E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

Filing Status Check only one box.	If yo	Single Married filing jointly uchecked the MFS box, enter the noon is a child but not your dependent	ame of	ried filing separately (M							
Your first name and middle initial				Last name					Your social security number		
VIJAILAL				MANGARATHIL				699-	699-89-3080		
If joint return, spouse's first name and middle initial				Last name					Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.			Apt. no.	Preside	ntial Electi	ion Campaign	
5330 BOND ST									nere if you		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete spaces below. State ZIF			code			ntly, want \$3		
IRVING				TX			5038		to go to this fund. Checking a box below will not change		
Foreign country name				Foreign province/state/o	county Fo		eign postal code		or refund		
								You	Spouse		
At any time du	ıring 20	020, did you receive, sell, send, excl	nange,	or otherwise acquire	any financial ir	nterest in	any virtual c	urrency?	Yes	⋉ No	
Standard Deduction		eone can claim:				ent					
Age/Blindness	s You:	☐ Were born before January 2, 1	956	Are blind Spo	use: Was	s born be	efore January	2. 1956	☐ Is b	lind	
Dependents				(2) Social security		$\overline{}$		•	r (see instru		
•		First name Last name number to you Child tax cre							ther dependents		
If more than four							П			$\overline{\Box}$	
dependents,										$\overline{\sqcap}$	
see instruction and check	s —			_						$\overline{\Box}$	
here ▶ □											
	. 1	Wages, salaries, tips, etc. Attach F	orm(s)) W-2				. 1		35,795.	
Attach	2a	Tax-exempt interest	2a 🗀		b Taxable into	erest		. 2b			
Sch. B if	За	Qualified dividends 3a b Ordinary dividends						. 3b			
required.	4a	IRA distributions									
	5a	Pensions and annuities	5a		b Taxable am	ount .		. 5b			
Standard Deduction for— • Single or Married filing separately, \$12,400	6a	Social security benefits	6a		b Taxable am	ount .		. 6b			
	7	Capital gain or (loss). Attach Sche	dule D	if required. If not requ	ired, check he	ere .	•	□ 7			
	8	Other income from Schedule 1, lin	e9.					. 8			
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inco	ome			▶ 9		35,795.	
 Married filing 	10	Adjustments to income:									
jointly or Qualifying	а	From Schedule 1, line 22				10a					
widow(er), \$24,800	b	Charitable contributions if you take	the sta	andard deduction. See	instructions	10b					
• Head of	С	Add lines 10a and 10b. These are	your t o	otal adjustments to ir	ncome			▶ 100	<u> </u>		
household, \$18,650	11	Subtract line 10c from line 9. This	is your	adjusted gross inco	me			▶ 11		35,795.	
If you checked	12	Standard deduction or itemized	deduc	tions (from Schedule	A)			. 12		12,400.	
any box under Standard	13	Qualified business income deduct	on. At	tach Form 8995 or For	rm 8995-A .			. 13			
Deduction, see instructions.	14	Add lines 12 and 13						. 14		12,400.	
	15	Taxable income. Subtract line 14	from li	ine 11. If zero or less,	enter -0			. 15		23,395.	

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

Form 1040 (2020)

16 17 18	Tax (see instructions). Check if any from Form(s): 1		2,608.								
18		. 17									
	Add lines 16 and 17										
	Add most out at 17	. 18	2,608.								
19	Child tax credit or credit for other dependents	. 19									
20	Amount from Schedule 3, line 7										
21	Add lines 19 and 20										
22	Subtract line 21 from line 18. If zero or less, enter -0		2,608.								
23			0.								
	Add lines 22 and 23. This is your total tax	▶ 24	2,608.								
25	Federal income tax withheld from:										
а		1.	l ,								
С											
		_	4,511.								
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	The state of the s										
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		_	1,952.								
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		37									
31											
	instructions										
Des	signee's Phone Personal ide	entification									
			, ,								
, 10			PIN, enter it here								
	SOFTWARE ENGINEER	(see inst.) ▶									
Spe		If the IRS sent your spouse an Identity Protection PIN, enter it here									
,		,									
		,,,,									
		I	Check if:								
			Self-employed								
		Phone no. (678)965-9522									
			Form 1040 (2020)								
			(222)								
	23 24 25 a b c d 26 27 28 29 30 31 32 33 34 35a b d 36 37 38 □ Do ins Des nan Unc beli You Spot Pho Firm Firm Firm Firm	Other taxes, including self-employment tax, from Schedule 2, line 10 Add lines 22 and 23. This is your total tax Federal income tax withheld from: Form(s) W-2 Other forms (see instructions) Add lines 25a through 25c Cother forms (see instructions) Add lines 25a through 25c 25c Cother forms (see instructions) Add lines 25a through 25c Cozo estimated tax payments and amount applied from 2019 return Earned income credit (EIC) Additional child tax credit. Attach Schedule 8812 Additional child tax credit. Attach Schedule 8812 American opportunity credit from Form 8863, line 8 Amount from Schedule 3, line 13 Add lines 27 through 31. These are your total other payments and refundable credits Add lines 25d, 26, and 32. These are your total payments If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid Amount of line 34 you want refunded to you. If Form 8888 is attached, check here Box Routing number X X X X X X X X X	23 Other taxes, including self-employment tax, from Schedule 2, line 10								