£1040

Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return

2020

OMB No. 1545-007

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

Filing Status Check only one box.	If yo	Single Married filing jointly u checked the MFS box, enter the son is a child but not your dependent	name of									
Your first name	and m	iddle initial	Last na	me					You	r soc	cial securit	y number
PRAJNA			MENE	OON					19!	195-59-6558		
If joint return, spouse's first name and middle initial Last name										use's	s social sec	urity number
	•	er and street). If you have a P.O. box, se	e instruction	ons.				Apt. no.	- 1			on Campaign
		VOUR DRIVE			T 0.						ere if you, f filing ioin	or your tly, want \$3
	OST OTTI	ce. If you have a foreign address, also c	omplete s	paces below.	Sta			code	to go	o to	this fund. (Checking a
HERNDON					/V			171			w will not	change
Foreign country	/ name			Foreign province/state	/coun	ty	For	eign postal cod	e your	your tax or refund. You Spouse		
At any time du	ring 20	020, did you receive, sell, send, exc	change, c	or otherwise acquire	any	financial intere	est in	any virtual	currenc	;y?	Yes	⊠ No
Standard Deduction		eone can claim:				•						
Age/Blindness	You:	Were born before January 2,	1956	Are blind Sp	ouse	: Was bo	rn be	efore Januar	, 2, 195	56	☐ Is bli	nd
Dependents	s (see	instructions):		(2) Social securit	.v	(3) Relationsh	qin	(4) ✓ if	qualifies	s for	(see instruc	ctions):
If more		irst name Last name		number to you				Child tax		- 1		er dependents
than four										\exists		
dependents, see instruction												
and check	5 —											
here ▶ □												
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1	5	59,487.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		. L	2b		
Sch. B if required.	3a	Qualified dividends	3a		b C	ordinary divide	nds		. L	3b		
	4a	IRA distributions	b T	axable amoun	t.			4b				
	5a	Pensions and annuities	5a		b T	axable amoun	t.			5b		
Standard	6a	Social security benefits	6a		b T	axable amoun	t.			6b		
Deduction for— Single or	7	Capital gain or (loss). Attach Sch	edule D if	frequired. If not rec	uired	, check here		🕨		7		
Married filing	8	Other income from Schedule 1, li	ne 9 .							8		4,500.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8. T	his is your total inc	ome				•	9	5	4,987.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22				10	а					
widow(er), \$24,800	b	Charitable contributions if you take										
Head of	С	Add lines 10a and 10b. These are your total adjustments to income										
household, \$18,650	11	Subtract line 10c from line 9. This	s is your a	adjusted gross inc	ome				•	11	5	<u>54,987.</u>
If you checked any box under	12	Standard deduction or itemized	deduct	ions (from Schedul	e A)				.	12	1 1	2,400.
Standard	13	Qualified business income deduc	tion. Atta	ach Form 8995 or F	orm 8	995-A			.	13		
Deduction, see instructions.	14	Add lines 12 and 13							.	14		2,400.
	15	Taxable income. Subtract line 1-	4 from lin	e 11. If zero or less	, ente	er-0				15	4	12,587.

Form 1040 (2020))							Page 2
	16	Tax (see instructions). Check if any from Form	n(s): 1 881	4 2 4972	3 🗌		16	5,157.
	17					_	17	
	18	Add lines 16 and 17					18	5,157.
	19	Child tax credit or credit for other dependen	ts				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,					22	5,157.
	23	Other taxes, including self-employment tax,					23	0.
	24	Add lines 22 and 23. This is your total tax		•			24	5,157.
	25	Federal income tax withheld from:						3,237.
	а	Form(s) W-2			25a	5,975		
	b	Form(s) 1099			25b	3,73,73		
	c	Other forms (see instructions)			25c		-	
	d	Add lines 25a through 25c					25d	5,975.
		2020 estimated tax payments and amount a					26	3,773.
 If you have a L qualifying child, 	26	Earned income credit (EIC)			27		20	
attach Sch. EIC.	<u>27</u> 28	Additional child tax credit. Attach Schedule			28		-	
If you have nontaxable							-	
combat pay,	29	American opportunity credit from Form 8863	-		29		-	
see instructions.	30	Recovery rebate credit. See instructions .			30		-	
	31	Amount from Schedule 3, line 13						
	32	Add lines 27 through 31. These are your total	32	F 075				
	33	Add lines 25d, 26, and 32. These are your to		5,975.				
Refund	34	If line 33 is more than line 24, subtract line 2	34	818.				
	35a	Amount of line 34 you want refunded to you	35a	818.				
Direct deposit? See instructions.	►b	Routing number 0 3 1 1 7 6 1	5					
	►d	Account number 3 6 0 8 9 4 9						
	36	Amount of line 34 you want applied to your			'			
Amount	37	Subtract line 33 from line 24. This is the amount	ount you owe	now		▶	37	
You Owe For details on		Note: Schedule H and Schedule SE filers,	r					
how to pay, see		2020. See Schedule 3, line 12e, and its instr						
instructions.	38	Estimated tax penalty (see instructions) .			38			
Third Party		you want to allow another person to disc						
Designee		structions	•	e below.	X No			
		signee's me ▶	Phone no. ▶			sonal ider nber (PIN)	ntification	
Cian		der penalties of perjury, I declare that I have examine		l accompanying sch				st of my knowledge and
Sign		ief, they are true, correct, and complete. Declaration						
Here	Yo	ur signature	Date	Your occupation	he IRS ser	nt you an Identity		
	k.			-				IN, enter it here
Joint return?				SOFTWARE 1	(se	e inst.) >		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupat	ion			nt your spouse an
your records.	,					e inst.) 🕨	ection PIN, enter it here	
	————	one no. (304)972-9454	Email address	MENDON DDA	JNA@GMAIL.C			
		eparer's name Preparer's signal		MENDON. PRA	Date	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA		מווסיית ייתוד או			82703	Self-employed
Preparer			אאטאט ויואיז	GUFIA IALLAM	109/10/2021			
Use Only		m's name ► GLOBAL TAXES LLC	n Cummin	~ (7 20041				678)965-9522
		m's address ▶ 2530 Pebble Creek I	iii CuiiiiiIn				m's EIN ▶	
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information.		BAA	REV 08/30/21 PR	0		Form 1040 (2020)

SCHEDULE 1 (Form 1040)

PRAJNA

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

MENDON

Name(s) shown on 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. 01 Your social security number

195-59-6558

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2 a	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	-4,500.
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, line 8	9	-4,500.
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	

SCHEDULE E

(Form 1040)

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.

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

Sequence No. 13

Name(s) shown on return Your social security number PRAJNA 195-59-6558 MENDON Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions Physical address of each property (street, city, state, ZIP code) Α DOMBIVLI EAST DOMBIVLI EAST MAHARASHTRA IN 421202 В C 1b Fair Rental **Personal Use** Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days Days** personal use days. Check the **QJV** box only if you meet the requirements to file as a Α 365 0 Α qualified joint venture. See instructions. В В С С Type of Property: Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: **Properties:** Α 3 Rents received . 3 550. 4 Royalties received 4 Expenses: Advertising 5 5 6 Auto and travel (see instructions) . . . 6 7 Cleaning and maintenance . . . 7 800. 8 8 Commissions. 9 Insurance 9 10 Legal and other professional fees . . . 10 11 11 500. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. 14 Repairs. 14 800. 15 500. 15 Supplies . Taxes 16 16 17 17 2,450. 18 Depreciation expense or depletion . . 18 19 19 Total expenses. Add lines 5 through 19 20 20 5,050. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -4,500. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) -4,500.) 550 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b 23c **c** Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 5,050. Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 4,500. 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 26 -4,500.





PRAJNA

MENDON

13739 ENDEAVOUR DRIVE

HERNDON VA 20171

SSN - You MEND		195596558	Vendor ID	1555	:	XXXXX	\neg
SSN - Spouse							
Fed Adj Gross Income (FAGI)	1.	54987.	Withholding (VA) - Yo	DU	19A.	2	800.
Additions	2.		Withholding (VA) - Sp	pouse	19B.		
Subtotal	3.	54987.	Estimated Payments		20.		
Age Deduction - You	4A.		2019 Overpayment		21.		
Age Deduction - Spouse	4B.		Extension Payments		22.		
Soc Sec & Tier 1 Railroad	5.		Credit - Low-Income	or EIC	23.		
State Income Tax Overpayment	6.		Credit - Schedule OS	С	24.		
Subtractions	7.		Credits - Schedule CI	₹	25.		
Subtotal Subtractions	8.		Total Payments / Cre	edits	26.	2	800.
Total VA Adj Gross Income (VAGI)	9.	54987.	Tax You Owe		27.		
Itemized Deductions - VA Sch A	10.		Tax Overpayment		28.		208.
Standard Deduction	11.	4500.	Overpayment Credite	d to Next Year	29.		
Exemptions	12.	930.	VAC - Virginia 529 / A	ABLEnow	30.		
Deductions	13.		VAC - Other Contribu	utions	31.		
Subtotal (Deductions & Exemptions) 14.	5430.	Addition to Tax, Pena	Ity & Interest	32.		
VA Taxable Income	15.	49557.	Sales and Use Tax		33.		
Amount of Tax	16.	2592.	Amount You Owe				
Spouse Tax Adjustment (STA)	17.		Will Pay by Credit/Debit	t Card N			208.
VAGI - Spouse	17A.					0011	DC110
Net Amount of Tax	18.	2592.	Bank Routing #		C		.76110
L			Bank Account #		36089492681		

__LAR __DLAR __DTD __LTD \$_____

Page 1 of 2

195596558





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1									
Filing Status, Age	& License In	formation	Additional Filing Information						
Filing Status			1	Locality	059				
Federal Head of H	Household			Name or Filing Status Change					
DOB - You		0125199	2	Address Change					
VA Driver's Licens	se ID - You	E2860500	9	VA Return Not Filed Last Year					
VA Driver's Licens	se - Iss. Date -	You 0819202	0	Dependent on Another's Return					
Spouse Name (Fi	ling Status 3 O	nly)		Farmer / Fisherman / Merchant Seaman					
DOD 0				Amended					
DOB - Spouse	a ID. Casuas			Reason Code					
VA Driver's Licens		Chauca		Overseas on Due Date					
VA Driver's Licens	se - ISS. Date -	Spouse		Federal EIC & Amount					
Exemptions (A) You	1	Exemptions (B) 65 & Over - You		Deceased Indicator					
Spouse		65 & Over - Spouse		No Sales & Use Tax Due Indicator	Х				
Dependents		Blind - You		Obtain Electronic 1099G					
Total (A)	1	Blind - Spouse		ID Theft PIN					
		Total (B)							
	(Contact Information							
				(our) knowledge, it is a true, correct & complete return. If you					
deposit of your refund l	by providing bank	intormation on your return, you are certify	ying that the information pro	vided is for a domestic account within the territorial jurisdiction	on of the United States.				
Signature - You		Date	Pho	one - You 3 0	49729454				

091821

File by May 1, 2021

Signature - Preparer <u>SYAM PRIYA RAM SAGAR GUPTA TALLAM</u> Date

The Tax Department may discuss my/our return with my/our preparer.

Include Page 1, Page 2 and all supporting 760CG documents.

2530 PEBBLE CREEK LN

GLOBAL TAXES LLC

Phone - Spouse

Phone - Preparer

Preparer Information

CUMMING GA 30041

Page 2 of 2

6789659522

P02082703

7

Signature - Spouse _____

2020 Schedule INC/CG

195596558

Report all W-2s, 1099s & VK-1s with VA Withholding

PRAJNA

MENDON



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.		
Г					⊣		
195596558	W	2800.	260518877	30260518877F001	59487.		

Total VA Withholding

You

195596558

2800.

Spouse

Total # of W-2s,1099s & VK-1s

01

VA-8879 Virginia Department of Taxation

1555

Virginia Submission Identification Number (SID)

Virginia Individual Income Tax e-File Signature Authorization

Tax Year 2020

DO NOT SEND THIS VA-8879 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

You	r Na	ame															B Your Social Se	ecurity Number	
PRA	JN.	A N	MEND	ON													195-59-6558		
Spo	use	's Na	me														A Spouse's Soci	al Security Number	
																		T	
Par				urn In													A Spouse	B Yourself	
1.			•												orm 763, Line 1	•		54987.	
2.	٧	'irginia	Adjust	ed Gros	ss Incon	ne (For	m 760C	G, Lir	ne 9; 760	PY, L	Line 10,	colum	ns A & B	; Fc	orm 763, Line 9	9)		54987.	
3.	T	axable	e Incom	ne (Forn	n 760C0	3, Line	15; 760	PY, L	ine 16, c	olum	ns A &	B; Form	n 763, Lir	ne 1	17)			49557.	
4.	٧	'irginia	Incom	e Tax (F	Form 76	OCG, I	_ine 18;	760P	Y, Line 1	7, co	lumns A	4 & B; F	orm 763	B Lir	ne 18)			2592.	
5.	٧	Vithhol	ding (F	orm 760	OCG, Li	ne 1 9 a	& 19b;	760P\	Y, Lines	1 9 a 8	k 19b; F	orm 76	3, Lines	198	a & 19b)			2800.	
6.	Α	moun	t you O	we (For	m 7600	G, Lin	e 3 5 ; Fo	orm 76	0PY, Lir	ne 3 5 ;	Form	763, Lin	ie 3 5)						
7.	F	Refund	(Form	760CG	, Line 3	6; 760I	PY, Line	3 6 ; F	orm 763	, Line	36)							208.	
Par									ture Au										
Dece Retu num filing liable Virgi refur of th	Under penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying schedules and statements for the year ending December 31, 2020, and to the best of my knowledge and belief, it is true, correct and complete. I further declare that the information I provided to my Electronic Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security number or individual tax identification number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If I am filling a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Provider to transmit my complete return to Virginia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, the direct deposit of my refund or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.																		
X	Taxpayer's e-File PIN: check one box only I authorize the ERO named below to enter my e-File PIN 9 6 5 5 8 as my signature on my 2020 e-filed Virginia individual income tax return. Do not enter all zeros																		
	_	GLO:	BAL	TAXE	S LL	<u> </u>						-DO F'							
											ginia in	dividua		tax	x return. Chec III below.	ck this box	only if you are enterin	g your own e-File PIN	
Your	Your Signature Date																		
Spo	use	's e-Fi	ile PIN:	check	one bo	x only	•												
	-										E	RO Fi	m Name	—— Э					
	I will enter my e-File PIN as my signature on my 2020 e-filed Virginia individual income tax return. Check this box only if you are entering your own e-File PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.																		
Spor	Spouse's Signature Date																		
Part III Certification and Authentication – Practitioner PIN Method Only																			
ERC	's E	FIN/P	IN: En	iter your	six-dig	it EFIN	followe	d by y	our five	digit s	self-sele	ected PI	N. 5	5	8 7 2 7	7 8 6	1 9 8 9		
abov Elec or co	Do not enter all zeros I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2020 Virginia individual income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Virginia's publication Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2020). EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.																		
EKC	155	ignatu	ne												Date	09-1	0-71		