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STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE INDIVIDUAL INCOME TAX DECLARATION FOR ELECTRONIC FILING

SC8453 (Rev. 11/16/20) 3299

Personal information section including name (SINDHU BOJADLA), social security number (345-37-0167), home address (333 NORMANDY STREET APT 702 HOUSTON TX 77015), and tax year (2020).

Table with 4 columns: Line number, Description, Amount, and Total. Rows include Federal taxable income (2,383.00), Net SC tax (0.00), Use Tax (0.00), Total Tax (0.00), SC Income Tax Withheld (555.00), Tuition Tax Credit (0.00), Refund (555.00), and Amount you owe (0.00).

Part II: Direct Deposit of Refund or EFW Payment of Tax Due. Includes routing transit number (RTN) 111900659 and bank account number (BAN) 9267674639.

Part III: Declaration of Taxpayer. Includes consent to direct deposit and authorization for electronic funds withdrawal.

If I have filed a balance due return, I understand that if the SC Department of Revenue does not receive full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable interest and penalties.

I declare that I have compared the information (including direct deposit or EFW data) on my return with the information I have provided to my electronic return originator (ERO) and the amounts agree with the amounts on my SC tax return.

Sign Here section with lines for signature and date for both taxpayer and spouse.

Part IV: Declaration of Electronic Return Originator (ERO) and Paid Preparer. Includes a declaration of accuracy and a three-year retention requirement.

ERO's Use Only section. Includes signature of ERO (GLOBAL TAXES LLC), date (11-20-2021), and address (2530 Pebble Creek Ln, Cumming, GA).

Paid Preparer's Use Only section. Includes signature of preparer (SYAM PRIYA RAM SAGAR GUPTA TALLAM), date (11-20-2021), and address (2530 Pebble Creek Ln Cumming GA).



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STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE 2020 INDIVIDUAL INCOME TAX RETURN

SC1040 (Rev. 10/14/20) 3075

Your Social Security Number 345 37 0167 Check if deceased [] Spouse's Social Security Number Check if deceased []



For the year January 1 - December 31, 2020, or fiscal tax year beginning _____, 2020 and ending _____, 2021

First name and middle initial SINDHU Last name BOJADLA Suffix Spouse's first name, if married filing jointly Last name Suffix Mailing address (number and street, PO Box) 333 NORMANDY STREET 702 County code 12 City HOUSTON State TX ZIP 77015 Daytime phone number with area code (617) 787-9449

- Amended Return: Check if this is an Amended Return. (Attach Schedule AMD) []
Check this box if you are a part-year or nonresident filing an SC Schedule NR [X]
Check this box only if you are filing a composite return on behalf of a Partnership or S Corporation. Do not check this box if you are an individual []
Check this box if you have filed a federal or state extension. []
Check this box if you served in a military combat zone during the filing period. []
Name of the combat zone: _____

CHECK YOUR FEDERAL FILING STATUS (1) [X] Single (3) [] Married filing separately - enter spouse's SSN: _____ (2) [] Married filing jointly (4) [] Head of household (5) [] Qualifying widow(er)

Number of dependents claimed on your 2020 federal return [] 0
Number of dependents claimed that were under the age of 6 years as of December 31, 2020 []
Number of taxpayers age 65 or older as of December 31, 2020 []

DEPENDENTS

Table with 5 columns: First name, Last name, Social Security Number, Relationship, Date of birth (MM/DD/YYYY)



INCOME AND ADJUSTMENTS

Your SSN 345-37-0167

2020

1 Enter federal taxable income from your federal form. If zero or less, enter zero here Nonresident filers: complete Schedule NR and enter total from line 48 on line 5 below ▶	1	Dollars	2,383	00
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ADDITIONS TO FEDERAL TAXABLE INCOME

a State tax addback, if itemizing on federal return (see instructions) ▶	a		00	
b Out-of-state losses Type: _____ ▶	b		00	
c Expenses related to National Guard and Military Reserve Income ▶	c		00	
d Interest income on obligations of states and political subdivisions other than South Carolina ▶	d		00	
e Other additions to income. (attach explanation - see instructions) ▶	e		00	
2 Total additions (add line a through line e) ▶	2			00
3 Add line 1 and line 2 and enter the total here ▶	3			00

SUBTRACTIONS FROM FEDERAL TAXABLE INCOME

f State tax refund, if included on your federal return ▶	f		00	
g Total and permanent disability retirement income, if taxed on your federal return ▶	g		00	
h Out-of-state income/gain (do not include personal service income) Check type of income/gain: <input type="checkbox"/> Rental <input type="checkbox"/> Business <input type="checkbox"/> Other _____ ▶	h		00	
i 44% of net capital gains held for more than one year. ▶	i		00	
j Volunteer deductions (see instructions) Type: _____ ▶	j		00	
k Contributions to the SC College Investment Program (Future Scholar) or the SC Tuition Prepayment Program ▶	k		00	
l Active Trade or Business Income deduction (see instructions) ▶	l		00	
m Interest income from obligations of the US government. ▶	m		00	
n Certain nontaxable National Guard or Reserve pay. ▶	n		00	
o Social Security and/or railroad retirement, if taxed on your federal return . . ▶	o		00	
p Retirement Deduction (see instructions)				
p-1 Taxpayer (date of birth: _____) ▶	p-1		00	
p-2 Spouse (date of birth: _____) ▶	p-2		00	
p-3 Surviving spouse (date of birth of deceased spouse: _____) ▶	p-3		00	
Military Retirement Deduction (see instructions)				
p-4 Taxpayer (date of birth: _____) ▶	p-4		00	
p-5 Spouse (date of birth: _____) ▶	p-5		00	
p-6 Surviving spouse (date of birth of deceased spouse: _____) ▶	p-6		00	
q Age 65 and older deduction (see instructions)				
q-1 Taxpayer (date of birth: _____) ▶	q-1		00	
q-2 Spouse (date of birth: _____) ▶	q-2		00	
r Negative amount of federal taxable income ▶	r		00	
s Subsistence allowance (multiply _____ days by \$8) ▶	s		00	
t Dependents under the age of 6 years on December 31 of the tax year. . . . ▶	t		00	
u Consumer Protection Services ▶	u		00	
v Other subtractions (see instructions) ▶	v		00	
w South Carolina Dependent Exemption (see instructions) ▶	w		00	
4 Total subtractions (add line f through line w) ▶	4	<		00 >
5 Residents: subtract line 4 from line 3 and enter the difference. Nonresidents: enter amount from Schedule NR, line 48. If less than zero, enter zero here. This is your SOUTH CAROLINA INCOME SUBJECT TO TAX ▶	5		1,849	00
6 TAX on your South Carolina Income Subject to Tax (see SC1040TT). ▶	6		0	00
7 TAX on Lump Sum Distribution (attach SC4972) ▶	7		00	
8 TAX on Active Trade or Business Income (attach I-335) ▶	8		00	
9 TAX on excess withdrawals from Catastrophe Savings Accounts ▶	9		00	
10 Add line 6 through line 9 and enter the total here. This is your TOTAL SOUTH CAROLINA TAX ▶	10		0	00



NON-REFUNDABLE CREDITS

Table with 5 rows for non-refundable credits: 11 Child and Dependent Care, 12 Two Wage Earner Credit, 13 Other nonrefundable credits, 14 Total nonrefundable credits, 15 Subtract line 14 from line 10.

PAYMENTS AND REFUNDABLE CREDITS

Table with 15 rows for payments and refundable credits: 16 SC income tax withheld, 17 2020 Estimated Tax payments, 18 Amount paid with extension, 19 Nonresident sale of real estate, 20 Other SC withholding, 21 Tuition tax credit, 22 Other refundable credits (22a-22e), 22 Total refundable credits.

AMENDED RETURN: Use Schedule AMD for line 23 calculation.

Table with 3 rows for amended return: 23 Add line 16 through line 22 and enter the total here, 24 If line 23 is larger than line 15, subtract line 15 from line 23, 25 If line 15 is larger than line 23, subtract line 23 from line 15.

AMENDED RETURN: Enter the amount from line 24 on line 30. Enter the amount from line 25 on line 31.

Table with 5 rows for use tax and refund: 26 USE TAX due on online, mail-order, or out-of-state purchases, 27 Amount of line 24 to be credited to your 2021 Estimated Tax, 28 Total Contributions for Check-offs, 29 Add line 26 through line 28, 30 If line 29 is larger than line 24, go to line 31.

REFUND OPTIONS (subject to program limitations)

Form for refund options: 30a Mark one refund choice: [X] Direct Deposit, [] Debit Card, [] Paper Check; 30b Direct Deposit (for US accounts only) Type: [X] Checking, [] Savings; Routing Number (RTN) 111900659; Bank Account Number (BAN) 9267674639.

Table with 4 rows for tax due and balance due: 31 Add line 25 and line 29, 32 Late filing and/or late payment: Penalties Interest, 33 Penalty for Underpayment of Estimated Tax, 34 Add line 31 through line 33 and enter the total here.

Pay online using our free tax portal, MyDORWAY, at dor.sc.gov/pay.

I declare that this return and all attachments are true, correct, and complete to the best of my knowledge. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has any knowledge.

Your signature Date Spouse's signature (if married filing jointly, BOTH must sign)

I authorize the Director of the SCDOR or delegate to discuss this return, attachments, and related tax matters with the preparer. Yes [] No [X] Preparer's printed name SYAM PRIYA RAM SAGAR GUPTA TALLAM

Paid Preparer's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM Date 11-20-2021 Check if self-employed [] PTIN P02082703 Use Firm name (or yours if self-employed), address, ZIP GLOBAL TAXES LLC 2530 Pebble Creek Ln Cumming GA 30041 FEIN 30-1017196 Only Phone (678) 965-9522

MAIL TO: REFUNDS OR ZERO TAX: SC1040 Processing Center, PO Box 101100, Columbia, SC 29211-0100 BALANCE DUE: Taxable Processing Center, PO Box 101105, Columbia, SC 29211-0105

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STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE 2020 NONRESIDENT SCHEDULE

SCHEDULE NR (Rev. 10/15/20) 3081

For the year January 1 - December 31, 2020, or fiscal tax year beginning 2020 and ending 2021

Table with 4 columns: Your name (BOJADLA, SINDHU), Your Social Security Number (345-37-0167), Spouse's first name, Spouse's Social Security Number

Dates of SC residency 01-01-2020 to 07-01-2020

Schedule NR is for Nonresidents or Part-year residents

Attach to completed SC1040.

Main table with columns: INCOME AND EXCLUSIONS, INCOME AS SHOWN ON FEDERAL RETURN COLUMN A, SOUTH CAROLINA INCOME COLUMN B. Includes rows 1-16 and ADJUSTMENTS TO INCOME 17-21.

Attach to SC1040

SC adjustment cannot exceed 100% of federal adjustment. Continued on next page.

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	COLUMN A	COLUMN B
22 Self-employed SEP, SIMPLE, and qualified plans	00	00
23 Self-employed health insurance deduction	00	00
24 Penalty on early withdrawal of savings	00	00
25 Alimony paid	00	00
26 IRA deduction	00	00
27 Student loan interest deduction	00	00
28 Tuition and fees deduction	00	00
29 Charitable contributions if you take the standard deduction	00	
30 Total adjustments: Add line 17 through line 29	00	00
31 Adjusted gross income: Subtract line 30 from line 16	14,783	11,471

SOUTH CAROLINA ADJUSTMENTS

ADDITIONS

32 South Carolina additions		00
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SUBTRACTIONS

33 South Carolina dependent exemption (see instructions)		00
34 44% of net capital gains held for more than one year		00
35 Retirement deduction (see instructions)		
a) Taxpayer (date of birth: _____)	35a	00
b) Spouse (date of birth: _____)	35b	00
c) Surviving spouse (date of birth of deceased spouse: _____)	35c	00
Military retirement deduction (see instructions)		
d) Taxpayer (date of birth: _____)	35d	00
e) Spouse (date of birth: _____)	35e	00
f) Surviving spouse (date of birth of deceased spouse: _____)	35f	00
36 Age 65 and older deduction (see instructions - must be resident for part of the year)		
a) Taxpayer (date of birth: _____)	36a	00
b) Spouse (date of birth: _____)	36b	00
37 Deductions for dependents under 6 years of age on December 31 of the tax year (see instructions - must be resident for part of the year)		
Date of birth: _____ SSN: _____		
Date of birth: _____ SSN: _____	37	00
38 Contributions to the SC College Investment Program (Future Scholar) or the SC Tuition Prepayment Program	38	00
39 Active Trade or Business Income deduction (see instructions)	39	00
40 Consumer Protection Services	40	00
41 Other subtractions (see instructions)	41	00
42 Total South Carolina subtractions: Add line 33 through line 41	42	00
43 Total South Carolina adjustments: Subtract line 42 from line 32	43	00
44 SC modified adjusted gross income: Add Column B, line 31 and line 43	44	11,471

45 PRORATION:
Line 31, Column B divided by line 31, Column A = 77.60 % (do not exceed 100%)

46 DEDUCTIONS ADJUSTMENT:
If using the standard deduction, enter the amount from federal form on line 46.
If itemizing, use the Schedule NR instructions, and enter the amount from Part IV on line 46.
Enter the following amounts from the instructions:

Part I (Itemized Deductions) _____
Part II, Worksheet, line 6 (State Taxes) _____
Part III (Other Expenses) _____

46	12,400	00
47	9,622	00
48	1,849	00

47 Allowable deductions: Multiply line 46 by 77.60 % (from line 45)

48 South Carolina taxable income: Subtract line 47 from line 44, Column B. Enter the difference here and on SC1040, line 5. If line 48 is a negative figure, enter zero on SC1040, line 5

Attach this form and a complete copy of your federal return to your SC1040. Check the Schedule NR box on the front of SC1040. Do not submit Schedule NR separately. We cannot process your return if this form is submitted separately.