LE 1040	-NR U.S. Nonresident A	ernal Revenue Service	Return (99)	2020	OMB No. 154		RS Use Only-Do not write or staple in this space.				
Filing Status	X Single Married filing separa	ately (MFS)(formerly Marr	ied) 🗌 Qualit	ying widow	(er) (QW)						
Check only one box.	If you checked the QW box, enter the child's name if the qualifying person is a child but not your dependent										
Your first name a	nd middle initial	Last name	Last name Your ide (see inst								
SAIBABU		POLAMPALLI				178-6	7-2278				
Home address (r	number and street or rural route). If you	have a P.O. box, see instr	uctions.	1	Apt. no.	Check if:	x Individual				
206 GRAY ST	REET			2	113		Estate or Trust				
City, town, or post	office. If you have a foreign address, also cor	mplete spaces below.	te spaces below. State ZIP code								
HOUSTON			тх	77002							
Foreign country r	name	Foreign province/state/co	ounty	Foreign p	oostal code						

Yes No

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?

Dependents						(4) Che	ck if qua	lifies for (see instr.):
(see instructions)	:	(1) First name	Last name	(2) Dependent's identifying number	(3) Dependent's relationship to you	Child tax	credit	Credit for other dependents
16 JI 6								
If more than four dependents, see								
instructions and								
check here 🕨]							
Income	1 a	Wages, salaries, tips, etc.	Attach Form(s) W-2	2			1a	
Effectively	b	Scholarship and fellowship	grants. Attach Forr	n(s) 1042-S or required s	statement. See instruction	s	1b	
Connected	С	Total income exempt by	a treaty from Scl	nedule OI (Form 1040-N	IR), Item			
With U.S.		L, line 1(e)			1c			
Trade or	2a	Tax-exempt interest	2a	b Tax	able interest		2b	
Business	3a	Qualified dividends	3a	b Orc	linary dividends		3b	
	4a	IRA distributions	4a	b Tax	able amount		4b	
	5a	Pensions and annuities .	5a	b Tax	able amount		5b	
	6	Reserved for future use					6	
	7	Capital gain or (loss). Atta	7					
	8	Other income from Schedu	8	90,300				
	9	Add lines 1a, 1b, 2b, 3b, 4	9	90,300				
	10	Adjustments to income:						
	а	From Schedule 1 (Form 1)	040), line 22		10a			
	b	Charitable contributions fo	r certain residents o	f India. See instructions	10b			
	с	Scholarship and fellowship	o grants excluded		10c			
	d	Add lines 10a through 10a	c. These are your to	otal adjustments to inco	ome	►	10d	0
	11	Subtract line 10d from line	►	11	90,300			
	12	Itemized deductions (fro	m Schedule A (Fori	n 1040-NR)) or, for certa	in residents of India, sta	ndard		
		deduction. See instructions					12	0
	13a	Qualified business income	e deduction. Attach F	orm 8995 or Form 8995-	A 13a	18,060		
	b	Exemptions for estates an	d trusts only. See in	structions	13b			
	С	Add lines 13a and 13b .					13c	18,060
	14	Add lines 12 and 13c					14	18,060
	15	Taxable income. Subtrac	t line 14 from line 1	1. If zero or less, enter -)		15	72,240
For Disclosure, EEA	Privac	y Act, and Paperwork Reduc	tion Act Notice, see s	separate instructions.			Fo	rm 1040-NR (2020)

Form 1040-NR (2020)	SAIBABU POLAMPALLI						178-67	7-2278				Page 2
	16	Tax (see instructions). Check if any fr	rom Fo	rm(s): 1 88	14 2	4972	2 3			16		1	1,680
	17	Amount from Schedule 2 (Form 1040),								17			
	18	Add lines 16 and 17								18		1	1,680
	19	Child tax credit or credit for other depe	endents							19			
	20	Amount from Schedule 3 (Form 1040),	, line 7							20			
	21	Add lines 19 and 20								21			
	22	Subtract line 21 from line 18. If zero or	r less, e	enter -0-						22		1	1,680
	23 a	Tax on income not effectively connectively	nected	with a U.S. tra	de or busi	ness							
		from Schedule NEC (Form 1040-NR),	line 15	5			23a						
	b	Other taxes, including self-employme	ent tax	, from Schedule	2 (Form 1)	040),							
		line 10					23b						
	С	Transportation tax (see instructions)				[23c						
	d	Add lines 23a through 23c								23d			
	24	Add lines 22 and 23d. This is your tot	tal tax			,			►	24		1	1,680
	25	Federal income tax withheld from:											
	а	Form(s) W-2					25a						
	b	Form(s) 1099					25b						
	С	Other forms (see instructions)					25c						
	d	Add lines 25a through 25c								25d			
	е	Form(s) 8805								25e			
	f	Form(s) 8288-A								25f			
	g	Form(s) 1042-S								25g			
	26	2020 estimated tax payments and amo	ount ap	plied from 2019	return	,				26			
	27	Reserved for future use					27						
	28	Additional child tax credit. Attach Sche	edule 88	812 (Form 1040)		28						
	29	Credit for amount paid with Form 1040	D-C				29						
	30	Reserved for future use					30						
	31	Amount from Schedule 3 (Form 1040),	, line 13	3		[31						
	32	Add lines 28 through 31. These are ye	our tot	al other payme	nts and rei	fundab	le cre	dits	►	32			0
	33	Add lines 25d, 25e, 25f, 25g, 26, and	32. Th	ese are your to	tal paymen	its			►	33			0
Refund	34	If line 33 is more than line 24, subtrac	ct line 2	24 from line 33.	This is the a	amount	you o	verpaid		34			
	35a	Amount of line 34 you want refunded	d to yo	u. If Form 8888	is attached	l, check	here.		. ► 🗌	35a			
Direct deposit?	► b	Routing number			► c Type	: 🗌	Check	ing 🗌	Savings				
See instructions.	►d	Account number											
	►e	If you want your refund check mailed	d to an	address outsid	e the United	d State	s not s	shown on	page 1,				
		enter it here.											
	36	Amount of line 34 you want applied t	to you	r 2021 estimate	ed tax	. ►	36						
Amount	37	Amount you owe. Subtract line 33 from	rom line	e 24. For details	on how to p	ay, see	instruc	tions .	►	37		1	1,863
You Owe	38	Estimated tax penalty (see instructions	s) .			. ►	38		183				
Third Party		ou want to allow another person (other	ner thar	n your paid pre	parer) to di	iscuss	this	_			_		
Designee	retum	with the IRS? See instructions			• • • • •	• • •	. ► [Yes. C	complete b	elow.	x	No	
(Other than	Desig	nee's		Phone				Perso	nal identifi	cation			
paid preparer)	name	>		no. 🕨				numb	er (PIN)	•			
Sign		penalties of perjury, I declare that I have ex											
Here	bellet,	they are true, correct, and complete. Declara	ation of	preparer (other tha	an taxpayer) i	s based	on all li	normation					•
	Your	signature		Date	Your occu	pation				IRS se ection P			
					IT					nst.) ►			
-	Phone	e no.		Email address					1,000	,			
Dela				signature			Date		PTIN		Check	k if:	
Paid	•	IRAN REDDY SAMA		-			02-1	8-2021	P02383	302			nployed
Preparer		name FaxtoRelax LLC					- <u>-</u> - T	2 2021	Phone n				. ,
Use Only		address > 16192 COASTAL HIC	GHWAN	z									
		LEWES, DE 19958							Firm's El	N Þ			

Go to www.irs.gov/Form1040NR for instructions and the latest information.

SCHEDULE	1
(Eorm 1040)	

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SCHEDULE 1 (Form 1040)		Additional Income and Adjustments to Incom	e		No. 1545-0074
	tment of the Treasury	► Attach to Form 1040, 1040-SR, or 1040-NR.		Attac	hment
	al Revenue Service e(s) shown on Fo	► Go to www.irs.gov/Form1040 for instructions and the latest information orm 1040,1040-SR, or 1040-NR	on. Your social		ence No. 01 rity number
SAI	BABU POLAMPAL		178	-67-2	2278
Pa	art I Additi	onal Income			
1	Taxable refund	ls, credits, or offsets of state and local income taxes		1	
2a	Alimony receiv	ed	[2a	
b	Date of origina	I divorce or separation agreement (see instructions)			
3	Business incor	ne or (loss). Attach Schedule C		3	90,300
4	Other gains or	(losses). Attach Form 4797		4	
5	Rental real est	ate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	=	5	
6	Farm income of	r (loss). Attach Schedule F		6	
7	Unemploymen	t compensation		7	
8	Other income.	List type and amount .►			
•				8	
9		1 through 8. Enter here and on Form 1040,1040-SR, or 1040-NR		9	90,300
Pa		tments to Income			
10	Educator expe			10	
11	Certain busine	ss 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 expense	ses for members of the Armed Forces. Attach Form 3903	[_	13	
14	Deductible par	t 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 ear	ly withdrawal of savings	[/	17	
18a	Alimony paid		<u>1</u>	8a	
b	Recipient's SS	N			
с	Date of origina	I divorce or separation agreement (see instructions) ►			
19	IRA deduction		· · · · ·	19	
20	Student loan ir	terest deduction		20	

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 For Paperwork Reduction Act Notice, see your tax return instructions.

Tuition and fees deduction. Attach Form 8917

Schedule 1 (Form 1040) 2020

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SCHEDULE OI (Form 1040-NR)

Other Information

► Go to www.irs.gov/Form1040NR for instructions and the latest information.

OMB No. 1545-0074
2020
Attachment Sequence No. 7C

Departme Internal R	ent of the Treasury evenue Service (99)						Attachment	-
Name sl	nown on Form 1040-NR			swer an questions.	Y	our identify		
SAIBA	BU POLAMPALLI					178-67-2	2278	
Α		ountries were	e you a citizen or national dur	ing the tax year? CAN			-	
в	In what country did y	ou claim res	idence for tax purposes during	g the tax year? CANAL	A			
С	Have you ever applie	ed to be a gr	een card holder (lawful perma	anent resident) of the Un	ited States?		. Yes	X No
Image allow on States Image allow States Image allow States </td <td></td>								
								x No
2.	A green card holder	(lawful perm	anent resident) of the United	States?			. 🗌 Yes	X No
	•	., .,						
Е		-		type. If you did not have	e a visa, enter your U.S.			
_					2			
F								<u>X</u> NO
	If you answered "Yes	s," Indicate ti	he date and nature of the cha	nge.►				
G	List all dates you ent	ered and left	the United States during 202	0. See instructions.				
	Note: If you are a re	sident of Ca	nada or Mexico AND commu	ute to work in the United	States at frequent interva	ıls,		
	check the box for C	Canada or N	lexico and skip to item H .	<u></u> <u></u>	🗴 Canada	Mexico		
	Date entered Unite	d States	Date departed United State	es Da	te entered United States	Date de	eparted United	d States
	mm/dd/yy		mm/dd/yy		mm/dd/yy		mm/dd/yy	
ы		(in aludia a u	antion nonworkdove and n		east in the United States	durin ar		
п	2018	(including v	2010	aniai uays) you were pre and 20		uunng.		
1	Did vou file a U.S. in	come tax ret	um for any prior year?	, and 202	_	· · · · · · · ·	Yes	x No
-								
J	Are you filing a return	n for a trust?					. Yes	X No
	U.S. person, or recei	ve a contribu	ition from a U.S. person?				. 🗌 Yes	No
κ	Did you receive total	compensatio	on of \$250,000 or more during	g the tax year?			. 🗌 Yes	X No
	-							No
L		-			6. income tax treaty with a	foreign cou	ntry,	
		. ,						
1.		-				-	enefit, and the	
	amount of exempt in						\	4
		(a) Cou	ntry	(b) Tax treaty article				
							o in cuncil la	луса
						1		
2.							=	
3.							. ∐ Yes	<u>x</u> No
		-	npetent Authority determination	on letter to your return.				
M 1	Check the applicable	er applied to be a green card holder (lawful permanent resident) of the United States?						
1.						-		
2								🗆
_ .								. ► 🗆

SCH	IEDULE	С

(Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2020	
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Depa	rtment of the Treasury			•		tructions and the latest inform			Attachment	
		Attach to	Form	1040, 1040-SR, 1040-NR, o	or 104	 partnerships generally mus 				
Nam	e of proprietor						So	cial se	curity number (SSN)
SAI	BABU POLAMPALLI								7-2278	
Α	Principal business or p	rofession, i	includ	ing product or service (see ir	nstruct	ions)	В	Enter c	ode from instructions	
С	Business name. If no se	eparate bu	usines	s name, leave blank.			D	Employ	er ID number (EIN) (see	e instr.)
FOR	M 1099 FROM KNS	•								
E				om no.) ► 206 GRAY S'	ਜਤਤਾ	Т АРТ 2113				
_	City, town or post office	-								
F	Accounting method:	(1) X			(3)	Other (specify) ►				
G	0					0? If "No," see instructions for limi	t on l	20000	X Yes	No
н	• • • • •	•			-					
I I				-		1099? See instructions				
	• • • •				• •					
J		ou nie requ	urear	-onn(s) 1099?	• • •		•••	<u>•••</u>	Yes	No
	Income	0		for the standard shares the base	· (1) · · -	·				
1	•					income was reported to you on	-			
-		• •	•			· · · · · · · · · · · · · · · · · · ·		1	10	07,100
2						•••••	_	2		0
3						•••••		3	1(07,100
4								4		
5								5	10	07,100
6	•			•		nd (see instructions)		6		
7						<u></u>	•	7	1(07,100
Pa	rt II Expenses. E	Enter exp	pens	es for business use of	your	home only on line 30.				
8	Advertising		8		18	Office expense (see instructions)	18		800
9	Car and truck expenses	(see			19	Pension and profit-sharing plans		19		
	instructions)	[9		20	Rent or lease (see instructions):				
10	Commissions and fees		10		а	Vehicles, machinery, and equipmen	t. 2	20a		8,000
11	Contract labor (see instru	uctions)	11		b	Other business property	. :	20b		
12	Depletion		12		21	Repairs and maintenance		21		
13	Depreciation and section	t t			22	Supplies (not included in Part II)	22		
	expense deduction (not				23	Taxes and licenses	· –	23		
	included in Part III) (see instructions)		13		24	Travel and meals:	-			
14	Employee benefit progra	t			-	Travel		24a		
••	(other than on line 19)		14			Deductible meals (see	• –			
15	Insurance (other than he	H	15	5,000	~	instructions)		24b		
16	Interest (see instructions	· · +	10	5,000	25	Utilities		25		3,000
	,	· ·	160							3,000
	Mortgage (paid to banks		16a		26	Wages (less employment credits	· –	26		
b		t	16b			Other expenses (from line 48) .		27a		
17	Legal and professional s		17			Reserved for future use		27b		
28	-					hrough 27a		28		16,800
29						· · · · · · · · · · · · · · · · · · ·	•	29		90,300
30	•	•		. Do not report these expens	es els	sewhere. Attach Form 8829				
	unless using the simplifie									
	-	•		ne total square footage of (a)	your		-			
	and (b) the part of your h					. Use the Simplifie	d			
				igure the amount to enter on	line 3	0	•	30		
31	Net profit or (loss). Sul				_					
				(Form 1040), line 3, and on			ן ן			
	checked the box on line	1, see ins	structio	ons). Estates and trusts, ente	er on	Form 1041, line 3.	►L	31		90,300
	• If a loss, you must g	o to line 32	2.			-	J			
32	If you have a loss, check	the box th	nat des	scribes your investment in thi	s activ	vity. See instructions.	-	_	_	
	• If you checked 32a, e	enter the lo	oss or	both Schedule 1 (Form 10	40), I	ine 3, and on Schedule	32	2a 🗌	All investment is	at risk.
	SE, line 2. (If you check	ed the box	x on li	ne 1, see the line 31 instruct	ions).	Estates and trusts, enter on	32	2b	Some investmer	nt is not
	Form 1041, line 3.								at risk.	
	• If you checked 32b,	you must	attac	h Form 6198. Your loss may	/ be li	mited.				

995

Qualified Business Income Deduction Simplified Computation

OMB No. 1545-2294

2020

► Attach to your tax return.

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

► Go to www.irs.gov/Form8995 for instructions and the latest information.

Sequence No. 55 Your taxpayer identification number

Attachment

178-67-2278

SAIBABU POLAMPALLI

Note. You can claim the qualified business income deduction only if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$163,300 (\$326,600 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number		ualified business come or (loss)
i	Schedule C: FORM 1099 FROM KNS IT GROUP INC			90,300
ii				
iii				
iv				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2 90,300		
3	Qualified business net (loss) carryforward from the prior year	3 ()	
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0	4 90,300	-	
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	18,060
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)			
	(see instructions)	6 0		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior			
	year	7 ()	
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero			
	or less, enter -0-	8 0		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	0
10	Qualified business income deduction before the income limitation. Add lines 5 and 9	1 1	10	18,060
11	Taxable income before qualified business income deduction	11 90,300		
12	Net capital gain (see instructions)	12 0	_	
13	Subtract line 12 from line 11. If zero or less, enter -0	13 90,300		10.000
14 15	Income limitation. Multiply line 13 by 20% (0.20)		14	18,060
15	the applicable line of your return		15	19 060
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter		15 16 (<u>18,060</u> 0)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater			0)
.,	zero, enter -0		17 (0)
For Pr	ivacy Act and Paperwork Reduction Act Notice, see instructions.			orm 8995 (2020)

EEA

Amount	from	Form	1040,	line	11	90,300
Amount	from	Form	1040,	line	12	0
				_		
Line 11	l abov	ze is	the d	iffere	nce between these amounts	90,300