	79	IRS e-file Signature Authorizati	on			
(Rev. August 20 Department of th Internal Revenue		OMB No. 1545-0074				
Submission	Identification Number (SI	ID)				
Taxpayer's nam				Social secu	-	
	AJ MATETI			030-8		
Spouse's name				Spouse's se	ocial sec	urity number
		ion — Tax Year Ending December 31,	(Enter	year you	are au	ithorizing.)
	dollars only on lines 1 th	•				
		only. Leave lines 1, 2, 3, and 5 blank.			1.4	80,089.
	0					
					2	10,679.
		rom Form(s) W-2 and Form(s) 1099			3	14,601.
	-	o you			4	4,785.
5 Amo	Taxpaver Declaration	n and Signature Authorization (Be sure you g	et and k	eep a co	5 by of v	vour return)
Agent to initia payment of m authorization payment, I m business days taxes to rece personal iden Electronic Fur	ate an ACH electronic funds by federal taxes owed on this is to remain in full force an nust contact the U.S. Treas s prior to the payment (settl vive confidential information	refund, and <b>(c)</b> the date of any refund. If applicable, I author withdrawal (direct debit) entry to the financial institution ac s return and/or a payment of estimated tax, and the financi and effect until I notify the U.S. Treasury Financial Agent to sury Financial Agent at <b>1-888-353-4537</b> . Payment cancel lement) date. I also authorize the financial institutions invol a necessary to answer inquiries and resolve issues related w is my signature for the income tax return (original or amo	count indic al institutio terminate lation requ ved in the d to the pa	cated in the n to debit th the authori ests must processing ayment. I fu n now autho	tax prep ne entry zation. <sup>-</sup> be recei of the el urther ac prizing a	paration software for to this account. This To revoke (cancel) a ived no later than 2 lectronic payment of cknowledge that the ind, if applicable, my
☐ sig ☐ I w if y bel Your signatu	ill enter my PIN as my sig ou are entering your owr ow. ure ►	<b>ERO firm name</b> c return (original or amended) I am now authorizing. gnature on the income tax return (original or amende n PIN <b>and</b> your return is filed using the Practitioner I	ed) I am no	ny PIN E	inter five lon't ente	as my e digits, but er all zeros
Spouse's P	nature on the income tax ill enter my PIN as my sig ou are entering your owr ow. ure ► IN: check one box only uthorize nature on the income tax ill enter my PIN as my sig	<b>ERO firm name</b> c return (original or amended) I am now authorizing. gnature on the income tax return (original or amende n PIN <b>and</b> your return is filed using the Practitioner I	ed) I am no PIN metho Date ► generate r	ny PIN E	inter five inter five zing. Cl O mus	as my e digits, but er all zeros heck this box only st complete Part III as my e digits, but er all zeros heck this box only
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Spouse's sig Part III ERO's EFIN I certify that t authorized to	nature on the income tax ill enter my PIN as my sig ou are entering your own ow. ure > IN: check one box only uthorize nature on the income tax ill enter my PIN as my sig ou are entering your own ow. gnature > I Certification and Aut I/PIN. Enter your six-digit the above numeric entry is r file for tax year indicated a of the Practitioner PIN meth	<b>FRO firm name</b> Treturn (original or amended) I am now authorizing. In PIN and your return is filed using the Practitioner I to enter or or to enter or the income tax return (original or amended) I am now authorizing. In PIN and your return is filed using the Practitioner I Treturn (original or amended) I am now authorizing. In PIN and your return is filed using the Practitioner I Treturn (original or amended) I am now authorizing. In PIN and your return is filed using the Practitioner I Treturn (original or amended) I am now authorizing. In PIN and your return is filed using the Practitioner I Tretutioner PIN Method Returns Only—continue thentication — Practitioner PIN Method Only It EFIN followed by your five-digit self-selected PIN. In PIN, which is my signature for the electronic individual above for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the taxpayer(s) indicated above. I confirm that I adove for the t	d) I am no PIN metho Date ► generate r d) I am no PIN metho Date ► te below 5 8 income ta am submi	ny PIN w authori: bd. The EF ny PIN E c w authori: bd. The EF 7 2 7 Don't er x return (ori tting this ref	inter five ion't enter zing. Cl CO mus inter five lon't enter zing. Cl CO mus RO mus RO mus a 6 inter all zo ginal or iturn in a	as my edigits, but er all zeros heck this box only st complete Part III as my edigits, but er all zeros heck this box only st complete Part III 1 9 8 9 eros amended) I am now accordance with the

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

REV 01/15/21 PRO

E1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) <b>urn</b>	202	20	OMB No. 1545	5-0074	IRS U	se Only	–Do not w	rite or staple	in this space.
Filing Status Check only one box.	lf yc	Single Married filing jointly ou checked the MFS box, enter the n son is a child but not your dependent	ame of	-			)  Head of ked the HOH c						
Your first name	and m	iddle initial	Last na	ime							Your so	cial securi	ty number
BHARADW	AJ		MATI	TI							030-	87-795	6
If joint return, spouse's first name and middle initial				ime							Spouse	s social se	curity number
Home address		er and street). If you have a P.O. box, see AVE	instruct	ons.					Apt. no. 706		Check I	nere if you,	
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete s	paces be	low.	Sta	ite	ZIP co					ntly, want \$3
DAYTON						OI	Н	454	106		Ŭ	ow will not	Checking a change
Foreign country	y name			Foreign p	rovince/state	/coun	ty	Foreig	gn postal	code	1	or refund	0
												You	Spouse
At any time du	uring 20	020, did you receive, sell, send, excl	nange, o	or otherv	vise acquire	any	financial intere	est in a	any virti	ual cu	irrency?	Yes	X No
Standard Deduction		eone can claim: D You as a de Spouse itemizes on a separate retur	•		•		a dependent						
Age/Blindness	s You	: 🗌 Were born before January 2, 1	956 [	Are b	lind <b>Sp</b>	ouse	: 🗌 Was bo	rn befo	ore Jan	uary 2	2, 1956	🗌 ls b	lind
Dependent		instructions): irst name Last name		(2)	Social securit number	у	(3) Relationsh to you	nip		✔ if q I tax c		r (see instru Credit for ot	uctions): ther dependents
lf more than four	(1)	Easthanie								loan			
dependents,													
see instruction and check	s —									$\overline{\Box}$			
here										$\overline{\Box}$			
	1	Wages, salaries, tips, etc. Attach F	Form(s)	W-2							. 1		<u> </u>
Attach	2a		2a			ьτ	axable interes	+		-	2b		
Sch. B if	3a	· ·	3a			<b>b</b> Ordinary dividend				3b	-		
required.	4a		4a			<ul> <li>b Taxable amount .</li> <li>b Taxable amount .</li> </ul>					. 4b		
	5a	Pensions and annuities	5a								. 5b		
Standard	6a	Social security benefits	6a			bТ	axable amoun	ıt			. 6b		
Deduction for –	7	Capital gain or (loss). Attach Sche	dule D i	f require	d. If not req	uired	, check here			▶ [	7		
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, lin	e9.								. 8		-8,967.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. <sup>-</sup>	This is yo	our total inc	ome					▶ 9		80,089.
Married filing	10	Adjustments to income:											
jointly or Qualifying	а	From Schedule 1, line 22					10	a					
widow(er), \$24,800	b	Charitable contributions if you take						b					
Head of	с	Add lines 10a and 10b. These are	your <b>to</b>	tal adjus	stments to	incoi	me				▶ 100	>	
household, \$18,650	11	Subtract line 10c from line 9. This	is your	adjuste	d gross inc	ome					▶ 11		80,089.
<ul> <li>If you checked</li> </ul>	12	Standard deduction or itemized									. 12		12,400.
any box under Standard	13	Qualified business income deduct	ion. Atta	ach Forn	n 8995 or Fo	orm 8	3995-A				. 13		
Deduction, see instructions.	14	Add lines 12 and 13									. 14		12,400.
	15	Taxable income. Subtract line 14	from lir	ne 11. lf :	zero or less	ente	er-0				. 15		67,689.
													10.10

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

Form **1040** (2020)

Form 1040 (2020	))									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3			16	10,679.
	17	Amount from Schedule 2, lin	ie3						17	
	18	Add lines 16 and 17							18	10,679.
	19	Child tax credit or credit for	other dependen	ts					19	
	20	Amount from Schedule 3, lin	ie7						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	10,679.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .				23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					. 1	▶ 24	10,679.
	25	Federal income tax withheld	from:							
	а	Form(s) W-2				25a	14	,601		
	b	Form(s) 1099				25b				
	с	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c							25d	14,601.
• If you have a	26	2020 estimated tax payment								
qualifying child,	27	Earned income credit (EIC)			No No	27				
attach Sch. EIC.	28	Additional child tax credit. A				28				
nontaxable	29	American opportunity credit	from Form 8863	8. line 8		29				
combat pay, see instructions.	30	Recovery rebate credit. See				30		863		
	31	Amount from Schedule 3, lin				31			-	
	32	Add lines 27 through 31. The					edits	. )	▶ 32	863.
	33	Add lines 25d, 26, and 32. T								15,464.
Defend	34	If line 33 is more than line 24							34	4,785.
Refund	35a	Amount of line 34 you want				•	-	▶□		4,785.
Direct deposit?	►b	Routing number 1 1 1					king 🗌			,
See instructions.	►d	Account number 4 8 8						3	-	
	36	Amount of line 34 you want a				1	T'			
Amount	37	Subtract line 33 from line 24						. •	37	
You Owe	07			-						
For details on		<b>Note:</b> Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.								
how to pay, see instructions.	38	Estimated tax penalty (see in	-			38				
Third Party		you want to allow another								
Designee		structions					<b>Yes.</b> C	omplet	e below.	× No
<b>J</b>	De	signee's		Phone			Pers	onal ide	ntification	
	nar	me 🕨		no. 🕨			num	ber (PIN	) 🕨	
Sign		der penalties of perjury, I declare t								
Here		lief, they are true, correct, and com				based on	all information			, ,
	Yo	ur signature		Date	Your occupation					nt you an Identity IN, enter it here
Joint return?					SOFTWARE	ENGTI	VEER		ee inst.)	
See instructions.	Sp	ouse's signature. If a joint return, <b>t</b>	ooth must sign.	Date	Spouse's occupa			lf	the IRS se	nt your spouse an
Keep a copy for	<b>·</b>		Ū							ection PIN, enter it here
your records.								(s	ee inst.) 🕨	
		one no.		Email address			,			1
Paid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:
Preparer	RV	SSMANIKUMARAPPANA	RVSSMANIK	UMARAPPAN	JA	01/	27/2021	P020	90332	Self-employed
Use Only	Firi	m's name 🕨 GLOBAL TAX	XES LLC					PI	none no. (	646)727-7157
	Firi	m's address 🕨 2530 Pebb	le Creek L	n Cumming	g GA 30041			Fi	rm's EIN 🕨	30-1017196
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV	01/15/21 PRO	)		Form <b>1040</b> (2020)

Go to *www.irs.gov/Form1040* for instructions and the latest information.

BAA

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

## Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR. - 1040 ND ► Go to www.irs.gov/Form1040 fo

040, 1040-SR, or 1040-NR.	
or instructions and the latest information.	

OMB No. 1545-0074
2020
Attachment Sequence No. <b>01</b>

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
BHARADWAJ MATETI	030-87-7956
Part I Additional Income	

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
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	-8,967.
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,		
Der		9	-8,967.
Par	t II Adjustments to Income		
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	
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 01/15/21 PRO	Schedule	e 1 (Form 1040) 2020

	ent of the Treasury Revenue Service (99)	► Go to www.irs.gov/ScheduleE f							Attac	hment ence No.	13	
-	shown on return		01 11100			latoot		Your soci				
,	ADWAJ MATETI							030-8		-		
Part		s From Rental Real Estate and Ro	valtie	s Note:	lf vou	are in th	ne business o				use	
T are		instructions. If you are an individual, rep	-		-			• •	•			
		nts in 2020 that would require you to									No	
		ou file required Form(s) 1099?								Yes [	No	
1a	Physical address of	each property (street, city, state, ZIF	· · ·	<u>، ، ،</u>					• 🗆		, 110	
A		ABAD TELANGANA IN 500049	0000	5)								
B												
1b	Type of Property	2 For each rental real estate pro	norty l	istad		Fair	Rental	Persona	Use			
	(from list below)	above, report the number of fa	ir rent	al and		[	Days	Day	S	QJV		
Α	1	personal use days. Check the if you meet the requirements to	QJV b o file a	ox only	Α		365		0			
B		qualified joint venture. See inst	tructio	ns.	B				•		1	
C				-	C						1	
	of Property:				-							
	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd		7 Self-	Rental					
-	ti-Family Residence	4 Commercial	6 Ro	yalties			er (describe	)				
Incom		Properties:			Α	0 0 0 0 0	1	3		С		
3	Rents received	· · · · · · · · · · ·	3			550.		-				
4			4									
Expen												
5			5									
6		nstructions)	6									
7	-	nance	7		2,	371.						
8			8			450.						
9			9									
10		essional fees	10									
11			11									
12	-	id to banks, etc. (see instructions)	12									
13			13									
14			14		3,	182.						
15			15			264.						
16			16									
17			17		1,	250.					-	
18		e or depletion	18									
19	Other (list) 🕨	·	19								-	
20		lines 5 through 19	20		9,	517.						
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If										
		instructions to find out if you must										
	( ).		21		-8,	967.						
22	Deductible rental real	l estate loss after limitation, if any,										
	on Form 8582 (see in	structions)	22	(	-8,9	67.)	(	)	(		)	
23a	Total of all amounts r	eported on line 3 for all rental prope	rties			23a		550.				
b	Total of all amounts r	eported on line 4 for all royalty prop	erties			23b						
С	Total of all amounts r	eported on line 12 for all properties				23c						
d	Total of all amounts r	eported on line 18 for all properties				23d						
е	Total of all amounts r	eported on line 20 for all properties				23e		9,517.				
24	Income. Add positiv	e amounts shown on line 21. <b>Do no</b>	t inclu	ude any l	osses			. 24				
25	Losses. Add royalty lo	sses from line 21 and rental real estate	losse	s from lin	e 22. E	nter tot	al losses hei	re. <b>25</b>	(	8,9	967.)	
26	Total rental real est	ate and royalty income or (loss).	Comb	ine lines	24 an	d 25. E	Enter the re	sult				
	here. If Parts II, III, I	V, and line 40 on page 2 do not	apply	to you,	also (	enter tl	nis amount	on				
	Schedule 1 (Form 104	40), line 5. Otherwise, include this a	mount	t in the to	otal on	line 41	on page 2	. 26		-8,	967.	

**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.

For Paperwork Reduction Act Notice, see the separate instructions.

SCHEDULE E

(Form 1040)

Schedule E (Form 1040) 2020

OMB No. 1545-0074

5

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