E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

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

Filing Status Check only one box.	If yo	Single X Married filing jointly Cubecked the MFS box, enter the nonis a child but not your dependent	ame of y	. , , ,	, —		` ′	_	, ,	. , . ,		
Your first name and middle initial				Last name						Your social security number		
ARAVIND BABU				KAMINENI					788-47-1422			
If joint return, s	pouse's	first name and middle initial	Last na	me				Spous	Spouse's social security number			
GOWTHAM:	Ι		CHITTURI					971	971-96-7374			
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	Presid	Presidential Election Campaign			
22250 F	TUUC	AIN LAKES BLVD					201		k here if you			
City, town, or post office. If you have a foreign address, also com				nplete spaces below. State ZIF			code .		9.	intly, want \$3		
ESTERO				FL			22000		to go to this fund. Checking a box below will not change			
Foreign country name				Foreign province/state/county Foreign province/state/county				e your t	tax or refund	d. Spouse		
At any time du	ring 20	020, did you receive, sell, send, excl	nange, o	or otherwise acquire	any financial	interest in	n any virtual o	currency	? Yes	⊠ No		
Standard Deduction	_	eone can claim:	•		'	dent						
Age/Blindness	You:	☐ Were born before January 2, 1	956	Are blind Spo	use: 🗌 Wa	s born b	efore January	, 2, 1956	S ☐ Is b	olind		
Dependents	s (see	instructions):		(2) Social security	(3) Rela	tionship	(4) <b>1</b> if	qualifies	for (see instr	ructions):		
If more		) First name Last name number to you Child tax credit								other dependents		
than four												
dependents, see instruction												
and check												
here ▶ □												
Attach Sch. B if required.	_1_	Wages, salaries, tips, etc. Attach F	orm(s) \	N-2					1	76,923.		
	2a	Tax-exempt interest	Tax-exempt interest 2a b Taxable interest							1.		
	3a	Qualified dividends	b Ordinary dividends						3b			
	4a	IRA distributions	b Taxable amount				. 4	4b				
	5a	Pensions and annuities	5a		<b>b</b> Taxable ar	mount .			5b			
Standard Deduction for— Single or Married filing separately, \$12,400	6a	Social security benefits	6a		<b>b</b> Taxable ar	mount .		. 6	6b			
	7	Capital gain or (loss). Attach Sche	dule D if	required. If not requ	ired, check h	ere .	•		7	-3,000.		
	8	Other income from Schedule 1, lin	e9						8	-7,137.		
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your <b>total inco</b>	me			<b></b>	9	66,787.		
Married filing jointly or Qualifying widow(er), \$24,800  Head of household, \$18,650  If you checked any box under Standard Deduction, see instructions.	10	Adjustments to income:										
	а	From Schedule 1, line 22				10a						
	b	Charitable contributions if you take	the stan	dard deduction. See	instructions	10b	3	00.				
	С	Add lines 10a and 10b. These are	your <b>tot</b>	al adjustments to ir	ncome .			▶ 1	0с	300.		
	11	Subtract line 10c from line 9. This	is your a	adjusted gross inco	me			<b>•</b>	11	66,487.		
	12	Standard deduction or itemized	deducti	ions (from Schedule	A)				12	24,800.		
	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A										
	14	Add lines 12 and 13							14	24,800.		
	15	Taxable income. Subtract line 14	from lin	e 11. If zero or less,	enter -0				15	41,687.		

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

Form **1040** (2020)

Form 1040 (2020	)			Page <b>2</b>							
	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🔲 4972 3 🔲	16	4,606.							
	17	Amount from Schedule 2, line 3	17								
	18	Add lines 16 and 17	18	4,606.							
	19	Child tax credit or credit for other dependents	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	4,606.							
	23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	0.							
	24	Add lines 22 and 23. This is your total tax	24	4,606.							
	25	Federal income tax withheld from:									
	а	Form(s) W-2	$\dashv$								
	b	Form(s) 1099									
	C	Other forms (see instructions)		4 020							
	d	Add lines 25a through 25c	25d	4,032.							
• If you have a	26	2020 estimated tax payments and amount applied from 2019 return	26								
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)									
If you have nontaxable	28	Additional child tax credit. Attach Schedule 8812									
combat pay,	29	American opportunity credit from Form 8863, line 8	4								
see instructions.	30	Recovery rebate credit. See instructions	-								
	31	Amount from Schedule 3, line 13									
	32 33	/ taa miss 2. amsagn s n misse ans year total s miss payments and total s n misse and in the same and total s n misse and in the same and total s n misse and total s		4 022							
	34	that miles are, and are year to the party makes a second and the party makes are a second and the p	33	4,032.							
Refund		If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b> Amount of line 34 you want <b>refunded to you.</b> If Form 8888 is attached, check here	. —								
Direct deposit?	35a ▶ b	Routing number   X   X   X   X   X   X   X   X   X									
See instructions.	►d	Account number X X X X X X X X X X X X X X X X X X X	'								
	36	Amount of line 34 you want applied to your 2021 estimated tax <b>\Delta</b> 36									
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe now</b>	37	574.							
You Owe	0,	Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for									
For details on		2020. See Schedule 3, line 12e, and its instructions for details.									
how to pay, see instructions.	38	Estimated tax penalty (see instructions)									
Third Party	Do	you want to allow another person to discuss this return with the IRS? See									
Designee	ins	instructions									
		signee's Phone Personal iden									
		ne ► no, ► number (PIN)									
Sign Here		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and t ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic									
				nt you an Identity							
	۱.۵.	Pro	Protection PIN, enter it here								
Joint return?	<b>—</b>	Modebol i bevelot en	(see inst.) ▶								
See instructions. Keep a copy for	Sp		If the IRS sent your spouse an Identity Protection PIN, enter it here								
your records.			e inst.) 🖊	ection in the left it here							
	Ph	one no. Email address									
Paid	Pre	parer's name Preparer's signature Date PTIN		Check if:							
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/26/2021 P0208	82703	Self-employed							
Preparer	Fin		Phone no. (678)965-9522								
Use Only	Fire		Firm's EIN ► 30-1017196								
Go to www.irs.go	v/Forn	a1040 for instructions and the latest information.  BAA REV 02/21/21 PRO		Form <b>1040</b> (2020)							