<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>5. Individual Income Tax</b>		(99) <b>urn</b>	202	0	OMB No.	1545-0	074 IRS	Use Only	—Do not w	rite or staple	in this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly U checked the MFS box, enter the norm is a child but not your dependent	ame of	-									
Your first name	and mi	ddle initial	Last na	ime							Your so	cial securi	ty number
HARI KUMAR			DODI	A							290-33-8592		
If joint return, spouse's first name and middle initial			Last name								Spouse's social security number		
SRAVANTHI			GOGULA							235-87-5175			5
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ons.					Apt. no		Presider	ntial Electi	on Campaigr
14150 SA	ANCTI	UARY COVE LANE							205			iere if you,	
City, town, or post office. If you have a foreign address, also co ORLANDO									IP code 32832		spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change		
Foreign country name				Foreign province/state/county For					Foreign postal code y		your tax	or refund.	_
												You	Spouse
At any time du	ring 20	20, did you receive, sell, send, excl	hange, c	or otherw	ise acquire	any fir	nancial ir	nterest	in any vi	tual cu	rrency?	Yes	🗙 No
Standard Deduction	_	eone can claim:  You as a de Spouse itemizes on a separate retur	•		Your spous dual-status		depend	ent					
Age/Blindness	You:	Were born before January 2, 1	956	Are bli	nd Spo	ouse:	🗌 Was	s born	before Ja	nuary 2	2, 1956	🗌 ls bl	lind
Dependents	s (see	instructions):		(2) S	ocial security	/	(3) Relat	ionship	(4	) 🗸 if qu	ualifies for	r (see instru	ictions):
If more	<b>(1)</b> Fi	irst name Last name			number		to y	ou	Ch	ld tax cr	redit	Credit for ot	her dependents
than four													
dependents, see instructions	s												
and check									Ĩ				
here 🕨 🗌													
Attach Sch. B if required.	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2 .							. 1	1	72,639.
	2a	Tax-exempt interest	2a			<b>b</b> Tax	xable int	erest			. 2b		
	3a	Qualified dividends	3a b Ordinary dividends					s		. 3b			
	4a	IRA distributions	4a			b Tax	xable am	nount .			. 4b		
	5a	Pensions and annuities	5a			<b>b</b> Tax	xable arr	nount .			. 5b		
Standard Deduction for— • Single or Married filing separately, \$12,400	6a	Social security benefits	6a			<b>b</b> Tax	xable am	nount .			. 6b		
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								. 🕨 🗌	7		
	8	Other income from Schedule 1, lin	e9.								. 8		
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is yo	ur total inco	ome					▶ 9	1	72,639.
<ul> <li>Married filing</li> </ul>	10	Adjustments to income:											
jointly or Qualifying widow(er), \$24,800	а	From Schedule 1, line 22						10a					
	b	Charitable contributions if you take	the star	ndard dec	duction. See	instru	ictions	10b		300	0.		
<ul> <li>Head of household, \$18,650</li> <li>If you checked</li> </ul>	с	Add lines 10a and 10b. These are	your to	tal adjus	tments to i	ncom	е				► 10c	;	300.
	11	Subtract line 10c from line 9. This is your adjusted gross income									▶ 11	1	72,339.
	12	Standard deduction or itemized deductions (from Schedule A)									. 12		24,800.
any box under Standard	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A									. 13		
Deduction, see instructions.	14	Add lines 12 and 13								. 14		24,800.	
	15	Taxable income. Subtract line 14	from lin	ne 11. lf z	ero or less,	enter	-0	<u> </u>	<u> </u>		. 15	1	47,539.
For Disclosure.	Privacy	Act, and Paperwork Reduction Act N	lotice, se	e separat	te instruction	ıs.						Form	n <b>1040</b> (2020)

Form 1040 (2020)	)			Page 2					
	16	Tax (see instructions). Check if any from Form(s):         1         8814         2         4972         3	16	24,039.					
	17	Amount from Schedule 2, line 3	17						
	18	Add lines 16 and 17	18	24,039.					
	19	Child tax credit or credit for other dependents	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, enter -0	22	24,039.					
	23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	0.					
	24	Add lines 22 and 23. This is your total tax	24	24,039.					
	25	Federal income tax withheld from:							
	а	Form(s) W-2							
	b	Form(s) 1099							
	с	Other forms (see instructions)							
	d	Add lines 25a through 25c	25d	23,515.					
If you have a	26	2020 estimated tax payments and amount applied from 2019 return	26						
qualifying child,	27	Earned income credit (EIC)							
attach Sch. EIC.	28	Additional child tax credit. Attach Schedule 8812							
nontaxable combat pay,	29	American opportunity credit from Form 8863, line 8							
see instructions.	30	Recovery rebate credit. See instructions							
	31	Amount from Schedule 3, line 13							
	32	Add lines 27 through 31. These are your total other payments and refundable credits	32	1,283.					
	33	Add lines 25d, 26, and 32. These are your total payments	33	24,798.					
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	759.					
nerana	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	759.					
Direct deposit?	►b	Routing number       X       X       X       X       X       X       X       X         Routing number       X       X       X       X       X       X       X       X       X							
See instructions.	►d	Account number X X X X X X X X X X X X X X X X X X X							
	36	Amount of line 34 you want applied to your 2021 estimated tax							
Amount	37	Subtract line 33 from line 24. This is the amount 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 Designee		you want to allow another person to discuss this return with the IRS? See	1	X No					
		ignee's Phone Personal identii ne ▶ no. ▶ number (PIN) ▶							
Sign	Un	der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to		t of mv knowledge an					
Here		ef, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							
nere	Yo			nt you an Identity					
	Ν		Protection PIN, enter it here (see inst.)						
Joint return? See instructions.	Sn		If the IRS sent your spouse an						
Keep a copy for	Op			ection PIN, enter it her					
your records.		SOFTWARE ENGINEER (see	inst.) 🕨						
	Ph	one no. Email address							
Paid	Pre	parer's name Preparer's signature Date PTIN		Check if:					
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/26/2021 P02083	2703	Self-employed					
Preparer Use Only	Fin	n's name  GLOBAL TAXES LLC Phor	ne no. (	678)965-9522					
	Firi	n's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm	's EIN 🕨	30-1017196					
Go to <i>www.ir</i> s.gc	v/Forn	1040 for instructions and the latest information. BAA REV 03/23/21 PRO		Form <b>1040</b> (2020					