



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

SC8453 (Rev. 11/16/20) 3299

Personal information section including names (ABHINAY PALACHARLA), social security numbers (014-45-3233), home address (703 POTENZA DR APT A CHARLOTTE NC 28262), and tax year (2020).

Table with 8 rows and 3 columns: Line number, Description (e.g., Federal taxable income, Net SC tax), and Amount (e.g., 21,892.00).

Part II: Direct Deposit of Refund or EFW Payment of Tax Due. Includes routing transit number (071921891) and bank account number (4668369236).

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

Disclaimer text: '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.'

Declaration text: '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 taxpayer and spouse signatures and dates.

Part IV: Declaration of Electronic Return Originator (ERO) and Paid Preparer (See Instructions.)

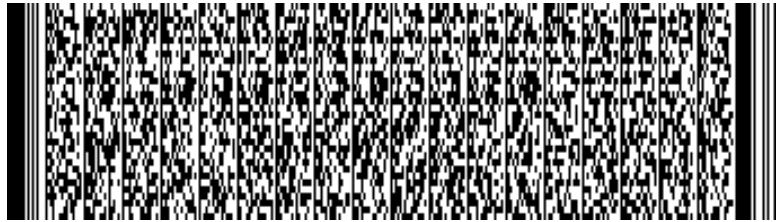
ERO's Use Only section with fields for signature, date (03-24-2021), firm name (GLOBAL TAXES LLC), and address (2530 Pebble Creek Ln, Cumming, GA).

Paid Preparer's Use Only section with fields for signature, date (03-24-2021), firm name (SYAM PRIYA RAM SAGAR GUPTA TALLAM), and address (2530 Pebble Creek Ln Cumming GA).



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

Your Social Security Number 014 45 3233 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

Form with fields for First name and middle initial (ABHINAY), Last name (PALACHARLA), Spouse's first name, Mailing address (703 POTENZA DR A), City (CHARLOTTE), State (NC), ZIP (28262), Daytime phone number (864) 329-6037, and County code (08).

- 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
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 (2) [ ] Married filing jointly (3) [ ] Married filing separately - enter spouse's SSN: (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 014-45-3233

**2020**

<b>1</b> Enter <b>federal taxable income</b> 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 . . . . . ▶	<b>1</b>	<b>Dollars</b> 21,892	<b>00</b>
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**ADDITIONS TO FEDERAL TAXABLE INCOME**

<b>a</b> State tax addback, if itemizing on federal return (see instructions) . . . . . ▶	<b>a</b>	00	
<b>b</b> Out-of-state losses Type: _____ . . . . . ▶	<b>b</b>	00	
<b>c</b> Expenses related to National Guard and Military Reserve Income . . . . . ▶	<b>c</b>	00	
<b>d</b> Interest income on obligations of states and political subdivisions other than South Carolina ▶	<b>d</b>	00	
<b>e</b> Other additions to income. (attach explanation - see instructions) . . . . . ▶	<b>e</b>	00	
<b>2 Total additions</b> (add line a through line e) . . . . . ▶	<b>2</b>		<b>00</b>
<b>3</b> Add line 1 and line 2 and enter the total here . . . . . ▶	<b>3</b>	21,892	<b>00</b>

**SUBTRACTIONS FROM FEDERAL TAXABLE INCOME**

<b>f</b> State tax refund, if included on your federal return . . . . . ▶	<b>f</b>	00	
<b>g</b> Total and permanent disability retirement income, if taxed on your federal return ▶	<b>g</b>	00	
<b>h</b> 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 _____ ▶	<b>h</b>	00	
<b>i</b> 44% of net capital gains held for more than one year . . . . . ▶	<b>i</b>	00	
<b>j</b> Volunteer deductions (see instructions) Type: _____ ▶	<b>j</b>	00	
<b>k</b> Contributions to the SC College Investment Program (Future Scholar) or the SC Tuition Prepayment Program . . . . . ▶	<b>k</b>	00	
<b>l</b> Active Trade or Business Income deduction (see instructions) . . . . . ▶	<b>l</b>	00	
<b>m</b> Interest income from obligations of the US government . . . . . ▶	<b>m</b>	00	
<b>n</b> Certain nontaxable National Guard or Reserve pay . . . . . ▶	<b>n</b>	00	
<b>o</b> Social Security and/or railroad retirement, if taxed on your federal return . . ▶	<b>o</b>	00	
<b>p</b> Retirement Deduction (see instructions)			
<b>p-1</b> Taxpayer (date of birth: _____) . . . . . ▶	<b>p-1</b>	00	
<b>p-2</b> Spouse (date of birth: _____) . . . . . ▶	<b>p-2</b>	00	
<b>p-3</b> Surviving spouse (date of birth of deceased spouse: _____) ▶	<b>p-3</b>	00	
Military Retirement Deduction (see instructions)			
<b>p-4</b> Taxpayer (date of birth: _____) . . . . . ▶	<b>p-4</b>	00	
<b>p-5</b> Spouse (date of birth: _____) . . . . . ▶	<b>p-5</b>	00	
<b>p-6</b> Surviving spouse (date of birth of deceased spouse: _____) ▶	<b>p-6</b>	00	
<b>q</b> Age 65 and older deduction (see instructions)			
<b>q-1</b> Taxpayer (date of birth: _____) . . . . . ▶	<b>q-1</b>	00	
<b>q-2</b> Spouse (date of birth: _____) . . . . . ▶	<b>q-2</b>	00	
<b>r</b> Negative amount of federal taxable income . . . . . ▶	<b>r</b>	00	
<b>s</b> Subsistence allowance (multiply _____ days by \$8) . . . . . ▶	<b>s</b>	00	
<b>t</b> Dependents under the age of 6 years on December 31 of the tax year . . . ▶	<b>t</b>	00	
<b>u</b> Consumer Protection Services . . . . . ▶	<b>u</b>	00	
<b>v</b> Other subtractions (see instructions) . . . . . ▶	<b>v</b>	00	
<b>w</b> South Carolina Dependent Exemption (see instructions) . . . . . ▶	<b>w</b>	0	<b>00</b>
<b>4 Total subtractions</b> (add line f through line w) . . . . . ▶	<b>4</b>	<	0 <b>00</b> >
<b>5</b> 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 <b>SOUTH CAROLINA INCOME SUBJECT TO TAX</b> ▶	<b>5</b>	21,892	<b>00</b>
<b>6</b> TAX on your South Carolina Income Subject to Tax (see SC1040TT) . . . . . ▶	<b>6</b>	1,007	<b>00</b>
<b>7</b> TAX on Lump Sum Distribution (attach SC4972) . . . . . ▶	<b>7</b>	00	
<b>8</b> TAX on Active Trade or Business Income (attach I-335) . . . . . ▶	<b>8</b>	00	
<b>9</b> TAX on excess withdrawals from Catastrophe Savings Accounts . . . . . ▶	<b>9</b>	00	
<b>10</b> Add line 6 through line 9 and enter the total here. This is your <b>TOTAL SOUTH CAROLINA TAX</b> . . . . . ▶	<b>10</b>	1,007	<b>00</b>



NON-REFUNDABLE CREDITS

Table with 5 rows for non-refundable credits (lines 11-15). Line 15 total: 1,007.00

PAYMENTS AND REFUNDABLE CREDITS

Table with 11 rows for payments and refundable credits (lines 16-22e). Line 22 total: 0.00

AMENDED RETURN: Use Schedule AMD for line 23 calculation.

Table with 3 rows for amended return (lines 23-25). Line 23 total: 2,159.00; Line 24 total: 1,152.00

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

Table with 6 rows for tax due and refund (lines 26-30). Line 29 total: 0.00; Line 30 total: 1,152.00

REFUND OPTIONS (subject to program limitations)

Form for refund options including choice (Direct Deposit checked), routing number (071921891), and bank account number (4668369236).

Table with 4 rows for tax due and balance due (lines 31-34). Line 34 total: 0.00

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.

Signature and preparer information section including signatures, dates, and firm name (GLOBAL TAXES LLC).

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