general partnership		
b <input type="checkbox"/> Domestic limited partnership		
c <input type="checkbox"/> Domestic limited liability company		
d <input type="checkbox"/> Domestic limited liability partnership		
e <input type="checkbox"/> Foreign partnership		
f <input type="checkbox"/> Other ▶		

2 At the end of the tax year:		
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership		X
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership		X

3 At the end of the tax year, did the partnership:		
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below		X

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below		
		X

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital

4 Does the partnership satisfy all four of the following conditions?	Yes	No
a The partnership's total receipts for the tax year were less than \$250,000.		
b The partnership's total assets at the end of the tax year were less than \$1 million.		
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.		
d The partnership is not filing and is not required to file Schedule M-3 If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.	X	

5 Is this partnership a publicly traded partnership, as defined in section 469(k)(2)?		
		X

6 During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?		
		X

7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?		
		X

8 At any time during calendar year 2020, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶		
		X

9 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions		
		X

10a Is the partnership making, or had it previously made (and not revoked), a section 754 election? See instructions for details regarding a section 754 election.		
		X

b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		
		X

Schedule B Other Information *(continued)*

	Yes	No
c Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
11 Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) ▶ <input type="checkbox"/>		
12 At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
13 If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions ▶		
14 Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership ▶		X
15 Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return ▶		
16a Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions		X
b If "Yes," did you or will you file required Form(s) 1099?		
17 Enter the number of Forms 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations, attached to this return ▶		
18 Enter the number of partners that are foreign governments under section 892 ▶		
19 During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
20 Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938		X
21 Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		X
22 During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions If "Yes," enter the total amount of the disallowed deductions ▶ \$		X
23 Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		X
24 Does the partnership satisfy one or more of the following? See instructions a The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense. b The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the partnership has business interest. c The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		X
25 Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions. If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3 ▶ _____ If "No," complete Designation of Partnership Representative below.		X

Designation of Partnership Representative (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR ▶ VENKATA KASIREDDY

U.S. address of PR ▶ 3401 RADHA LANE Houston TX 77018	U.S. phone number of PR ▶ (713) 298-6353
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If the PR is an entity, name of the designated individual for the PR ▶

U.S. address of designated individual ▶	U.S. phone number of designated individual ▶
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26 Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 16 ▶ \$		X
27 Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership ▶		
28 At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		X
29 Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions. Percentage: By Vote By Value		X

Schedule K Partners' Distributive Share Items		Total amount
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1 -16,276.
	2 Net rental real estate income (loss) (attach Form 8825)	2
	3a Other gross rental income (loss)	3a
	b Expenses from other rental activities (attach statement)	3b
	c Other net rental income (loss). Subtract line 3b from line 3a	3c
	4 Guaranteed payments: a Services 4a b Capital 4b	4c
	c Total. Add lines 4a and 4b	4c
	5 Interest income	5
	6 Dividends and dividend equivalents: a Ordinary dividends	6a
	b Qualified dividends 6b c Dividend equivalents 6c	6c
	7 Royalties	7
8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
b Collectibles (28%) gain (loss)	9b	
c Unrecaptured section 1250 gain (attach statement)	9c	
10 Net section 1231 gain (loss) (attach Form 4797)	10	
11 Other income (loss) (see instructions) Type ▶	11	
Deductions	12 Section 179 deduction (attach Form 4562)	12
	13a Contributions	13a
	b Investment interest expense	13b
	c Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶	13c(2)
d Other deductions (see instructions) Type ▶	13d	
Self-Employment	14a Net earnings (loss) from self-employment	14a -16,276.
	b Gross farming or fishing income	14b
	c Gross nonfarm income	14c 215,297.
Credits	15a Low-income housing credit (section 42(j)(5))	15a
	b Low-income housing credit (other)	15b
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c
	d Other rental real estate credits (see instructions) Type ▶	15d
	e Other rental credits (see instructions) Type ▶	15e
	f Other credits (see instructions) Type ▶	15f
Foreign Transactions	16a Name of country or U.S. possession ▶	16a
	b Gross income from all sources	16b
	c Gross income sourced at partner level	16c
	Foreign gross income sourced at partnership level	
	d Reserved for future use ▶ e Foreign branch category ▶	16e
	f Passive category ▶ g General category ▶ h Other (attach statement) ▶	16h
	Deductions allocated and apportioned at partner level	
	i Interest expense ▶ j Other ▶	16j
	Deductions allocated and apportioned at partnership level to foreign source income	
	k Reserved for future use ▶ l Foreign branch category ▶	16l
	m Passive category ▶ n General category ▶ o Other (attach statement) ▶	16o
	p Total foreign taxes (check one): ▶ Paid <input type="checkbox"/> Accrued <input type="checkbox"/>	16p
q Reduction in taxes available for credit (attach statement)	16q	
r Other foreign tax information (attach statement)		
Alternative Minimum Tax (AMT) items	17a Post-1986 depreciation adjustment	17a
	b Adjusted gain or loss	17b
	c Depletion (other than oil and gas)	17c
	d Oil, gas, and geothermal properties—gross income	17d
	e Oil, gas, and geothermal properties—deductions	17e
	f Other AMT items (attach statement)	17f
Other Information	18a Tax-exempt interest income	18a
	b Other tax-exempt income	18b
	c Nondeductible expenses	18c
	19a Distributions of cash and marketable securities	19a
	b Distributions of other property	19b
	20a Investment income	20a
b Investment expenses	20b	
c Other items and amounts (attach statement)		

Analysis of Net Income (Loss)

1	Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16p					1	-16,276.
2	Analysis by partner type:						
	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other	
a	General partners	-16,276.					
b	Limited partners						

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash		28,061.		27,633.
2a	Trade notes and accounts receivable				
b	Less allowance for bad debts				
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (attach statement)		6,679.		6,679.
7a	Loans to partners (or persons related to partners)				
b	Mortgage and real estate loans				
8	Other investments (attach statement)				
9a	Buildings and other depreciable assets	15,180.		15,180.	
b	Less accumulated depreciation		15,180.		15,180.
10a	Depletable assets				
b	Less accumulated depletion				
11	Land (net of any amortization)				
12a	Intangible assets (amortizable only)	140,000.		140,000.	
b	Less accumulated amortization		140,000.		140,000.
13	Other assets (attach statement)				
14	Total assets		189,920.		189,492.
Liabilities and Capital					
15	Accounts payable				
16	Mortgages, notes, bonds payable in less than 1 year				
17	Other current liabilities (attach statement)				15,848.
18	All nonrecourse loans				
19a	Loans from partners (or persons related to partners)				
b	Mortgages, notes, bonds payable in 1 year or more				
20	Other liabilities (attach statement)				
21	Partners' capital accounts		189,920.		173,644.
22	Total liabilities and capital		189,920.		189,492.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note: The partnership may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books	-16,276.	6	Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize): _____		a	Tax-exempt interest \$ _____	
3	Guaranteed payments (other than health insurance)		7	Deductions included on Schedule K, lines 1 through 13d, and 16p, not charged against book income this year (itemize):	
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16p (itemize):		a	Depreciation \$ _____	
a	Depreciation \$ _____		8	Add lines 6 and 7	
b	Travel and entertainment \$ _____		9	Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	-16,276.
5	Add lines 1 through 4	-16,276.			

Schedule M-2 Analysis of Partners' Capital Accounts

1	Balance at beginning of year	189,920.	6	Distributions: a Cash	
2	Capital contributed: a Cash		b Property		
	b Property		7	Other decreases (itemize): _____	
3	Net income (loss) per books	-16,276.	8	Add lines 6 and 7	
4	Other increases (itemize): _____		9	Balance at end of year. Subtract line 8 from line 5	173,644.
5	Add lines 1 through 4	173,644.			

Schedule K-1 (Form 1065)

2020

Department of the Treasury Internal Revenue Service

For calendar year 2020, or tax year

beginning / / 2020 ending / /

Partner's Share of Income, Deductions, Credits, etc. See separate instructions.

Part I Information About the Partnership
A Partnership's employer identification number 81-4984036
B Partnership's name, address, city, state, and ZIP code RNM EDUCATION LLC 18200 S PARK VIEW DR Houston, TX 77084
C IRS Center where partnership filed return OGDEN, UT
D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner
E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.) 295-94-2219
F Name, address, city, state, and ZIP code for partner entered in E. See instructions. VENKATA KASIREDDY 3401 RADHA LANE Houston TX 77018
G General partner or LLC member-manager Limited partner or other LLC member
H1 Domestic partner Foreign partner
H2 If the partner is a disregarded entity (DE), enter the partner's: TIN Name
I1 What type of entity is this partner? INDIVIDUAL
I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here
J Partner's share of profit, loss, and capital (see instructions):
Beginning Ending
Profit 25.00000% 25.00000%
Loss 25.00000% 25.00000%
Capital 25.00000% 25.00000%
Check if decrease is due to sale or exchange of partnership interest
K Partner's share of liabilities:
Beginning Ending
Nonrecourse \$ \$
Qualified nonrecourse financing \$ \$
Recourse \$ 3,962.
Check this box if Item K includes liability amounts from lower tier partnerships.

L Partner's Capital Account Analysis
Beginning capital account \$ 47,498.
Capital contributed during the year \$
Current year net income (loss) \$ -4,069.
Other increase (decrease) (attach explanation) \$
Withdrawals & distributions \$ ()
Ending capital account \$ 43,429.

M Did the partner contribute property with a built-in gain or loss? Yes No
N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)
Beginning \$
Ending \$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

Table with 4 columns: Line number, Description, Amount, and Other information. Rows include Ordinary business income (loss) -4,069, Net rental real estate income (loss), Other net rental income (loss), Guaranteed payments for services, Guaranteed payments for capital, Total guaranteed payments, Interest income, Ordinary dividends, Qualified dividends, Dividend equivalents, Royalties, Net short-term capital gain (loss), Net long-term capital gain (loss), Collectibles (28%) gain (loss), Unrecaptured section 1250 gain, Net section 1231 gain (loss), Other income (loss), Section 179 deduction, Other deductions, Self-employment earnings (loss) -4,069, and 53,825.

21 More than one activity for at-risk purposes*
22 More than one activity for passive activity purposes*
*See attached statement for additional information.

For IRS Use Only

Additional information from your Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (VENKATA KASIREDDY)

Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (VENKATA KASIREDDY)

Supplemental Information

Continuation Statement

Description	Amount
Item L. Partner's Capital Account Analysis:	
Beginning capital account now on Tax Basis	

Schedule K-1 (Form 1065)

2020

Department of the Treasury Internal Revenue Service

For calendar year 2020, or tax year

beginning / / 2020 ending / /

Partner's Share of Income, Deductions, Credits, etc. See separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number 81-4984036
B Partnership's name, address, city, state, and ZIP code RNM EDUCATION LLC 18200 S PARK VIEW DR Houston, TX 77084
C IRS Center where partnership filed return OGDEN, UT
D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN 635-72-5587
F Name, address, city, state, and ZIP code for partner entered in E. SUDHA BYREDDY 3401 RADHA LANE Houston TX 77018
G General partner or LLC member-manager
H1 Domestic partner
H2 If the partner is a disregarded entity (DE), enter the partner's: TIN Name
I1 What type of entity is this partner? INDIVIDUAL
I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here
J Partner's share of profit, loss, and capital (see instructions):
Beginning Ending
Profit 25.00000% 25.00000%
Loss 25.00000% 25.00000%
Capital 25.00000% 25.00000%
Check if decrease is due to sale or exchange of partnership interest
K Partner's share of liabilities:
Beginning Ending
Nonrecourse \$ \$
Qualified nonrecourse financing \$ \$
Recourse \$ 3,962.
Check this box if Item K includes liability amounts from lower tier partnerships.

L Partner's Capital Account Analysis
Beginning capital account \$ 47,498.
Capital contributed during the year \$
Current year net income (loss) \$ -4,069.
Other increase (decrease) (attach explanation) \$
Withdrawals & distributions \$ ()
Ending capital account \$ 43,429.

M Did the partner contribute property with a built-in gain or loss?
Yes No If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)
Beginning \$
Ending \$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

Table with 3 columns: Item number, Description, and Amount. Includes items 1 through 22 such as Ordinary business income (loss), Net rental real estate income (loss), Other net rental income (loss), Guaranteed payments for services, etc.

For IRS Use Only
21 More than one activity for at-risk purposes*
22 More than one activity for passive activity purposes*
*See attached statement for additional information.

Additional information from your Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (SUDHA BYREDDY)**Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (SUDHA BYREDDY)****Supplemental Information****Continuation Statement**

Description	Amount
Item L. Partner's Capital Account Analysis:	
Beginning capital account now on Tax Basis	

Schedule K-1 (Form 1065)

2020

Department of the Treasury Internal Revenue Service

For calendar year 2020, or tax year

beginning / / 2020 ending / /

Partner's Share of Income, Deductions, Credits, etc. See separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number 81-4984036
B Partnership's name, address, city, state, and ZIP code RNM EDUCATION LLC 18200 S PARK VIEW DR Houston, TX 77084
C IRS Center where partnership filed return OGDEN, UT
D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN 148-04-5126
F Name, address, city, state, and ZIP code for partner entered in E. MURALI PADMANABHAN 1115 OXFORD MILLS LN Sugar Land TX 77479
G General partner or LLC member-manager
H1 Domestic partner
H2 If the partner is a disregarded entity (DE), enter the partner's: TIN Name
I1 What type of entity is this partner? INDIVIDUAL
I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here
J Partner's share of profit, loss, and capital (see instructions):
Beginning Ending
Profit 25.00000% 25.00000%
Loss 25.00000% 25.00000%
Capital 25.00000% 25.00000%
K Partner's share of liabilities:
Beginning Ending
Nonrecourse \$ \$
Qualified nonrecourse financing \$ \$
Recourse \$ 3,962.
Check this box if Item K includes liability amounts from lower tier partnerships.

L Partner's Capital Account Analysis
Beginning capital account \$ 47,428.
Capital contributed during the year \$
Current year net income (loss) \$ -4,069.
Other increase (decrease) (attach explanation) \$
Withdrawals & distributions \$ ()
Ending capital account \$ 43,359.

M Did the partner contribute property with a built-in gain or loss?
Yes No (checked) If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)
Beginning \$
Ending \$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

Table with 3 columns: Item number, Description, and Amount. Rows include: 1 Ordinary business income (loss) -4,069; 2 Net rental real estate income (loss); 3 Other net rental income (loss) 16 Foreign transactions; 4a Guaranteed payments for services; 4b Guaranteed payments for capital; 4c Total guaranteed payments; 5 Interest income; 6a Ordinary dividends; 6b Qualified dividends; 6c Dividend equivalents 17 Alternative minimum tax (AMT) items; 7 Royalties; 8 Net short-term capital gain (loss); 9a Net long-term capital gain (loss) 18 Tax-exempt income and nondeductible expenses; 9b Collectibles (28%) gain (loss); 9c Unrecaptured section 1250 gain; 10 Net section 1231 gain (loss); 11 Other income (loss); 12 Section 179 deduction; 13 Other deductions; 14 Self-employment earnings (loss) A -4,069 C 53,824; 21 More than one activity for at-risk purposes*; 22 More than one activity for passive activity purposes*.

For IRS Use Only

Additional information from your Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (MURALI PADMANABHAN)

Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (MURALI PADMANABHAN)

Supplemental Information

Continuation Statement

Description	Amount
Item L. Partner's Capital Account Analysis:	
Beginning capital account now on Tax Basis	

Schedule K-1 (Form 1065)

2020

Department of the Treasury Internal Revenue Service

For calendar year 2020, or tax year

beginning / / 2020 ending / /

Partner's Share of Income, Deductions, Credits, etc. See separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number 81-4984036
B Partnership's name, address, city, state, and ZIP code RNM EDUCATION LLC 18200 S PARK VIEW DR Houston, TX 77084
C IRS Center where partnership filed return OGDEN, UT
D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN 143-11-9567
F Name, address, city, state, and ZIP code for partner entered in E. SASIKALA MURALI 1115 OXFORD MILLS LN Sugar Land TX 77479
G General partner or LLC member-manager
H1 Domestic partner
H2 If the partner is a disregarded entity (DE), enter the partner's: TIN Name
I1 What type of entity is this partner? INDIVIDUAL
I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here
J Partner's share of profit, loss, and capital (see instructions):
Beginning Ending
Profit 25.00000% 25.00000%
Loss 25.00000% 25.00000%
Capital 25.00000% 25.00000%
K Partner's share of liabilities:
Beginning Ending
Nonrecourse \$ \$
Qualified nonrecourse financing \$ \$
Recourse \$ 3,962.
Check this box if Item K includes liability amounts from lower tier partnerships.

L Partner's Capital Account Analysis

Beginning capital account \$ 47,496.
Capital contributed during the year \$
Current year net income (loss) \$ -4,069.
Other increase (decrease) (attach explanation) \$
Withdrawals & distributions \$ ()
Ending capital account \$ 43,427.

M Did the partner contribute property with a built-in gain or loss?
Yes No
If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)
Beginning \$
Ending \$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

Table with 3 columns: Item number, Description, and Amount. Includes items 1 through 22 such as Ordinary business income (loss), Net rental real estate income (loss), Other net rental income (loss), Guaranteed payments for services, etc.

For IRS Use Only
21 More than one activity for at-risk purposes*
22 More than one activity for passive activity purposes*
*See attached statement for additional information.

Additional information from your Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (SASIKALA MURALI)**Schedule K-1: Partner's Share of Income, Deductions, Credits, etc. (SASIKALA MURALI)****Supplemental Information****Continuation Statement**

Description	Amount
Item L. Partner's Capital Account Analysis:	
Beginning capital account now on Tax Basis	

Department of the Treasury
Internal Revenue Service

For calendar year 2020, or tax year beginning , 2020, and ending , 20 .

2020

▶ **ERO must obtain and retain completed Form 8879-PE.**
▶ **Go to www.irs.gov/Form8879PE for the latest information.**

Name of partnership RNM EDUCATION LLC	Employer identification number 81-4984036
--	--

Part I Tax Return Information (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1	215,297.
2	Gross profit (Form 1065, line 3)	2	215,297.
3	Ordinary business income (loss) (Form 1065, line 22)	3	-16,276.
4	Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	4	
5	Other net rental income (loss) (Form 1065, Schedule K, line 3c)	5	

Part II Declaration and Signature Authorization of Partner or Member
(Be sure to get a copy of the partnership's return.)

Under penalties of perjury, I declare that I am a partner or member of the above partnership and that I have examined a copy of the partnership's 2020 electronic return of partnership income and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the partnership's electronic return of partnership income. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the partnership's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission and (b) the reason for any delay in processing the return. I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income.

Partner's or Member's PIN: check one box only

- I authorize _____ to enter my PIN

--	--	--	--	--

 as my signature

ERO firm name

Don't enter all zeros

on the partnership's 2020 electronically filed return of partnership income.
- As a partner or member of the partnership, I will enter my PIN as my signature on the partnership's 2020 electronically filed return of partnership income.

Partner's or member's signature ▶ _____
Title ▶ PARTNER Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

5	8	7	2	7	8	6	1	9	8	9
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Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return of partnership income for the partnership indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 3112**, IRS e-file Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ 08/06/2021

ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

199A Worksheet by Activity

2020

▶ Keep for your records

Partnership's name RNM EDUCATION LLC	Partnership's EIN 81-4984036
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Note: See 199A Summary for Special Allocation information

QuickZoom to 199A Summary ▶ _____

Aggregation Code: _____	Trade or Business: <u>1065, Line 22</u>
	EIN: <u>81-4984036</u>
	Is this activity a qualified trade/business? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Specified Service Trade or Business? <input type="checkbox"/> Yes <input type="checkbox"/> No

QBI or qualified PTP items subject to partner-specific determinations:

1 a Ordinary business income (loss) 1 a			
b Adjustments b			
c Adjusted ordinary business income (loss)		1 c	
2 a Rental income (loss) 2 a			
b Adjustments b			
c Adjusted rental income (loss)		2 c	
3 a Royalty income (loss) 3 a			
b Adjustments b			
c Adjusted royalty income (loss)		3 c	
4 a Section 1231 gain (loss) 4 a			
b Adjustments b			
c Adjusted section 1231 gain (loss)		4 c	
5 Other income (loss) 5			
6 a Section 179 deduction 6 a			
b Adjustments b			
c Adjusted section 179 deduction		6 c	
7 Other deductions 7			
8 a W-2 wages 8 a			
b Adjustments b			
c Adjusted W-2 Wages		8 c	
9 a UBIA of qualified property 9 a			
b Adjustments b			
c Adjusted UBIA of qualified property		9 c	

Section 179 Carryover Detail for this Activity

Tentative Section 179 deduction from current year assets

Part I: Prior Year Carryovers

by Year and Category

- A** Before 2018
- B** 2018
- C** 2019
- Total prior year carryovers to this year**

Section 179 Regular Tax	Section 179 QBI
	0.

**Part II: 179 Deduction Allowed
by Year and Category**

- Total 179 deduction allowed for this activity in current year**
- A** Amount allowed from 2020
- B** Amount allowed from before 2018
- C** Amount allowed from 2018
- D** Amount allowed from 2019

Section 179 Regular Tax	Section 179 QBI

**Part III: Total Carryforward to 2021
by Year and Category**

- A** Carryforward from 2020
- B** Carryforward from before 2018
- C** Carryforward from 2018
- D** Carryforward from 2019
- Total carryforward to next year**

Section 179 Regular Tax	Section 179 QBI

Additional information from your 2020 Federal Partnership Tax Return

Form 1065: Partnership Tax Return

Line 1a

Itemization Statement

Description	Amount
Food Program Reimbursement	56,291.
Sales	137,106.
SBA LOAN	21,900.
Total	215,297.

Form 1065: Partnership Tax Return

Line 11

Itemization Statement

Description	Amount
REPAIRS AND MAINTENANCE	14,523.
VEHICLE REPAIRS AND MAINTENANCE	
Total	14,523.

Form 1065: Partnership Tax Return

Line 20, Other Deductions

Continuation Statement

Description	Amount
ADVERTISING	15.
AUTOMOBILE AND TRUCK EXPENSE	113.
BANK CHARGES	936.
COMPUTER SERVICES AND SUPPLIES	1,209.
INSURANCE	2,170.
MISCELLANEOUS	104.
SECURITY	579.
SUPPLIES	534.
TELEPHONE	80.
TRAVEL	209.
UTILITIES	16,875.
FOOD PROGRAM SUPPLIES	17,008.
PROFESSIONAL FEES	1,960.
PAYROLL FEES	2,121.
Total	43,913.

Texas Franchise Tax Ownership Information Report

To be filed by Entities other than Corporations, Limited Liability Companies, Limited Partnerships,
Professional Associations or Financial Institutions

Ver. 12.0

■ Tcode 13197

■ Taxpayer number

■ Report year

8	1	4	9	8	4	0	3	6		
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2	0	2	1
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You have certain rights under Chapter 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at 1-800-252-1381.

Taxpayer name RNM EDUCATION LLC		<input checked="" type="checkbox"/> Blacken circle if the mailing address has changed.	
Mailing address 18200 S PARK VIEW DR		Country	Secretary of State (SOS) file number or Comptroller file number
City Houston	State TX	ZIP code plus 4 77084	0814984036

SECTION A. Enter the information required for each general partner of a partnership or each trustee of a trust. Also, provide the information for each person or entity that owns an interest of 10 percent or more in this entity.

Name VENKATA KASIREDDY	What type of owner? (Blacken only one)	GENERAL PARTNER <input checked="" type="checkbox"/>	LIMITED PARTNER <input type="checkbox"/>	OTHER <input type="checkbox"/>
Mailing address 3401 RADHA LANE	FEI number	Percentage of ownership 25.00		
City Houston	State TX	ZIP code plus 4 77018		

Name SUDHA BYREDDY	What type of owner? (Blacken only one)	GENERAL PARTNER <input checked="" type="checkbox"/>	LIMITED PARTNER <input type="checkbox"/>	OTHER <input type="checkbox"/>
Mailing address 3401 RADHA LANE	FEI number	Percentage of ownership 25.00		
City Houston	State TX	ZIP code plus 4 77018		

Name MURALI PADMANABHAN	What type of owner? (Blacken only one)	GENERAL PARTNER <input checked="" type="checkbox"/>	LIMITED PARTNER <input type="checkbox"/>	OTHER <input type="checkbox"/>
Mailing address 1115 OXFORD MILLS LN	FEI number	Percentage of ownership 25.00		
City Sugar Land	State TX	ZIP code plus 4 77479		

SECTION B. Enter the information required for each entity, if any, in which this partnership, association, trust or other entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation or entity	State of formation	FEI number	Percentage of ownership
Name of owned (subsidiary) corporation or entity	State of formation	FEI number	Percentage of ownership

Registered agent and office, or agent for service of process (see instructions if you need to make changes)			
Agent:			
Office:	City	State	ZIP code plus 4

The above information is authorized by Section 171.201(a)(2), Section 171.201(a)(3), 171.202(a)(4) and 171.354 for each entity.
Use additional forms (05-167) for Sections A and B as necessary.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below.			
sign here VENKATA KASIREDDY	Title General Partne	Date	Area code and phone number (713) 298-6353

Mail original to:
Texas Comptroller of Public Accounts
P.O. Box 149348
Austin, TX 78714-9348

Texas Comptroller Official Use Only



VE/DE	<input type="checkbox"/>	
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Texas Franchise Tax Ownership Information Report

To be filed by Entities other than Corporations, Limited Liability Companies, Limited Partnerships,
Professional Associations or Financial Institutions

Ver. 12.0

■ Tcode 13197

■ Taxpayer number

■ Report year

8	1	4	9	8	4	0	3	6		
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2	0	2	1
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You have certain rights under Chapter 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at 1-800-252-1381.

Taxpayer name RNM EDUCATION LLC		Country		Secretary of State (SOS) file number or Comptroller file number	
Mailing address 18200 S PARK VIEW DR					
City Houston	State TX	ZIP code plus 4 77084	0814984036		

■ Blacken circle if the mailing address has changed.

SECTION A. Enter the information required for each general partner of a partnership or each trustee of a trust. Also, provide the information for each person or entity that owns an interest of 10 percent or more in this entity.

Name SASIKALA MURALI	What type of owner? (Blacken only one)	GENERAL PARTNER <input checked="" type="radio"/>	LIMITED PARTNER <input type="radio"/>	OTHER <input type="radio"/>
Mailing address 1115 OXFORD MILLS LN	FEI number	Percentage of ownership 25.00		
City Sugar Land	State TX	ZIP code plus 4 77479		

Name	What type of owner? (Blacken only one)	GENERAL PARTNER <input type="radio"/>	LIMITED PARTNER <input type="radio"/>	OTHER <input type="radio"/>
Mailing address	FEI number	Percentage of ownership		
City	State	ZIP code plus 4		

Name	What type of owner? (Blacken only one)	GENERAL PARTNER <input type="radio"/>	LIMITED PARTNER <input type="radio"/>	OTHER <input type="radio"/>
Mailing address	FEI number	Percentage of ownership		
City	State	ZIP code plus 4		

SECTION B. Enter the information required for each entity, if any, in which this partnership, association, trust or other entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation or entity	State of formation	FEI number	Percentage of ownership
Name of owned (subsidiary) corporation or entity	State of formation	FEI number	Percentage of ownership

Registered agent and office, or agent for service of process (see instructions if you need to make changes)			
Agent:			
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P.O. Box 149348
Austin, TX 78714-9348

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VE/DE	<input type="radio"/>	
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