E1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		⁽⁹⁹⁾ 202	0	OMB No. 1	545-0074	IRS Use Onl	y—Do not w	rite or staple	in this space.	
Filing Status Check only	• X :		Marrie	d filing separately (,			ehold (HOH)	Qua	lifying wid	low(er) (QW)	
one box.	pers	on is a child but not your dependent	t 🕨						-			
Your first name	and m	iddle initial	Last nar	ne					Your so	cial securi	ty number	
PRERANA			SARO	DE					662-32-7425			
If joint return, spouse's first name and middle initial			Last nar	Last name						Spouse's social security number		
	`	er and street). If you have a P.O. box, see	instructio	ns.				Apt. no.			ion Campaign	
		O DR UNIT 374								here if you, if filing ioir	, or your ntly, want \$3	
City, town, or post office. If you have a foreign address, also comple								code	to go to	to go to this fund. Checking a		
SAN JOSE					-	CA				box below will not change your tax or refund.		
Foreign country	/ name			oreign province/state	coun	Sounty		Foreign postal code		You Spo		
At any time du	ring 20	020, did you receive, sell, send, exch	nange, o	r otherwise acquire	any	financial in	terest in	any virtual c	urrency?	Yes	X No	
Standard Deduction	_	eone can claim:	•				ent					
Age/Blindness	You	: 🗌 Were born before January 2, 1	956	Are blind Sp	ouse	: 🗌 Was	born be	fore January	2, 1956	Is b	lind	
Dependents	s (see			(2) Social securit	v	(3) Relation	onship	(4) 🗸 if c	qualifies for	r (see instru	uctions):	
If more		irst name Last name		number	·	to yo		Child tax of			ther dependents	
than four												
dependents,												
see instructions and check	5											
here 🕨 🗌												
	1	Wages, salaries, tips, etc. Attach F	orm(s) V	V-2					. 1	1	51,805.	
Attach	2a	Tax-exempt interest	2a		bт	axable inte	erest		. 2b			
Sch. B if	3a	Qualified dividends	3a		b C	Ordinary div	vidends		. 3b			
required.	4a	IRA distributions	4a			axable am			. 4b			
	5a	Pensions and annuities	5a		bТ	axable am	ount .		. 5b			
Standard	6a	Social security benefits	6a b Taxable amount						. 6b			
Deduction for –	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here										
 Single or Married filing 	8	Other income from Schedule 1, line				·			. 8		13.	
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							▶ 9	1	51,818.	
\$12,400Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22										
widow(er),	b	Charitable contributions if you take				1	10b	30	0.			
\$24,800 • Head of	c	Add lines 10a and 10b. These are							► 10c	2	300.	
household,	11										51,518.	
\$18,650 ! • If you checked	12	Subtract line 10c from line 9. This is your adjusted gross income									12,400.	
any box under	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A									, _00.	
Standard Deduction,	14	Add lines 12 and 13							. <u>13</u> . 14	-	12,400.	
see instructions.	15	Taxable income. Subtract line 14	from line	11. If zero or less	 ente	 er-0-					<u>12,100.</u> 39,118.	
Eor Disclosure		v Act and Paperwork Beduction Act N							. 10		n 1040 (2020)	

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17 Amount from Schedule 2, line 3 17 18 Add lines 16 and 17 18 27, 44 19 Child tax credit or credit for other dependents 19 20 Amount from Schedule 3, line 7 20 21 Subtract line 21 form line 18. If zero roless, enter -0. 22 22 Subtract line 21 form line 18. If zero roless, enter -0. 22 23 Add lines 22 and 23. This is your total tax 24 24 Add lines 22 and 23. This is your total tax 24 25 Federal income tax withheld from: 25a 26 Other forms (see instructions). 25a 25a 26, 946.5 25a 25a 26, 946.5 25a 25a 26, 946.5 25a 25a 25a 26, 946.5 25a 25a 25a 25a 25a 25a 25a 25a 25a 25a 26a 26a 25a 25a 26a 25a 25a 26a 25a 25a 25a 25a 25a	Form 1040 (2020	D)			Page 2					
18 Add lines 16 and 17. 18 27, 44 19 Child tax credit for credit for other dependents 19 19 20 Add lines 19 and 20. 21 Add lines 19 and 20. 21 21 Add lines 21 form line 18. If zero or less, enter -0. 22 22, 7, 44 23 Other taxes, including self-employment tax, from Schedule 2, line 10 23 24 24 Add lines 2 and 23. This is your total tax 24 27, 44 25 Federal income tax withheld from: 25 25, 94.6 26 Other forms (sea instructions) 25 26 26 27 Eamed income credit (EC) No 27 28 26, 94 28 Add lines 25 at through 25c 26 26 26 26 28 Add lines 25 at through 25c 28 26 30 30 30 29 Add lines 25 at through 25c 28 26 33 26, 94 30 29 Add lines 25 at through 25c 28 26 33 26, 94 30 29 Add lines 25 at through 25c 30 31		16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🗌 4972 3 🗌	16	27,468.					
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32 Add lines 27 through 31. These are your total other payments and refundable credits		30	Recovery rebate credit. See instructions							
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Amount You Owe For details on how to pay, see instructions. 37 Subtract line 33 from line 24. This is the amount you owe now 37 51 Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details. 38 Stimute taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details. 38 Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions. Yes. Complete below. No Designee's name ▶ Do you want to allow another person to discuss this return with the IRS? See instructions. Personal identification number (PIN) ▶ Image: No Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowled belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled your signature Joint return? See instructions. Keep a copy for your records. Spouse's signature. If a joint return, both must sign. Date Your occupation If the IRS sent your spouse ar Identity Protection PIN, enter (see inst.) ▶ Image: Stam Preparer's signature Phone no. Email address Preparer's signature Date PTIN P02082703 Self-emplo Preparer's name GLOBAL TAXES LLC Phone	See instructions.	►d								
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Designee instructions ✓ Yes. Complete below. ✓ No Designee's name Designee's name Phone no. Personal identification number (PIN) ✓ Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which prepar										
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