E 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 loon is a child but not your depender	name of	ed filing separately your spouse. If you									
Your first name	and m	iddle initial	Last na	me					Υ	Your social security number			
SHASHANK				VANAHALLI F	RAJA	SH			3	343-89-6407			
If joint return, spouse's first name and middle initial				me					S	Spouse's social security number			
								1					
	•	er and street). If you have a P.O. box, see	e instruction	ons.				Apt. no.	+			on Campaign	
								Check here if you, or your spouse if filing jointly, want \$3					
	ost offi	ce. If you have a foreign address, also c	omplete s	paces below.		State ZIP code				to go to this fund. Checking a			
PLANO Foreign country name				TX						box below will not change			
				Foreign province/state/county				Foreign postal code		your tax or refund. You Spouse			
At any time du	ring 20	020, did you receive, sell, send, exc	hange, c	or otherwise acquir	e any	financial i	nterest in	n any virtual	l curre	ency?	Yes	No	
Standard		eone can claim: You as a de											
Deduction				•			GIIL						
		Spouse itemizes on a separate return or you were a dual-status alien											
Age/Blindness	s You:	Were born before January 2,	1956	Are blind S	pouse	e: U Wa	s born b	efore Janua	ary 2, 1	1956	☐ Is bl	ind	
Dependent	s (see	instructions):		(2) Social secur	ity			(4) ✓ if quali		1	1 -	•	
If more	(1) F	irst name Last name	number		to you		ou	Child tax cred		lit	Credit for ot	ther dependents	
than four dependents,								<u> </u>				Ц	
see instruction	s ——							L				Ц	
and check												ऱ	
here ▶								L					
Attach	1	Wages, salaries, tips, etc. Attach	Form(s) \	N-2						1		53,663.	
Attach Sch. B if	2 a	Tax-exempt interest	2a		b 7	Taxable int	erest			2b	_	400.	
required.	3a	Qualified dividends	3a		b (b Ordinary dividend				3b			
	4a	IRA distributions	4a							4b			
	5a	Pensions and annuities	5a		b 1	raxable an	nount .			5b			
Standard Deduction for—	6a	Social security benefits	6a			Taxable an				6b			
Single or	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								7	+		
Married filing separately,	8	Other income from Schedule 1, line 9								8			
\$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9		54,063.	
 Married filing jointly or 	10	Adjustments to income:					1 1	_					
Qualifying	а	From Schedule 1, line 22											
widow(er), \$24,800	b	Charitable contributions if you take the standard deduction. See instructions 10b 30											
 Head of household, 	С	Add lines 10a and 10b. These are your total adjustments to income								100		2,800.	
\$18,650	11	Subtract line 10c from line 9. This is your adjusted gross income								11		51,263.	
 If you checked any box under 	12	Standard deduction or itemized								12		12,400.	
Standard	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A									1		
Deduction, see instructions.	14	Add lines 12 and 13								14		12,400.	
	15	Taxable income. Subtract line 14	I from lin	e 11. If zero or less	s, ente	er-0				15	.	38,863.	

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

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Form 1040 (2020))										Page Z	
	16	Tax (see instructions). Check	if any from Form	(s): 1	4 2 🗌 4972	3 🗌		. 16		4,	468.	
	17	Amount from Schedule 2, lir	ne 3					. 17				
	18	Add lines 16 and 17						. 18		4,	468.	
	19	Child tax credit or credit for	other dependent	ts				. 19				
	20	Amount from Schedule 3, lin	ne 7					. 20				
	21	Add lines 19 and 20						. 21				
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				. 22		4,	468.	
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 10			. 23			0.	
	24	Add lines 22 and 23. This is	your total tax					▶ 24		4,	468.	
	25	Federal income tax withheld	I from:									
	а	Form(s) W-2				25a	6,76	0.				
	b	Form(s) 1099				25b						
	С	Other forms (see instruction	s)			25c						
	d	Add lines 25a through 25c						. 25d		6,	760.	
If you have a	26	2020 estimated tax paymen	ts and amount a	pplied from 20)19 return			. 26				
qualifying child,	27	Earned income credit (EIC)			No .	27						
attach Sch. EIC. If you have	28	Additional child tax credit. Attach Schedule 8812										
nontaxable	29	American opportunity credit	from Form 8863	s, line 8		29						
combat pay, see instructions.	30	Recovery rebate credit. See	instructions .			30						
	31	Amount from Schedule 3, lir	ne 13			31						
	32	Add lines 27 through 31. Th	ese are your tota	al other paym	ents and refunda	ble credits .		▶ 32				
	33	Add lines 25d, 26, and 32. These are your total payments						▶ 33		6,	760.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid				. 34		2,	292.			
neiulia	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □						35a		2,	292.	
Direct deposit?	▶b	Routing number 1 1 1 9 0 0 6 5 9 ▶ c Type: X Checking Savings						ngs				
See instructions.	▶d	Account number 5 6 7 2 3 5 8 8 1 8 1 8										
	36	Amount of line 34 you want	applied to your	2021 estimate	ed tax ►	36						
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe	now			▶ 37				
You Owe		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for										
For details on how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details.										
instructions.	38	Estimated tax penalty (see instructions)										
Third Party	Do	you want to allow another	person to disc	uss this retu	rn with the IRS?	See						
Designee	ins	structions		Compl	ete below.	×N	lo					
		Designee's name ►						dentification		$\overline{}$		
			Mark I Inc. or a constant	no. ►	1		mber (P				1 - 1	
Sign		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.										
Here		Your signature		Date Your occupation				If the IRS se		•	Ü	
	,	L		Tour occupation				Protection P				
Joint return?						(see inst.) ▶						
See instructions.	Sp	ouse's signature. If a joint return,	Date	Spouse's occupati	on		If the IRS se					
Keep a copy for your records.	'					Identity Prot (see inst.) ▶	ection F	'IN, en	iter it here			
•							(500 11151.)	Ш				
		one no. eparer's name	Preparer's signat	Email address	PTII	N.	Check					
Paid		•						l		anlovad		
Preparer		SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TA										
Use Only								Phone no. Firm's EIN I	no. (678) 965-9522			
•	Fir	Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Fir								-IU.	17196	

REV 03/25/21 PRO

SCHEDULE 1 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020

Attachment
Sequence No. 01

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

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR SHASHANK BADAVANAHALLI RAJASH

Your social security number 343-89-6407

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	
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 9	0	
Par	Ine 8	9	
		40	
10 11	Educator expenses	10	
"	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		18a	
	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	2,500.
21	Tuition and fees deduction. Attach Form 8917	21	2,300.
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	2,500.