£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 son is a child but not your dependent | name of | | | | | | | | | | |
|--|---------|--|---------------|-------------------------------|------------|--------------|------------|-----------------------|------------|---|--------------------------------|---------------|--|
| Your first name and middle initial | | | | me | | | | | Yo | Your social security number | | | |
| DINESH | | | | VALLABHANENI | | | | | | 794-09-9370 | | | |
| If joint return, spouse's first name and middle initial | | | | me | | | | | Sp | Spouse's social security number | | | |
| | • | er and street). If you have a P.O. box, se | e instruction | ons. | | | | Apt. no. | - 1 | | | on Campaign | |
| | | L STREET | | | 10 | | 1 715 | <u> </u> | | | nere if you, if filina ioin | tly, want \$3 | |
| City, town, or post office. If you have a foreign address, also comple | | | | pplete spaces below. State | | | | | | | to go to this fund. Checking a | | |
| GILMER Foreign country name | | | | | | | | | | box below will not change your tax or refund. | | | |
| | | | | Foreign province/state/county | | | | Foreign postal code y | | You Spouse | | | |
| At any time du | ring 20 | 020, did you receive, sell, send, exc | change, c | or otherwise acquir | e any | financial in | iterest in | n any virtual | currer | ncy? | Yes | ⊠ No | |
| Standard Deduction | | eone can claim: | | | | • | ent | | | | | | |
| Age/Blindness | You | Were born before January 2, | 1956 | Are blind S | oouse | : Was | born b | efore Januar | y 2, 19 | 956 | ☐ Is bli | ind | |
| Dependents | s (see | instructions): | | (2) Social secur | ity | (3) Relati | onship | (4) 🗸 i | if qualifi | ies for | r (see instru | ctions): | |
| If more | | irst name Last name | | number to you | | | ou . | Child tax credi | | | 1 | | |
| than four | | | | | | | | | | | | | |
| dependents, see instruction | | | | | | | | | | | | | |
| and check | | | | | | | | | | | [| | |
| here ▶ 🗌 | | | | | | | | | | | [| | |
| | _1_ | Wages, salaries, tips, etc. Attach | Form(s) | W-2 | | | | | | 1 | | 20,900. | |
| Attach | 2a | Tax-exempt interest | 2a | | b T | axable inte | erest | | | 2b | | | |
| Sch. B if required. | 3a | Qualified dividends | 3a | | b (| Ordinary div | vidends | | | 3b | | | |
| | 4a | IRA distributions | 4a | | b T | axable am | ount . | | | 4b | | | |
| | 5a | Pensions and annuities | 5a | | b T | axable am | ount . | | | 5b | | | |
| Standard Deduction for— Single or | 6a | Social security benefits | 6a | | b T | axable am | ount . | | | 6b | | | |
| | 7 | Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □ | | | | | | | · 🗌 | 7 | | | |
| Married filing | 8 | Other income from Schedule 1, line 9 | | | | | | | 8 | | | | |
| separately, \$12,400 | 9 | Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income | | | | | | | | 9 | | 20,900. | |
| • Married filing jointly or Qualifying widow(er), \$24,800 | 10 | Adjustments to income: | | | | | | | | | | | |
| | а | From Schedule 1, line 22 | | | | | | | | | | | |
| | b | Charitable contributions if you take the standard deduction. See instructions 10b 300. | | | | | | | 300. | | | | |
| Head of | С | Add lines 10a and 10b. These are your total adjustments to income | | | | | | | • | 10c | ; | 300. | |
| household, \$18,650 | 11 | Subtract line 10c from line 9. This is your adjusted gross income | | | | | | | 11 | 2 | 20,600. | | |
| If you checked | 12 | Standard deduction or itemized | d deduct | ions (from Schedu | le A) | | | | | 12 | | 12,400. | |
| any box under Standard Deduction, see instructions. | 13 | Qualified business income deduction. Attach Form 8995 or Form 8995-A | | | | | | | 13 | | | | |
| | 14 | Add lines 12 and 13 | | | | | | | 14 | 1 | L2,400. | | |
| | 15 | Taxable income. Subtract line 1 | 4 from lin | e 11. If zero or less | s, ente | er -0 | | | | 15 | | 8,200. | |

| Form 1040 (2020 |)) | | | | | | | | | | Page 2 | |
|--|---|---|-----------------------|--|-------------------|---------|-------------|---------------------------|------------------------|---------------|---------------|--|
| | 16 | Tax (see instructions). Check | if any from Form | n(s): 1 881 | 4 2 🗌 4972 | 3 🗌 | | | 16 | | 823. | |
| | 17 | Amount from Schedule 2, lin | ne 3 | | | | | | 17 | | | |
| | 18 | Add lines 16 and 17 | | | | | | | 18 | | 823. | |
| | 19 | Child tax credit or credit for | other dependen | 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 | . If zero or less, | enter -0 | | | | | 22 | | 823. | |
| | 23 | Other taxes, including self-e | mployment tax, | from Schedule | e 2, line 10 . | | | | 23 | | 0. | |
| | 24 | Add lines 22 and 23. This is | your total tax | | | | | . ▶ | 24 | | 823. | |
| | 25 | Federal income tax withheld | | | | | | | | | | |
| | а | Form(s) W-2 | | | | 25a | 3 | ,619. | | | | |
| | b | Form(s) 1099 | | | | 25b | | | | | | |
| | С | Other forms (see instructions | | | | 25c | | | | | | |
| | d | Add lines 25a through 25c | , | | | | | | 25d | 3 | ,619. | |
| If you have a qualifying child, | 26 | 2020 estimated tax payment | | | | | | | 26 | | | |
| | 27 | Earned income credit (EIC) | | | | 27 | | | | | | |
| attach Sch. EIC. If you have | 28 | Additional child tax credit. A | | | | 28 | | | | | | |
| nontaxable | 29 | American opportunity credit | | 29 | | | | | | | | |
| combat pay, see instructions. | 30 | Recovery rebate credit. See | | • | | 30 | 1 | ,800. | | | | |
| | 31 | | | | | 31 | | , | | | | |
| | 32 | Amount from Schedule 3, line 13 | | | | | | | 32 | 1 | ,800. | |
| | 33 | Add lines 25d, 26, and 32. These are your total payments | | | | | | | 33 | | ,419. | |
| Defend | 34 | If line 33 is more than line 24 | | | | | | | 34 | | ,596. | |
| Refund | 35a | Amount of line 34 you want | • | | | • | - | ▶ □ | 35a | | ,596. | |
| Direct deposit? | ▶b | Routing number 0 1 1 | | | | Checkir | | Savings | | | , | |
| See instructions. | ▶d | | | | | | | | | | | |
| | 36 | Amount of line 34 you want applied to your 2021 estimated tax > 36 | | | | | | | | | | |
| Amount | 37 | Subtract line 33 from line 24. This is the amount you owe now | | | | | | | | | | |
| You Owe | 0. | Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for | | | | | | | | | | |
| For details on | | 2020. See Schedule 3, line 12e, and its instructions for details. | | | | | | | | | | |
| how to pay, see instructions. | 38 | Estimated tax penalty (see instructions) | | | | | | | | | | |
| Third Party | Do | | | | | See | | | | | | |
| Designee | Do you want to allow another person to discuss this return with the IRS? See instructions | | | | | | | | | | | |
| · · | Des | Designee's Phone Personal identifi | | | | | | | tification | | | |
| | nar | name ► no. ► number (PIN) ► | | | | | | | <u> </u> | | | |
| Sign | | der penalties of perjury, I declare t ief, they are true, correct, and com | | | | | | | | | | |
| Here | | ur signature | pioto. Boolaration | Date | acca on an | morman | | | nt you an Ide | _ | | |
| | , 101 | ur signature | Date Your occupation | | | | | | IN, enter it h | | | |
| Joint return? See instructions. Keep a copy for your records. | | | | | SOFTWARE ENGINEER | | | | e inst.) ► | | | |
| | Spo | ouse's signature. If a joint return, I | Date | tion | | | | nt your spou | | | | |
| | , | | | | | | | ntity Prot∈ e inst.) ▶ | ection PIN, e | enter it here | | |
| | Dhara as //220\040 //201 | | | Free de de la Contraction de l | | | | | 5 II ISt.) > | | | |
| | | one no. (630)240-669 | | Email address | DINESHNEN | | L.COM | | | Chaal: if: | | |
| Paid | | parer's name | | | | | | PTIN | Check if: | | | |
| Preparer | | PRIYA RAM SAGAR GUPTA TALLAM | | | | | | | 082703 Self-employed | | | |
| Use Only | | | | | | | | , | ne no. (678)965-9522 | | | |
| | | | | | | | n's EIN ▶ | : | | | | |
| Go to www.irs.go | ov/Forn | n1040 for instructions and the late | st information. | | BAA | REV 05 | 5/29/21 PRC | 1 | | Form 1 | 1040 (2020) | |