E 1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) urn	20	20	OMB No. 1545	5-0074	IRS U	se Only	–Do not w	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	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	ame							Your so	cial securi	ty number
MITESHKU	JMAR	J	PAT	EL							859-	09-582	5
lf joint return, s	pouse's	s first name and middle initial	Last na	ame							Spouse	s social se	curity number
Home address 43432 No		er and street). If you have a P.O. box, see ND DR	instruct	ions.				ļ	Apt. no.		Check I	here if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP co	ode				ntly, want \$3
CANTON						M	I	481	88		Ŭ	ow will not	Checking a change
Foreign country	/ name			Foreign p	rovince/sta	te/coun	ity	Foreig	gn postal	code	1	k or refund	0
												You	Spouse
At any time du	ring 20	020, did you receive, sell, send, excl	nange,	or otherv	vise acqui	re any	financial intere	est in a	any virti	ual cu	irrency?	Yes	X No
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur	n or yo	u were a	dual-statu		a dependent						
Age/Blindness	S You:	Were born before January 2, 1	956	Are b	lind S	pouse	: 🗌 Was bo	rn befo				ls b	-
Dependents				(2) \$	Social secu	rity	(3) Relationsh	nip				r (see instru	
If more	(1) F	irst name Last name	number to you				Child tax credit			Credit for ot	ther dependents		
than four dependents,							L		<u> </u>		<u> </u>		
see instruction	s ——									<u> </u>		<u> </u>	
and check													
here 🕨 📃												<u> </u>	
Attach	1	Wages, salaries, tips, etc. Attach F	(`	W-2 .	· · ·					•	. 1		81,437.
Sch. B if	2a	•	2a		0.0.0		axable interes		• •	•	. 2b		
required.	<u>3a</u>		3a		229.		Ordinary divide			•	. 3b		488.
	4a		4a				Taxable amoun		• •	•	. 4b		
	5a		5a				b Taxable amount .		• •	·	. 5b		
Standard Deduction for –	6a	···· · · · · · · · · ·	6a	c			axable amoun	it	• •	· ·	. 6b		20 200
Single or	7	Capital gain or (loss). Attach Scher				•	·	• •	• •				32,380.
Married filing separately,	8	Other income from Schedule 1, lin Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,						• •	• •	•	. <u>8</u> ▶ 9		<u>-6,757.</u> 07,548.
\$12,400	9		anu o.	i nis is yc	our total II	icome	•	• •	• •	•	9		07,540.
 Married filing jointly or 	10	Adjustments to income:					10						
Qualifying widow(er),	a ⊾				· · ·						_		
\$24,800	b	Charitable contributions if you take Add lines 10a and 10b. These are						-			▶ 100		
 Head of household, 	C									-		_	07,548.
\$18,650 • If you checked	11 12	Subtract line 10c from line 9. This Standard deduction or itemized									▶ <u>11</u> . 12		12,400.
any box under	13	Qualified business income deduct				,	 8005-0						<u>12,400.</u> 9.
Standard Deduction,	13 14	Add lines 12 and 13											<u>9.</u> 12,409.
see instructions.	14	Taxable income. Subtract line 14											<u>12,409.</u> 95,139.
	15	Taxable Income. Subtract lille 14				s, ente				•	. 15		1010

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): 1 🗌 881	4 2	4972	3			16	16,864.
	17	Amount from Schedule 2, lin	ie3							17	
	18	Add lines 16 and 17								18	16,864.
	19	Child tax credit or credit for	other dependen	ts						19	
	20	Amount from Schedule 3, lin	ie7							20	7.
	21	Add lines 19 and 20								21	7.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0						22	16,857.
	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 total tax						. 🕨	24	16,857.
	25	Federal income tax withheld	from:								
	а	Form(s) W-2					25a	11	,811.		
	b	Form(s) 1099					25b				
	с	Other forms (see instructions	s)				25c				
	d	Add lines 25a through 25c								25d	11,811.
If you have a	26	2020 estimated tax payment								26	
qualifying child,	27	Earned income credit (EIC)					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			-	
	31	Amount from Schedule 3, lin					31				
	32	Add lines 27 through 31. The	ese are your tot a	al other paym	ents and	refunda	able cr	edits	. 🕨	32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					. 🕨	33	11,811.
Defend	34	If line 33 is more than line 24								34	
Refund	35a	Amount of line 34 you want	,				,	•		35a	
Direct deposit?	►b	Routing number X X X			► c Typ				Savings		
See instructions.	►d	Account number X X X							<u></u>		
	36	Amount of line 34 you want a					36	'			
Amount	37	Subtract line 33 from line 24							. ►	37	5,105.
You Owe	07										
For details on		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.									
how to pay, see instructions.	38	Estimated tax penalty (see in	-				38		59.		
Third Party		you want to allow another							57.		
Designee		structions						Yes. Co	mplete	below.	× No
200.g.100	De	signee's		Phone					nal ident		
		me 🕨		no. 🕨					er (PIN)		
Sign		der penalties of perjury, I declare t									
Here	bel	ief, they are true, correct, and com	plete. Declaration	of preparer (othe	r than taxpa	iyer) is ba	ased on	all informatic	n of whic	h prepar	er has any knowledge.
nere	Yo	ur signature		Date	Your occu	pation					nt you an Identity
laiat watum 0	N				NETWO	יס עס	JOTNI	ססק		e inst.) 🕨	IN, enter it here
Joint return? See instructions.	Sn	ouse's signature. If a joint return, i	ooth must sign	Date	Spouse's			5 E K		,	nt your spouse an
Keep a copy for	- Op		Jour must sign.	Date	opouse s	occupat					ection PIN, enter it here
your records.									(see	e inst.) 🕨	
	Ph	one no. (361)688-331	4	Email address	MHPAT	EL813	3@GM/	AIL.COM			
Daid	Pre	eparer's name	Preparer's signat	ure			Date		PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA T	'ALLAM	07/	07/2021	P0208	2703	Self-employed
Preparer	Fin	m's name ► GLOBAL TAX	XES LLC						Pho	ne no. (678)965-9522
Use Only	Fin	m's address 🕨 2530 Pebb	le Creek L	n Cumming	g GA 3	0041			Firm	n's EIN 🕨	30-1017196
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BA	A	REV	05/29/21 PRO			Form 1040 (2020)

BAA

SCHEDULE	E 1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074
2020
Attachment Sequence No. 01

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
MITESHKUMAR J PATEL	859-09-5825
Part I Additional Income	

Par	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	-6,800.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ► <u>Substitute Payment from 1099-Misc</u> 43.	8	43.
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	-6,757.
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 adjustments to income. 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 05/29/21 PRO	Schedul	e 1 (Form 1040) 2020

Additional Credits and Payments

OMB No. 1545-0074 20

20

► Attach to Form 1040, 1040-SR, or 1040-NR.

	Attach to Form 1040, 1040-SR, or 1040-NR. Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.					Attachment Sequence No. 03
	· /	m 1040, 1040-SR, or 1040-NR				security number
Pa	ESHKUMAR J H	undable Credits		859-0	09-5	325
Par						
1	Foreign tax c	redit. Attach Form 1116 if required		• •	1	7.
2	Credit for chi	Id and dependent care expenses. Attach Form 2441		• •	2	
3	Education cr	edits from Form 8863, line 19..........			3	
4	Retirement s	avings contributions credit. Attach Form 8880			4	
5	Residential e	nergy credits. Attach Form 5695			5	
6	Other credits	from Form: a 3800 b 8801 c			6	1
7	Add lines 1 tl	nrough 6. Enter here and on Form 1040, 1040-SR, or	1040-NR, lir	ne 20	7	7.
Par	t II Other P	ayments and Refundable Credits				
8	Net premium	tax credit. Attach Form 8962			8	
9	Amount paid		9			
10	Excess socia	I security and tier 1 RRTA tax withheld			10	
11	Credit for fea	leral tax on fuels. Attach Form 4136			11	
12	Other payme	nts or refundable credits:				
а	Form 2439		12a			
b	Qualified sic Form(s) 7202	k and family leave credits from Schedule(s) H and	12b			
С	Health cover	age tax credit from Form 8885	12c			
d	Other:		12d			
е	Deferral for c	ertain Schedule H or SE filers (see instructions) .	12e			
f	Add lines 12a	a through 12e			12f	
13	Add lines 8 th	nrough 12f. Enter here and on Form 1040, 1040-SR, o	r 1040-NR, I	ine 31	13	
For Pa	perwork Reductio	n Act Notice, see your tax return instructions. BAA	REV 05/29/21 PR	0	Schedu	ıle 3 (Form 1040) 2020

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/ScheduleD for instructions and the latest information.
 Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

2020 Attachment Sequence No. 12

Internal Revenue Service (99) Name(s) shown on return

Department of the Treasury

MITESHKUMAR J PATEL

Your social security number

859-09-5825

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	122,204.	89,404.	1	.72.	32,972.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	4,149.	5,002.			-853.
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	5.	11.			-6.
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5						
6						()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	0	()	, ,	7	32,113.

Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions)

lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked	267.	0.			267.
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		11			
12	Net long-term gain or (loss) from partnerships, S corporat	dule(s) K-1	12			
13	Capital gain distributions. See the instructions	13				
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a on the back	•			15	267.

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 32,380.
	• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 both gains? X Yes. Go to line 18.	
	No. Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. 	
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 ()
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.	
	No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 05/29/21 PRO

Schedule D (Form 1040) 2020

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

► Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2020 Attachment Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number					
MITESHKUMAR J PATEL	859-09-5825					

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
Robinhood Securities LLC	05/26/20	12/12/20	122,204.	89,404.	W	172.	32,972.	
2 Totals. Add the amounts in column: negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and inc is checked), lir	lude on your 1e 2 (if Box B	122,204.	89,404.		172.	32,972.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2020)	Attachment Sequence No. 12A	Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side MITESHKUMAR J PATEL

Social security number or taxpayer identification number 859-09-5825

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

- X (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). parate instructions. (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
Robinhood Securities LLC	05/26/20	12/12/20	267.	0.			267.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your 1e 9 (if Box E	267.	0.			267.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

► Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2020 Attachment Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number				
MITESHKUMAR J PATEL	859-09-5825				

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

X (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Example: 100 sh. XYZ Co.) (Mo., day, yr.) (Sales price) and see Column (e)	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)				
Robinhood Crypto LLC	03/12/20	04/06/20	1,828.	1,507.			321.	
XLM	01/08/20	12/25/20	685.	1,524.			-839.	
XRP	01/01/20	12/26/20	1,636.	1,971.			-335.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your ne 2 (if Box B	4,149.	5,002.			-853.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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

Form	8949	
Form	0343	

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

(0)**2**(0)

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form8949 for instructions and the latest information.

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Attachment Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number
MITESHKUMAR J PATEL	859-09-5825

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

X (C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) (c) Date acquired	Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(g), (h) Gain or (loss).	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) and see Column (e,	in the separate	(f) Code(s) from instructions	(g) Amount of adjustment				
Robinhood Securities LLC	05/26/20	12/12/20	5.	11.			-б.			
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your 1e 2 (if Box B	5.	11.			-6.			

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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

SCHEDULE E	
(Form 1040)	

Department of the Treasury

Internal Revenue Service (99)

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

► Attach to For ► Go to www.irs.gov/Sche

rm 1040, 1040-SR, 1040-NR, or 1041.
duleE for instructions and the latest information.

20 20 Attachment Sequence No. 13

Name(s)	shown on return							Your soci	al security	y number	
MITE	SHKUMAR J PATEL							859-0	9-582	5	
Part	Income or Loss	s From Rental Real Estate and Ro	yalties	Note: If	you ar	re in th	e business of re	enting pe	rsonal pr	operty, use	е
	Schedule C. See	instructions. If you are an individual, rep	ort farm i	ental inco	ome or	loss fr	om Form 4835	on page	2, line 4	0.	
A Dic	l vou make anv pavme	nts in 2020 that would require you to	o file For	m(s) 109	9? Se	e instr	uctions		. 🗆 Y	/es 🛛 N	ю
		ou file required Form(s) 1099?									
1a	Physical address of e	each property (street, city, state, ZIF	P code)		· ·	· ·			· ـ_ ·		
A		SHAHPUR GANDHINAGAR GU			2355						
B		STATE OF GANDITINAGAN GOU	UAILAI	IN 50.	2333						
C											
 1b	Type of Property	2 F a a a b a a b a b a b a b a b a b a b a b b b b b b b b b b		l		Eair	Rental P	Persona			
ID.	(from list below)	2 For each rental real estate pro above, report the number of fa	ir rontal	and			ays	Days		QJV	
•	, ,	personal use days. Check the if you meet the requirements to	QJV box	only			-	Duy			
<u>A</u>	3	gualified joint venture. See inst	o file as a tructions				365		0		
B			liuctions		B					<u> </u>	
_ C					C						
	of Property:				_						
-	le Family Residence	3 Vacation/Short-Term Rental					Rental				
	ti-Family Residence	4 Commercial	6 Roya			Othe	r (describe)				
Incom	-	Properties:			Α		В			С	
3			3		6	50.					
4	Royalties received .		4								
Expen											
5	Advertising		5								
6	Auto and travel (see in	nstructions)	6								
7	Cleaning and mainter	nance	7		1,6	50.					
8	Commissions		8								
9	Insurance		9								
10		essional fees	10								
11			11		1,5	50.					
12	-	id to banks, etc. (see instructions)	12								
13			13								
14			14		1,2	50					
15	•		15		1,3						
16			16		- / 0						
17			17		1,7	00					
18		e or depletion	18		±, ′	00.					
19		•	19								
20	` '	lines 5 through 19	20		7,4	50					
	-	-			/, =	50.					
21		line 3 (rents) and/or 4 (royalties). If									
		instructions to find out if you must	21		-6,8	00					
00					0,0	50.					
22		l estate loss after limitation, if any,			6 00		(ν.	(`
02-	on Form 8582 (see in	eported on line 3 for all rental prope	22 (0.)	(650.	()
23a						23a		650.			
b		eported on line 4 for all royalty prop				23b					
C		eported on line 12 for all properties				23c					
d		eported on line 18 for all properties				23d		450			
е		eported on line 20 for all properties				23e	7,	,450.			
24		e amounts shown on line 21. Do no				•••		24			
25	Losses. Add royalty lo	osses from line 21 and rental real estate	e losses f	rom line 2	22. Ent	ter tota	I losses here .	25	(6,800).)
26		ate and royalty income or (loss).									
		V, and line 40 on page 2 do not									
	Schedule 1 (Form 104	40), line 5. Otherwise, include this a	mount ir	the tota	al on li	ne 41	on page 2 .	26		-6,80)0.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2020

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Department of the Treasury Internal Revenue Service

Go to	wanna ire	s.aov/Form	9005 for	instruction	ne and the	latest inf	ormation
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5.407/F0///	0330 101	IIISUUCUO	ns anu uie	Idlest IIII	unnauun.

OMB No. 1545-2294
2020
Attachment
Sequence No. 55

 Internal Revenue Service
 Go to www.irs.gov/Form8995 for instru

 Name(s) shown on return
 Shown on return

Your taxpayer identification number

MITESHKUMAR J PATEL

859-09-5825

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	gregation name (b) Taxpayer identification number				
i						
ii						
iii						
iv						
IV						
v						
2	Total qualified business income or (loss). Combine lines 1i through 1v,					
	column (c)	2				
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				
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5			
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)					
	(see instructions)	6 45.				
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 ()				
8	Total gualified REIT dividends and PTP income. Combine lines 6 and 7. If zero					
0	or less, enter -0	8 45.				
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	9.		
10	Qualified business income deduction before the income limitation. Add lines 5 an	d9	10	9.		
11	Taxable income before qualified business income deduction	11 95,148.				
12	Net capital gain (see instructions)	12 496.				
13	Subtract line 12 from line 11. If zero or less, enter -0	13 94,652.				
14	Income limitation. Multiply line 13 by 20% (0.20)		14	18,930.		
15	Qualified business income deduction. Enter the lesser of line 10 or line 14. Also					
	the applicable line of your return		15	9.		
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	(0.)		
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a			(
	zero, enter -0		17	(<u> 0.</u>)		
For Pri	vacy Act and Paperwork Reduction Act Notice, see instructions. REV 05/	29/21 PRO		Form 8995 (2020)		

9	582	Passive Activity Loss Limitations		OMB No. 1545-1008
Form U		► See separate instructions.		2020
Departme	ent of the Treasury			Attachment
	. ,	Go to www.irs.gov/Form8582 for instructions and the latest information.		Sequence No. 858
.,		זתחגת	Identifying	
			859-09	-5825
Part		-		
Dental				
			see	
-			0.	
)	
	-		. 1d	-6,800.
2a	Commercial re	evitalization deductions from Worksheet 2, column (a) 2a ()	
)	
с	Be a separate instructions. Attach to Form 1040, 1040-SR, or 1041. Control 1040-SR, or 1041. Control 1040, 10		. 2c	()
All Oth	er Passive Ac	tivities		
3a	Activities with	net income (enter the amount from Worksheet 3, column (a)) . 3a		
b	Activities with	net loss (enter the amount from Worksheet 3, column (b)) 3b ()	
С	Prior years' ur)		
d	Combine lines	3a, 3b, and 3c	. 3d	
4				
	-	-	. 4	-6,800.
	If line 4 is a lo			
				to line 15
Coutio	n. If your filing		•	
			j ille yea	, do not complete
		-		
T GI C				
5		· · · · · · · · · · · · · · · · · · ·	. 5	6,800.
6			-	
7				
	Note: If line 7			
	line 10. Other	vise, go to line 8.		
8	Subtract line 7	7 from line 6	2.	
9	Multiply line 8	by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instruction	ons 9	17,826.
10	Enter the sma	Iler of line 5 or line 9	. 10	6,800.
Part I				ctivities
11				
12				
13		,	_	
14 Dort			. 14	<u> </u>
Part I				
		ne, if any, on lines 1a and 3a and enter the total		0.
16		allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instruction to report the losses on your tax return		6,800.
Eor De		v to report the losses on your tax return	. 10	Form 8582 (2020)
PUT Pap		tion Act Notice, see instructions. BAA REV 05/29/21 PRO		1 0111 UUUL (2020)

Caution: The worksheets must be filed with your tax return. Keep a copy for your records. Worksheet 1-For Form 8582, Lines 1a, 1b, and 1c (see instructions)

	Currer	nt year	Prior years	Overall gain or loss			
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss		
BHAGRIYAVAS PO:SHAHPUR	0.	6,800.			6,800.		
Total. Enter on Form 8582, lines 1a, 1b,							
and 1c	0.	6,800.					

Worksheet 2-For Form 8582, Lines 2a and 2b (see instructions)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and			
2b			

Worksheet 3-For Form 8582, Lines 3a, 3b, and 3c (see instructions)

	Currer	nt year	Prior years	Overall ga	Overall gain or loss	
Name of activity	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss	
Total. Enter on Form 8582, lines 3a, 3b, and 3c						

Worksheet 4-Use This Worksheet if an Amount Is Shown on Form 8582, Line 10 or 14. See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) oss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
BHAGRIYAVAS PO:SHAHPUR	E Ln 22	6,800.	1.00000000	6,800.	0.
Total		6,800.	1.00	6,800.	0.

Worksheet 5-Allocation of Unallowed Losses (see instructions)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
Total			1.00	

2020 MICHIGAN Indivi Return is due April 15, 2021. Ty			-		n MI-1	104	10				ended Return [
1. Filer's First Name	M.I.	Last Name		IK.			2 Filor'		Social Soc	ourity (No. (Example: 123-45-6	790)
MITESHKUMAR	J	PATEL					Z. Filers	s ruii	Social Sec	Sunty	No. (Example: 123-45-6	(09)
If a Joint Return, Spouse's First Name	M.I.	Last Name				-	8	59		09	— 5825	
						[3. Spou	se's l	Full Social	Secur	rity No. (Example: 123-4	5-6789)
Home Address (Number, Street, or P.O. Box)												
43432 NOWLAND DR			<u> </u>							<u> </u>		
City or Town CANTON			ate II	ZIP Code 48188	3		4. Scho		strict Code	(5 dig	jits – see page 60)	
5. STATE CAMPAIGN FUND			<u> </u>	10100			RS. FIS			SEA	AFARERS	
Check if you (and/or your spouse, i filing a joint return) want \$3 of your to go to this fund. This will not incre your tax or reduce your refund.	taxes	a Filer b Spou	ıse			Che		box	if 2/3 of y		ncome is from farming	ļ,
7. 2020 FILING STATUS. Check one					8. 202 0) RE	SIDEN	CYS	TATUS.	Chec	k all that apply.	
a. X Single	* If y	ou check box "c," co	mplet	е	а. Х	Re	sident					
		and enter spouse's	s full n	ame							* If you check box "b"	
b. Married filing jointly	belo	V:			b.	No	onreside	nt *			"c," you must comple and include Schedu	
c. Married filing separately*					c. 🗌	Pa	rt-Year	Resi	dent *		NR.	
9. EXEMPTIONS. NOTE: If someo	ne els	e can claim vou as a	a depe	endent. che	ck box 9e.	ente	er 0 on l	ine 9	a and en	ter \$	1.500 on line 9e (see	instr.).
		, ,		,	- ,					ĺ		Ť
a. Number of exemptions (see ins	structi	ons)			9a	a. 🕒	1	х	\$4,750	9a.	475	0 00
 b. Number of individuals who qual blind, hemiplegic, paraplegic, c 		0	•			b .		x	\$2,800	9b.		00
c. Number of qualified disabled v				-		5. 		x	\$400	9c.		00
d. Number of Certificates of Stillb						1.		х	\$4,750	9d.		00
e. Claimed as dependent, see line	e 9 N(DTE above				e. [9e.		00
f. Add lines 9a, 9b, 9c, 9d and 9e	e. Ent	er here and on line ²	15						·······	9f.	475	0 00
10. Adjusted Gross Income from yo	ur U.S	6. Forms <i>1040</i> or <i>10</i> 4	40NR	(see instru	ctions)				. 10.		10754	8 00
11. Additions from Schedule 1, line 9.	Inclu	de Schedule 1							. 11.			00
12. Total. Add lines 10 and 11									. 12.		10754	8 00
13. Subtractions from Schedule 1, line	e 29.	Include Schedule 1	1						. 13.			00
14. Income subject to tax. Subtract	line 13	3 from line 12. If line	e 13 is	greater that	an line 12,	ente	r "0"		. 14.		10754	8 00
15. Exemption allowance. Enter am	ount f	rom line 9f or Sched	lule NI	R, line 19					. 15.		475	0 00
16. Taxable income. Subtract line 15	from	line 14. If line 15 is	greate	er than line	14, enter "	'0"			. 16.		10279	8 00
17. Tax. Multiply line 16 by 4.25% (0.0	0425)								. 17.		436	9 00
NON-REFUNDABLE CREDITS					AMOU	INT			-		CREDIT	
 Income Tax Imposed by governme Include a copy of the return (see i 				sa				00	18b.			00
19. Michigan Historic Preservation Ta instructions)		• •		a.				00	19b.			00
20. Income Tax. Subtract the sum of lf the sum of lines 18b and 19b is	lines	18b and 19b from lin	ne 17.								436	

Continue on page 2. This form cannot be processed if page 2 is not completed and included.

REV 04/08/21 PRO

2020 N	II-1040, Page 2 of 2	Filer	s Full Social S	ecurity Number	8	59 -		09 — 5825	5	
21.	Enter amount of Income Tax from lir	ne 20			L		21.	4	369	00
22.	Voluntary Contributions from Form 4						22.			00
23.	USE TAX. Use tax due on Internet, Worksheet 1 (see instructions)					·····-	23.		0	00
~ (Л	369	~
	Total Tax Liability. Add lines 21, 22 INDABLE CREDITS AND PAYM					24.		1	209	00
25.	Property Tax Credit. Include MI-10	040CR or MI-1040CR	-2				25.			00
26.	Farmland Preservation Tax Credit	t. Include MI-1040CR	-5)ERAL		26.	MICHIGAN		00
27.	Earned Income Tax Credit. Multiply enter result on line 27b					00	27b.			00
28.	Michigan Historic Preservation Tax (28.			00			
29.	Michigan tax withheld from Schedul	nit W-2s)		29.	3	461	00			
30.	Estimated tax, extension payments						30.			00
31.	2020 AMENDED RETURNS ONLY. Amended returns must include Sch		, ,	2020 return s	hould skip to l	ine 32.				
	31a. If you had a refund and/or on negative number on line 31		inal return, che	eck box 31a and	d enter this amo	unt as a				
	31b. If you paid with the original any additional tax paid afte						31c.			00
32.	Total refundable credits and paymer	nts. Add lines 25, 26, 2	27b, 28, 29, 3	30 and 31c		32.		3	461	00
	IND OR TAX DUE					Г				
33.	If line 32 is less than line 24, subtrac	ct line 32 from line 24.	If applicable	e, see instruct	ions.					
	Include interest 00 a	nd penalty	00	Y	OU OWE	33.			908	00
34.	Overpayment. If line 32 is greater the	han line 24, subtract l	ine 24 from li	ine 32		34.				00
35.	Credit Forward. Amount of line 34 t	to be credited to your	2021 estima	ted tax for you	ur 2021 tax re	turn	35.			00
36	Subtract line 35 from line 34				REFUND	36.				00
	ECT DEPOSIT	a. Routing Transit			ccount Numbe			c. Type of Account		00
	it your refund directly to your financial ion! See instructions and complete a, b						1.	Checking 2.	Saving	gs
Dece	eased Taxpayer. If Filer and/or Spous R DATE OF DEATH ONLY. Example:				Preparer Ce	ertifica sed on a	tion.	l declare under penalty of p ation of which I have any k	perjury th nowledg	nat ve.
Filer		Spouse -			Preparer's PTIN P020827		or SSN			
	ayer Certification. I declare under p		e information in	this return	Preparer's Nam			I SAGAR GUPT		
	tachments is true and complete to the besi Signature	t of filly knowledge.	Date		Preparer's Sign			. DIGAN GUEI		•
								1 SAGAR GUPT		A
Spous	se's Signature		Date					Iress and Telephone Numb	ber	
			L		GLOBAL			LC REEK LN		
	By checking this box, I authorize Tre	asury to discuss my r	eturn with m	y preparer.	CUMMINC 678-965	G GA	300			

Refund, credit, or zero returns. Mail your return to:Michigan Department of Treasury, Lansing, MI48956Pay amount on line 33 (see instructions). Mail your check and return to:Michigan Department of Treasury, Lansing, MI48929

2020 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.

INSTRUCTIONS: If you had Michigan income tax withheld in 2020, you must complete a *Withholding Tax Schedule* (Schedule W) to claim the withholding on your *Individual Income Tax Return* (MI-1040, line 29). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits (both Tier 1 and Tier 2) in Table 2 even if no Michigan tax was withheld. Include your completed Schedule W with Form MI-1040. See complete instructions on page 2 of this form. If you need additional space, include another Schedule W.

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
MITESHKUMAR	J	PATEL	859 — 09 — 5825
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)

TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS

	4	В	С	D		E	
Enter "X" for: Filer or Spouse		Employer's identification number (Example: 38-1234567)	Box c — Employer's name	Box 1 — Wages, tips, other compensation		Box 17 — Michigan income tax withheld	
x		38-2563079	EPITEC INC	81437	00	3461	00
					00		00
					00		00
					00		00
					00		00
Enter	Table	1 Subtotal from additional Sche			00		
4.	SUB	TOTAL. Enter total of Table 1, c	olumn E		4.	3461	00

TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS (BOTH TIER 1 AND TIER 2) REPORTED ON 1099 FORMS

Α	В	С	D	E	
Enter "X" fo Filer or Spous		Payer's name	Taxable pension distribution, misc. income, etc. (see inst.)	Michigan income tax withheld	
			00	0)0
			00	0)0
			00	0)0
			00	0)0
			00	0)0
Enter Table 2 Subtotal from additional Schedule W forms (if applicable)				0)0
5. SU	5. SUBTOTAL. Enter total of Table 2, column E 5.				00
6. TOTAL. Add lines 4 and 5. Enter here and carry to MI-1040, line 29				3461 0)0

REV 04/08/21 PRO

Attachment 13