Form **1040** Department of the Treasury—Internal Revenue Service (99)
# U.S. Individual Income Tax Return 2020
OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

**Filing Status** Check only one box.
☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

| Your first name and middle initial | Last name | Your social security number |
|---|---|---|
| SANDEEP | SALLA | 879-91-5507 |
| If joint return, spouse's first name and middle initial | Last name | Spouse's social security number |
| | | |

| Home address (number and street). If you have a P.O. box, see instructions. | Apt. no. | |
|---|---|---|
| 10011 WAYFAIR MEADOW CT | | |

| City, town, or post office. If you have a foreign address, also complete spaces below. | State | ZIP code |
|---|---|---|
| CHARLOTTE | NC | 28277 |

| Foreign country name | Foreign province/state/county | Foreign postal code |
|---|---|---|
| | | |

**Presidential Election Campaign** Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? ☐ Yes ☒ No

**Standard Deduction** **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

**Age/Blindness** **You:** ☐ Were born before January 2, 1956 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1956 ☐ Is blind

**Dependents** (see instructions):
If more than four dependents, see instructions and check here ▶ ☐

| (1) First name Last name | (2) Social security number | (3) Relationship to you | (4) ✔ if qualifies for (see instructions): Child tax credit | Credit for other dependents |
|---|---|---|---|---|
| | | | ☐ | ☐ |
| | | | ☐ | ☐ |
| | | | ☐ | ☐ |
| | | | ☐ | ☐ |

Attach Sch. B if required.

Standard Deduction for—
- Single or Married filing separately, $12,400
- Married filing jointly or Qualifying widow(er), $24,800
- Head of household, $18,650
- If you checked any box under *Standard Deduction,* see instructions.

| | | | | | |
|---|---|---|---|---|---|
| 1 | Wages, salaries, tips, etc. Attach Form(s) W-2 | | | 1 | 95,997. |
| 2a | Tax-exempt interest | 2a | b Taxable interest | 2b | |
| 3a | Qualified dividends | 3a | b Ordinary dividends | 3b | |
| 4a | IRA distributions | 4a | b Taxable amount | 4b | |
| 5a | Pensions and annuities | 5a | b Taxable amount | 5b | |
| 6a | Social security benefits | 6a | b Taxable amount | 6b | |
| 7 | Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐ | | | 7 | |
| 8 | Other income from Schedule 1, line 9 | | | 8 | |
| 9 | Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income** ▶ | | | 9 | 95,997. |
| 10 | Adjustments to income: | | | | |
| a | From Schedule 1, line 22 | 10a | | | |
| b | Charitable contributions if you take the standard deduction. See instructions | 10b | | | |
| c | Add lines 10a and 10b. These are your **total adjustments to income** ▶ | | | 10c | |
| 11 | Subtract line 10c from line 9. This is your **adjusted gross income** ▶ | | | 11 | 95,997. |
| 12 | **Standard deduction or itemized deductions** (from Schedule A) | | | 12 | 20,281. |
| 13 | Qualified business income deduction. Attach Form 8995 or Form 8995-A | | | 13 | |
| 14 | Add lines 12 and 13 | | | 14 | 20,281. |
| 15 | **Taxable income.** Subtract line 14 from line 11. If zero or less, enter -0- | | | 15 | 75,716. |

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

| | | | | | |
|---|---|---|---|---|---|
| 16 | **Tax** (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐ | | | 16 | 12,450. |
| 17 | Amount from Schedule 2, line 3 | | | 17 | |
| 18 | Add lines 16 and 17 | | | 18 | 12,450. |
| 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 | 12,450. |
| 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 | 12,450. |
| 25 | Federal income tax withheld from: | | | | |
| a | Form(s) W-2 | 25a | 15,234. | | |
| b | Form(s) 1099 | 25b | | | |
| c | Other forms (see instructions) | 25c | | | |
| d | Add lines 25a through 25c | | | 25d | 15,234. |
| 26 | 2020 estimated tax payments and amount applied from 2019 return | | | 26 | |
| 27 | Earned income credit (EIC) No | 27 | | | |
| 28 | Additional child tax credit. Attach Schedule 8812 | 28 | | | |
| 29 | American opportunity credit from Form 8863, line 8 | 29 | | | |
| 30 | Recovery rebate credit. See instructions | 30 | 150. | | |
| 31 | Amount from Schedule 3, line 13 | 31 | | | |
| 32 | Add lines 27 through 31. These are your **total other payments and refundable credits** ▶ | | | 32 | 150. |
| 33 | Add lines 25d, 26, and 32. These are your **total payments** ▶ | | | 33 | 15,384. |

• If you have a qualifying child, attach Sch. EIC.
• If you have nontaxable combat pay, see instructions.

## Refund

| | | | |
|---|---|---|---|
| 34 | If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid** | 34 | 2,934. |
| 35a | Amount of line 34 you want **refunded to you.** If Form 8888 is attached, check here ▶ ☐ | 35a | 2,934. |
| ▶ b | Routing number 074000010 ▶ c Type: ☒ Checking ☐ Savings | | |
| ▶ d | Account number 7537775555 | | |
| 36 | Amount of line 34 you want **applied to your 2021 estimated tax** ▶ | 36 | |

Direct deposit? See instructions.

## Amount You Owe

For details on how to pay, see instructions.

| | | | |
|---|---|---|---|
| 37 | Subtract line 33 from line 24. This is the **amount you owe now** ▶ | 37 | |
| | **Note:** 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. | | |
| 38 | Estimated tax penalty (see instructions) ▶ | 38 | |

## Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ▶ ☐ **Yes.** Complete below. ☒ **No**

Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

## Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

| Your signature | Date | Your occupation | If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶ |
|---|---|---|---|
| | | SOFTWARE ENGINEER | |
| Spouse's signature. If a joint return, **both** must sign. | Date | Spouse's occupation | If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) ▶ |
| Phone no. | Email address | | |

## Paid Preparer Use Only

| Preparer's name | Preparer's signature | Date | PTIN | Check if: |
|---|---|---|---|---|
| SYAM PRIYA RAM SAGAR GUPTA TALLAM | SYAM PRIYA RAM SAGAR GUPTA TALLAM | 01/30/2021 | P02082703 | ☐ Self-employed |

Firm's name ▶ GLOBAL TAXES LLC — Phone no. (678)965-9522

Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 — Firm's EIN ▶ 30-1017196

**SCHEDULE A**
**(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

# Itemized Deductions

► Go to *www.irs.gov/ScheduleA* for instructions and the latest information.
► Attach to Form 1040 or 1040-SR.

**Caution:** If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074
2020
Attachment Sequence No. **07**

| Name(s) shown on Form 1040 or 1040-SR | Your social security number |
|---|---|
| SANDEEP SALLA | 879-91-5507 |

| | | | | | | |
|---|---|---|---|---|---|---|
| **Medical and Dental Expenses** | | **Caution:** Do not include expenses reimbursed or paid by others. | | | | |
| | 1 | Medical and dental expenses (see instructions) | 1 | | | |
| | 2 | Enter amount from Form 1040 or 1040-SR, line 11 [2] | | | | |
| | 3 | Multiply line 2 by 7.5% (0.075) | 3 | | | |
| | 4 | Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- | | | 4 | |
| **Taxes You Paid** | 5 | State and local taxes. | | | | |
| | a | State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box ► ☐ | 5a | 4,666. | | |
| | b | State and local real estate taxes (see instructions) | 5b | | | |
| | c | State and local personal property taxes | 5c | | | |
| | d | Add lines 5a through 5c | 5d | 4,666. | | |
| | e | Enter the smaller of line 5d or $10,000 ($5,000 if married filing separately) | 5e | 4,666. | | |
| | 6 | Other taxes. List type and amount ► | 6 | | | |
| | 7 | Add lines 5e and 6 | | | 7 | 4,666. |
| **Interest You Paid** Caution: Your mortgage interest deduction may be limited (see instructions). | 8 | Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box ► ☐ | | | | |
| | a | Home mortgage interest and points reported to you on Form 1098. See instructions if limited | 8a | 5,751. | | |
| | b | Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ► | 8b | | | |
| | c | Points not reported to you on Form 1098. See instructions for special rules | 8c | | | |
| | d | Mortgage insurance premiums (see instructions) | 8d | 9,864. | | |
| | e | Add lines 8a through 8d | 8e | 15,615. | | |
| | 9 | Investment interest. Attach Form 4952 if required. See instructions | 9 | | | |
| | 10 | Add lines 8e and 9 | | | 10 | 15,615. |
| **Gifts to Charity** Caution: If you made a gift and got a benefit for it, see instructions. | 11 | Gifts by cash or check. If you made any gift of $250 or more, see instructions | 11 | | | |
| | 12 | Other than by cash or check. If you made any gift of $250 or more, see instructions. You **must** attach Form 8283 if over $500 | 12 | | | |
| | 13 | Carryover from prior year | 13 | | | |
| | 14 | Add lines 11 through 13 | | | 14 | |
| **Casualty and Theft Losses** | 15 | Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions | | | 15 | |
| **Other Itemized Deductions** | 16 | Other—from list in instructions. List type and amount ► | | | 16 | |
| **Total Itemized Deductions** | 17 | Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12 | | | 17 | 20,281. |
| | 18 | If you elect to itemize deductions even though they are less than your standard deduction, check this box ► ☐ | | | | |

Form **1098** **Mortgage Interest Statement** **2020**

► Not a required statement - Use for import purposes
►Data will not transfer year to year if imported in prior year
► Keep for your records

| Name(s) Shown on Return | Your Social Security No. |
|---|---|
| SANDEEP SALLA | 879-91-5507 |

## Ownership

Owned by (check one):
[X] Taxpayer [ ] Spouse [ ] Joint

## Statement Information

RECIPIENT'S/LENDER'S Name
CORNERSTONE HOME LENDING INC.

Street address
PO Box 77404

| City | State | ZIP code |
|---|---|---|
| TRENTON | NJ | 08628-8668 |

Telephone number

| RECIPIENT'S federal identification number | PAYER'S social security number |
|---|---|
| 21-0534340 | 879-91-5507 |

PAYER'S/BORROWER'S name
SANDEEP SALLA

Street address
10011 WAYFAIR MEADOW CT

| City | State | ZIP code |
|---|---|---|
| CHARLOTTE | NC | 28277 |

**7** The address above is the same as the address of the property securing the mortgage . . . . [ ]
**(If not, enter the property address in box 8)**

**1** Mortgage interest received from payer(s) 863.

**2** Outstanding mortgage principal 434,518.00

**3** Mortgage origination date 12/03/2020

**4** Refund of overpaid interest

**5** Mortgage insurance premiums 9,863.56

**6** Points paid on purchase of principal residence 4,888.

**8** Address of the property securing this mortgage (if different than your mailing address shown)
Street address
10011 WAYFAIR MEADOW COURT

| City | State | ZIP code |
|---|---|---|
| CHARLOTTE | NC | 28277 |

**9** If the property securing the mortgage has no address, provide a description of the property below
01

Account number
0155694961

**10** Property tax

**11** Mortgage Acquisition Date

## Mortgage Use

**Note: For an office in home deduction, manually enter Form 1098 expenses on Form 8829.**

**1** Mortgage was used to finance (check one):
**a** [X] Main home **b** [ ] Second home **c** [ ] Business activity
**d** [ ] Rental activity **e** [ ] Farm activity **f** [ ] Farm rental activity
**g** [ ] Royalty activity **h** [ ] Other

**2** If mortgage used to finance a business, farm, rental activity, royalty activity, or farm rental, **double-click** to link to the activity . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .
**a** Schedule C, Business . . . . . . . . . . . . . . . . . . . . . . .
**b** Schedule F, Farm . . . . . . . . . . . . . . . . . . . . . . . . .
**c** Schedule E, Rental or Royalty . . . . . . . . . . . . . . . . . . .
**d** Form 4835, Farm Rental . . . . . . . . . . . . . . . . . . . . .

## Rental of Owner-Occupied or Vacation Home

**1** If mortgage was used to finance a rental activity, was the rental an owner-occupied or a vacation home? . . . . . . . . . . . . . . . . . . . . . . . [ ] Yes [ ] No [X] NA
**2** If yes, complete lines 2a and 2b:
**a** Mortgage interest qualifying for main or second home treatment . . . . . . . . . . . . . . . . .
**b** Mortgage interest **not** qualifying for main or second home treatment . . . . . . . . . . . . . . .

## Mortgage Insurance Premiums Information

**1** Did the home loan close after December 31, 2006? . . . . . . . . . . . . . . . . . . . . . [X] Yes [ ] No

# Recovery Rebate Credit Worksheet — 2020

Name(s) Shown on Return: SANDEEP SALLA | Social Security No.: 879-91-5507

**This worksheet is used to compute the allowed recovery rebate credit for line 30 of Form 1040 or 1040-SR after accounting for any economic stimulus payment previously received.**

**1** Can you be claimed as a dependent on another person's 2020 return?
- [X] **No.** Go to line 2
- [ ] **Yes. Stop**. You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on Form 1040, line 30.

**2** Does your 2020 return include a valid social security number for you, and if filing a joint return, your spouse?
- [X] **Yes.** Skip lines 3 and 4 and go to line 5.
- [ ] **No.** If you are filing a joint return, go to line 3. If you aren't filing a joint return, **Stop**. You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on line 30.

**3** Was at least one of you a member of the U.S. Armed Forces at any time during 2020, and does at least one of you have a valid social security number?
- [ ] **Yes.** Your credit is not limited. Go to line 5**.**
- [ ] **No.** Go to line 4.

**4** Does one of you have a valid social security number?
- [ ] **Yes.** Your credit is limited. Go to line 5.
- [ ] **No. Stop**. You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on Form 1040, line 30.

| | | | |
|---|---|---|---|
| **5** | Enter: ● $1,200 if single, head of household, married filing separately, qualifying widow(er), or if married filing jointly and you answered "Yes" to question 4, or ● $2,400 if married filing jointly and you answered "Yes" to question 2 or 3 | **5** | 1,200. |
| **6** | Multiply $500 by the number of qualifying children under age 17 at the end of 2020 listed in the Dependents section on page 1 of Form 1040 or 1040-SR for whom you either checked the "Child tax credit" box or entered an adoption taxpayer identification number | **6** | |
| **7** | Add lines 5 and 6 | **7** | 1,200. |
| **8** | Enter: ● $600 if single, head of household, married filing separately, qualifying widow(er), or if married filing jointly and you answered "Yes" to question 4, or ● $1,200 if married filing jointly and you answered "Yes" to question 2 or 3 | **8** | 600. |
| **9** | Multiply $600 by the number of qualifying children under age 17 at the end of 2020 listed in the Dependents section on page 1 of Form 1040 or 1040-SR for whom you either checked the "Child tax credit" box or entered an adoption taxpayer identification number | **9** | |
| **10** | Add lines 8 and 9 | **10** | 600. |
| **11** | Enter the amount from line 11 of Form 1040 or 1040-SR | **11** | 95,997. |
| **12** | Enter the amount shown below for your filing status: ● $150,000 if married filing jointly or qualifying widow(er) ● $112,500 if head of household ● $75,000 if single or married filing separately | **12** | 75,000. |
| **13** | Is the amount on line 11 more than the amount on line 12? [ ] **No.** Skip line 14. Enter the amount from line 7 on line 15 and the amount from line 10 on line 18. [X] **Yes.** Subtract line 12 from line 11. | **13** | 20,997. |
| **14** | Multiply line 13 by 5% (0.05) | **14** | 1,050. |
| **15** | Subtract line 14 from line 7. If zero or less, enter -0- | **15** | 150. |
| **16** | Enter the amount, if any, of the economic impact payment (EIP) 1 that was issued to you (before offset for any past-due child support payment). You may refer to Notice 1444 or your tax account information at IRS.gov/Account for the amount to enter here. | **16** | 0. |
| **17** | Subtract line 16 from line 15. If zero or less, enter -0-. If line 16 is more than line 15 you don't have to pay back the difference | **17** | 150. |
| **18** | Subtract line 14 from line 10. If zero or less, enter -0- | **18** | 0. |
| **19** | Enter the amount, if any, of EIP 2 that was issued to you. You may refer to Notice 1444-B or your tax account information at IRS.gov/Account for the amount to enter here. | **19** | 0. |
| **20** | Subtract line 19 from line 18. If zero or less, enter -0-. If line 19 is more than line 18 you don't have to pay back the difference | **20** | 0. |
| **21** | **Recovery rebate credit**. Add lines 17 and 20. Enter the result here and, if more than zero, on line 30 of Form 1040 or 1040-SR. | **21** | 150. |

# Smart Worksheets from your 2020 Federal Tax Return

SMART WORKSHEET FOR: Schedule A: Itemized Deductions

## State and Local Taxes Smart Worksheet

Enter sales tax information below. The greater of sales taxes from line **I** plus line **J,** or income taxes on line **K,** will flow to line 5. See Help.

| | | |
|---|---|---|
| **A** | Income from Form 1040, line 7 | 95,997. |
| **B** | Nontaxable income entered elsewhere on return | |
| **C** | Available income: 2019 refundable credits in excess of tax | 0. |
| **D** | **Enter** any additional nontaxable income | |
| **E** | Total available income for sales taxes | 95,997. |
| **F** | Sales tax table information: | |

Enter total (combined) state and local sales tax rate in column (d) for each state listed in column (a).
If AZ, CO, LA, MS, NY or SC column (a):
**QuickZoom** to Misc Global Options to enter default locality ►
**or** Double-click in column (d) to select your locality for each state entered.

| **(a)** ST | **(b)** Lived in State From | **(c)** Lived in State To | **(d)** **Enter** Total Tax Rate | **(e)** State Tax Rate (%) | **(f)** Local Tax Rate (%) | **(g)** State Table Amount | **(h)** Local Sales Taxes | **(i)** Prorated or Total Amount |
|---|---|---|---|---|---|---|---|---|
| NC | 01/01/20 | 12/31/20 | 4.7500 | 4.7500 | 0.0000 | 731. | 0. | 731. |

| | | | |
|---|---|---|---|
| | Total general sales taxes from table | 731. | |
| **H** | **Enter** additions to table amount (motor vehicle, boat) | | |
| **I** | Total sales taxes from table plus additions to table amount | | 731. |
| **J** | **Enter** actual sales taxes paid (in lieu of table amount) | | |
| **K** | Total income taxes paid | | 4,666. |

SMART WORKSHEET FOR: Schedule A: Itemized Deductions

## Mortgage Interest and Points Smart Worksheet

**A** Enter a description and an amount for fully deductible mortgage interest and points. Check the box if the mortgage was sold to another lender, or the mortgage has been paid off; the lender's name will **not** transfer to next year's return.
Check the box if the mortgage interest and/or points are **not** reported on Form 1098.
**Note:** When the points must be deducted over the life of the loan, enter this information on the Other Points Smart Worksheet.
If the interest deduction may be limited, enter all information on the Deductible Home Mortgage Interest Worksheet instead.
**QuickZoom** to Deductible Home Mortgage Interest Worksheet . . . . . . . . . . . . . . . . ►

| Lender's Name/Description | Deductible Mortgage Interest | Fully Deductible Points | Paid Off | **Not** on Form 1098 |
|---|---|---|---|---|
| | | | ☐ | ☐ |
| CORNERSTONE HOME LENDING INC. | 863. | 4,888. | ☐ | ☐ |

SMART WORKSHEET FOR: Schedule A: Itemized Deductions

**A** **Adjust Home mortgage interest and points reported on Form 1098:**

| | | |
|---|---|---|
| **1** | Total home mortgage interest and points from 1098's from detail. . . . . . . . . . . . . | 5,751. |
| **2** | Enter amount to deduct on Line 8a if different. . . . . . . . . . . . . . . . . . . . . . . . | |

SMART WORKSHEET FOR: Schedule A: Itemized Deductions

### Qualified Mortgage Insurance Premiums Smart Worksheet

| | | | |
|---|---|---|---|
| **A** | Qualified Mortgage Insurance Premiums | | |
| **1** | Principal Residence - Enter the premiums paid in 2019 for qualified mortgage insurance for a contract entered into after 2006 **not** from Form 1098 import | | |
| **2** | Qualified mortgage insurance premiums from Form 1098 import | | 9,864. |
| **3** | From office in the home | | |
| **4** | Qualified mortgage insurance premiums from Schedule E Worksheet | | |
| **5** | Total qualified mortgage insurance premiums | | 9,864. |
| **B** | Amount from Form 1040, line 7 | 95,997. | |
| **C** | $100,000 ($50,000 if married filing separately) | 100,000. | |
| **D** | Is the amount on Line B more than the amount on line C? | | |
| X | **No.** The deduction is not limited. The amount from line A above goes on Schedule A, line 8d. | | |
| ☐ | **Yes.** Line C subtracted from line B. If the result is not a multiple of $1,000 ($500 if married filing separately) it is increased to the next multiple of $1,000 ($500 if married filing separately) | | |
| **E** | Line D divided by $10,000 ($5,000 if married filing separately). The result is a decimal. If the result is 1.0 or more then 1.0. | | |
| **F** | Line A multiplied by line E | | |
| **G** | Qualified mortgage insurance premiums deduction. Line F subtracted from line A. The result goes on Schedule A, line 8d. | | |

SMART WORKSHEET FOR: Form 1098 (CORNERSTONE HOME LENDING INC.): Mortgage Interest Statement

### Home Mortgage Interest Limitation Smart Worksheet

| | | | | | |
|---|---|---|---|---|---|
| **A** | Is this the original loan used to purchase this home? | **Yes** | ☐ | **No** | ☐ |
| **B** | Is this a **home equity** loan or **refi**nance of a purchase loan? | **Home Equity** | ☐ | **Refi** | ☐ |
| | Was cash ever taken out as part of a refinance? | **Yes** | ☐ | **No** | ☐ |
| **C** | Were all loan proceeds used to purchase, build, or improve the home secured by this loan? *(see help if this loan is a refinance loan)* | **Yes** | ☐ | **No** | ☐ |
| | If no, amount used to purchase, build, or improve this home *(see help)* | | | | |
| **D** | Date loan was paid off, if paid off in 2020 | | | | |
| **E** | Outstanding mortgage principal as of 12/31/2020 (or pay-off date, if applicable) | | | | |
| | Check if only one 1098 | | ☐ | | |