£1040

Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return

2020

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

Filing Status Check only		Single Married filing jointly bu checked the MFS box, enter the	_	ed filing separately	•	_		•	. –	_			,
one box.		son is a child but not your depende		our spouse. If you	CHEC	ked the no	n or Q	v box, ente	er trie	Cilliu S	пашепт	ne qualilyi	ng
Your first name			Last na	me					١	our so	cial secur	ity number	_
MATHEW	VIJA	Y KUMAR	GEOR	.GE							97-290	-	
If joint return, s	pouse's	s first name and middle initial	Last na	me					5	Spouse'	s social se	ecurity num	ber
Home address	(numbe	er and street). If you have a P.O. box, se	e instruction	ons.				Apt. no.	F	reside	ntial Elect	ion Campa	ign
951 HIG	H PA'	TH ROAD						951			nere if you		• •
City, town, or p	oost offi	ce. If you have a foreign address, also	complete s	oaces below.	St	ate	ZIP	code			0,	intly, want \$. Checking	
WINDSOR					C	Т	0.6	5095			ow will no		u
Foreign countr	y name		F	oreign province/state	cour/	nty	For	eign postal co	ode)	our tax	or refund		
											You	Spot	ıse
At any time du	ıring 20	020, did you receive, sell, send, ex	change, c	r otherwise acquire	e any	financial in	terest ir	n any virtua	al curr	ency?	Yes	⋈ No	
Standard	Som	neone can claim: You as a d	lependent	Your spou	se as	a depende	nt						_
Deduction		Spouse itemizes on a separate retu	ırn or you	were a dual-status	alie	n							
Age/Blindnes	s You	: Were born before January 2,	1956	Are blind Sp	ous	e: Was	born b	efore Janua	ary 2,	1956	☐ Is b	olind	
Dependent	_			(2) Social securi	tv	(3) Relation	nship	(4) 🗸	if qua	lifies fo	r (see instr	uctions):	_
If more	•	irst name Last name		number to you				Child tax cre		1		ther depende	ents
than four													_
dependents, see instruction													
and check	5												
here ►								[
	1	Wages, salaries, tips, etc. Attach	Form(s) \	V-2						1		86,045	
Attach Sch. B if	2a	Tax-exempt interest	2a		b	Taxable inte	rest			2b			
required.	3a	Qualified dividends	3a	22.	b (Ordinary div	idends			3b		22	<u>. </u>
	4a	IRA distributions	4a		b ⁻	Taxable amo	ount .			4b			
	5a	Pensions and annuities	5a			Taxable am				5b			
Standard Deduction for—	6a	Social security benefits	6a			Taxable am				6b			
• Single or	7	Capital gain or (loss). Attach Sch		•	•	,	е.	!	▶ □	7		90	
Married filing separately,	8	Other income from Schedule 1, I								8	+	<u>-6,500</u>	_
\$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8. T	his is your total in	come				. ▶	9	-	79,657	·
 Married filing jointly or 	10	Adjustments to income:				1							
Qualifying widow(er),	а	From Schedule 1, line 22								-			
\$24,800	b	Charitable contributions if you tak				-	10b			- 10			
 Head of household, 	С	Add lines 10a and 10b. These are	•	-						100	_	70 (57	
\$18,650	11	Subtract line 10c from line 9. This	•	-						11		79,657	_
 If you checked any box under 	12	Standard deduction or itemize		,	,					12		12,400	-
Standard Deduction,	13	Qualified business income deduc	on. Atta	cn Form 8995 or F	orm	. А-сево				13	_	12 400	—
see instructions.	14 15	Add lines 12 and 13								14		12,400 67,257	<u>. </u>
	13	raxable income. Subtract line I	4 110111 1111	e i i. ii zeio or less	, ent	U -U				15	1	01,231	•

Form 1040 (2020))									Page	2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	10,583	
	17	Amount from Schedule 2, lin	e3						17		
	18	Add lines 16 and 17							18	10,583	
	19	Child tax credit or credit for	other dependen	ts					19		
	20	Amount from Schedule 3, lin	e7						20		
	21	Add lines 19 and 20							21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	10,583	
	23	Other taxes, including self-en	mployment tax,	from Schedule	e 2, line 10 .				23	0	
	24	Add lines 22 and 23. This is	your total tax					. 1	24	10,583	
	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a	13	,718			
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c	•						25d	13,718	
If you have a	26	2020 estimated tax payment	s and amount a	pplied from 20	119 return				26		
qualifying child,	27	Earned income credit (EIC)				27					_
attach Sch. EIC.	28	Additional child tax credit. A				28					
nontaxable	29	American opportunity credit	from Form 8863	B. line 8		29					
combat pay, see instructions.	30	Recovery rebate credit. See		•		30					
	31	Amount from Schedule 3, lin				31					
	32	Add lines 27 through 31. The					edits	. 1	> 32	1	
	33	Add lines 25d, 26, and 32. T	•							13,718	_
	34	If line 33 is more than line 24							34	3,135	_
Refund	35a					-	_	▶ [, 	3,135	_
Direct deposit?	▶b									3,133	_
See instructions.	▶d	Account number 9 0 2						Javing			
	36	Amount of line 34 you want a			ed tax	36	Τ΄				
Amount	37	Subtract line 33 from line 24						_	> 37		_
You Owe	31			•							
For details on		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.									
how to pay, see instructions.	38	Estimated tax penalty (see in	-			38					
Third Party		you want to allow another									
Designee		structions	•				Yes. Co	mplet	e below.	× No	
_ 00.g00	De	signee's		Phone					ntification		_
		me ▶		no. 🕨				er (PIN			
Sign		der penalties of perjury, I declare the									
Here		lief, they are true, correct, and com	plete. Declaration of				all information			, ,	∂.
	Yo	ur signature		Date	Your occupation					nt you an Identity IN, enter it here	
Joint return?					ENGINEER				ee inst.)	IN, enter it here	\neg
See instructions.	Sp	ouse's signature. If a joint return, b	ooth must sign.	Date	Spouse's occupa	ation		If	the IRS se	nt your spouse an	_
Keep a copy for		, -						Ic	entity Prot	ection PIN, enter it h	ere
your records.								(s	ee inst.) ►		
		one no. (919)949-006	8	Email address	GEORGEMATHE	WVIJAY	@GMAIL.CC				
Paid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:	
Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA_TALLA	M 09/	16/2021	P020	82703	Self-employed	
Use Only	Fin	m's name ► GLOBAL TAX	KES LLC					Р	hone no.	(678)965-952	2
Use Only	Fin	m's address ▶ 2530 Pebb	le Creek L	n Cummin	g GA 30041			F	rm's EIN I	> 30-101719	6
Go to www.irs.go	ov/Forr	n1040 for instructions and the lates	st information.		BAA	REV	07/28/21 PRO			Form 1040 (20	120)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

MATHEW VIJAY KUMAR GEORGE

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 347-97-2901

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2 a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-6,500.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ▶		
		8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	C
Par	t II Adjustments to Income	9	-6,500.
		10	
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	_

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

Capital Gains and Losses

► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/ScheduleD for instructions and the latest information.

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2020

Attachment Sequence No. **12**

Name(s) shown on return Your social security number 347-97-2901 MATHEW VIJAY KUMAR GEORGE Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 2,485. 2,940. 545. 90. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 90. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15

BAA

Schedule D (Form 1040) 2020 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 90. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information.

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2020 Attachment Sequence No. 12A

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Part I

Social security number or taxpayer identification number

347-97-2901

MATHEW VIJAY KUMAR GEORGE

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see

instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss). (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired (sales price) from column (d) and disposed of and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (g) instructions Robinhood Securities LLC 01/01/20 06/10/20 2,485. 2,940. W 545 90. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

2,485.

90.

545.

Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

above is checked), or line 3 (if Box C above is checked) ▶

2,940.

SCHEDULE E

Department of the Treasury

(Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

2020 Attachment Sequence No. 13

OMB No. 1545-0074

Internal Revenue Service (99) Go to www
Name(s) shown on return

▶ Go to www.irs.gov/ScheduleE for instructions and the latest information.

Your social security number

MATH	EW VIJAY KUMAR	GEORGE					34	17-97-	290	1	
Part	Income or Loss	s From Rental Real Estate and Ro	yalties	Note: If y	ou are in	the business	of renti	ng perso	nal p	roperty,	use
	Schedule C. See	instructions. If you are an individual, rep	ort farn	n rental incon	ne or los	s from Form 4	835 on	page 2,	line 4	10.	
		nts in 2020 that would require you to								Yes 🗵	No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?								Yes 🗌	No
1a	Physical address of	each property (street, city, state, ZIF	P code	·)							
A	Renigunta HYDE	RABAD TELANGANA IN 5175	20								
B											
C											
1b	Type of Property	2 For each rental real estate pro	perty li	sted	F	air Rental	Per	sonal U	lse	Q	JV
	(from list below)	above, report the number of fa personal use days. Check the	QJV b	ox onlv.——		Days		Days			
A	3	if you meet the requirements to	o file a	sa A	_	365		0		L	
B		qualified joint venture. See ins	truction		_					L	
<u>C</u>				С						L	
	of Property:										
_	le Family Residence	3 Vacation/Short-Term Rental				elf-Rental					
	ti-Family Residence	4 Commercial		yalties		her (describe	•				
Incom		Properties:		Α			3			С	
3			3		650	•					
4			4								
Expen			_								
5			5								
6	,	nstructions)	6		1 550						
7		nance	7		1,550	•					
8			8								
9			9								
10		essional fees	10								
11			11								
12		d to banks, etc. (see instructions)	12								
13			13		1 600						
14			14		$\frac{1,600}{1,600}$	_					
15			15		1,600	•					
16			16		0 400						
17			17	•	2,400	•					
18		e or depletion	18								
19		lines 5 through 19	19		7 1 5 0						
20	•	•			7,150	•					
21		line 3 (rents) and/or 4 (royalties). If									
	file Form 6198	instructions to find out if you must	21	_	6,500						
00		l estate loss after limitation, if any,	21		0,300	•					
22	on Form 8582 (see in		22	1 _6	5,500.)(١
23a		eported on line 3 for all rental prope		, -0	23		61	50.			,
b		eported on line 4 for all royalty prop			23	_	0.	30.			
C		eported on line 4 for all royalty properties			23	_					
d		eported on line 12 for all properties			23						
e		eported on line 20 for all properties			23		7,1	5.0			
24		e amounts shown on line 21. Do no		de anvilose			,,1	24			
25	•	e amounts shown on line 21. Bo ha esses from line 21 and rental real estate		-		otal losses ha	re	25 (<u> </u>	500.)
							F	20 (0,	,,,,,
26		ate and royalty income or (loss). V, and line 40 on page 2 do not									
		40), line 5. Otherwise, include this a						26		-6	,500.

Form CT-1040 Required Fields

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

Each page of each form submitted to DRS must include the following automatically populated fields:

- 1. **Document Identification Numbers** Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 4.)
- 2. **Social Security Number -** The Social Security Number must appear at the top of Form CT-1040, Pages 2, 3, and 4
- 3. In addition, the following **Checklist for filing your Connecticut income tax return** must be included when hard copies of the form are printed. Taxpayers should not send the checklist to DRS with the return.

Do not send this sheet with your return.

Checklist for filing your Connecticut income tax return:

- 1. Be sure that Page 1 of your return is not printed on the back of this sheet.
- 2. Verify that the address lines on the return are correct and proper abbreviations are used.
- 3. If the Employer or Payer's Federal ID # is not listed on Page 2, Lines 18a through 18e, Column A, **all** withholding claimed will be disallowed and your return will not be successfully processed.
- 4. Do not attempt to remove or modify the solid boxes that print out on your return. Altering target marks may affect the processing of your return.
- 5. Do not send "Draft" or "Unapproved" versions of your return. This will delay or stop the processing of your return.
- 6. Do not make manual (hand written or typed) corrections to your return; this is a machine readable return. Changes may only be made by reentering information in your software and re-printing the return.
- 7. Do not use this return to change or amend previously filed returns. You must use Form CT-1040X to change or amend a previously filed Connecticut income tax return. (File Form CT-1040X electronically at www.ct.gov/TSC using the Taxpayer Service Center.)
- 8. Do not attach or send copies of forms W-2 or 1099.
- 9. Send **all** completed pages of CT-1040, Schedule CT-EITC, Supplemental Schedule CT-1040WH, Schedule CT-IT Credit, Schedule CT-PE, and Form CT-6251. Send **all** four pages of your completed return, both pages of your completed CT-EITC schedule, and any other supporting schedules.
- 10. Make check payable to: Commissioner of Revenue Services
- 11. To ensure proper posting, write your SSN(s) (optional) and "2020 Form CT-1040" on your check.
- 12. To mail your return, use the following addresses:

For all tax returns with payment:

Department of Revenue Services

PO Box 2977

Hartford CT 06104-2977

For refunds and tax returns without payment:

Department of Revenue Services

PO Box 2976

Hartford CT 06104-2976

- 13. Verify that all fields print completely and any preparer information is filled out and legible before filing this return. If you find any errors, do not make manual changes. Re-enter information in your software and re-print the return.
- 14. If you wish to directly deposit a refund into a checking or savings bank account, confirm that Lines 25a through 25d have been completed. You **must** enter bank information on both the federal and Connecticut returns for each to be correctly deposited.
- 15. When making payment using Form CT-1040V, **DO NOT** attach copies of your previously filed Form CT-1040.

Do not send this sheet with your return.

Revised: 11/05/2020



10401220V011555



Form CT-1040 - 2020

Connecticut Resident Income Tax Return (Rev. 12/20)

Page 1 of 4

Other tax year, beginning: and ending:

Y S N FJ N MFS N HOH N QW

347 - 97 - 2901 - -

MATHEW VIJAY KU GEORGE N Dec.

N Dec.

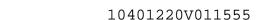
951 HIGH PATH RD N CT-8379 N CT-2210

APT 951 N CT-1040 CRC N Federal Form 1310

WINDSOR CT 06095 -

1. Federal adjusted gross income (from federal Form 1040, Line 11, or federal Form 1040-SR, Line	11) 1.	79657
2. Additions to federal adjusted gross income (from Schedule 1, Line 38)	2.	0
3. Add Line 1 and Line 2	3.	79657
4. Subtractions from federal adjusted gross income (from Schedule 1, Line 50)	4.	0
5. Connecticut adjusted gross income: Line 4 subtracted from Line 3.	5.	79657
6. Income tax	6.	4032
7. Credit for income taxes paid to qualifying jurisdictions (from Schedule 2, Line 59)	7.	0
8. Line 7 subtracted from Line 6. If Line 7 is greater than Line 6, "0" is entered.	8.	4032
9. Connecticut alternative minimum tax (from Form CT-6251)	9.	0
10. Add Line 8 and Line 9.	10.	4032
11. Credit for property taxes paid on your primary residence, motor vehicle, or both (from Schedule 3, Lin	e 68) 11.	0
12. Line 11 subtracted from Line 10. If less than zero, "0" is entered.	12.	4032
13. Total allowable credits (from Schedule CT-IT Credit, Part 1, Line 11)	13.	0
14. Connecticut income tax: Line 13 subtracted from Line 12. If less than zero, "0" is entered.	14.	4032
15. Individual use tax (from Schedule 4, Line 69). If no tax is due, "0" is entered.	15.	0
16. Total tax: Add Line 14 and Line 15.	16.	4032





347

Form CT-1040, Page 2 of 4

17.

10401220V021555



347972901

22.

4032

17. Amount from Line 16

Forms W-2, W-2G, and 1099 Information

18a.	47 - 1300816	•	86045	4379
18b.	-	•	0	0
18c.	-	•	0	0
18d.	-	•	0	0
18e.	-	•	0	0

18f. Additional Connecticut withholding (from Supplemental Schedule CT-1040WH, Line 3) 18f. 0

18. Total Connecticut income tax withheld: Amounts in Column C.	18.	4379
19. All 2020 estimated tax payments and any overpayments applied from a prior year	19.	0
20. Payments made with Form CT-1040 EXT	20.	0
20a. Earned income tax credit (from Schedule CT-EITC, Line 16).	20a.	0
20b. Claim of right credit (from Form CT-1040 CRC, Line 6).	20b.	0
20c. Pass-through entity tax credit: (from Schedule CT-PE, Line 1). Schedule must be attached.	20c.	0
21. Total payments and refundable credits: Add Lines 18, 19, 20, 20a, 20b and 20c.	21.	4379

23. Amount of Line 22 you want applied to your 2021 estimated tax 23. 0 24. Reserved for future use 24.

24a. Total contributions of refund to designated charities (from Schedule 5, Line 70) 24a. 0

25. 25. Refund: Lines 23, 24, and 24a subtracted from Line 22. 347

If you have not elected to direct deposit, a refund check will be issued and processing may be delayed.

25a. Acct. type Υ Ck. N Sv. 25b. Rout. # 031300012 25c. Acct. # 9022581337

25d. Refund going to a bank account outside the U.S. 25d. N

22. Overpayment: If Line 21 is more than Line 17, Line 17 subtracted from Line 21.

26. Tax due: If Line 17 is more than Line 21, Line 21 subtracted from Line 17. 26. 0 27. If late: Penalty entered. Line 26 multiplied by 10% (.10). 27. 0 28. If late: Interest entered. Line 26 multiplied by number of months or fraction of a month late, then by 1% (.01). 28. 0 29. Interest on underpayment of estimated tax (from Form CT-2210) 29. 0 30. 30. Total amount due: Add Lines 26 through 29. 0.00

Declaration: I declare under penalty of law that I have examined this return and all accompanying schedules and statements, including reporting and payment of any use tax due, and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for willfully delivering a false return or document to DRS is a fine of not more than \$5,000, or imprisonment for not more than five years, or both. The declaration of a paid preparer other than the taxpayer is based on all information of which the preparer has any knowledge.

Your signature	Date	Home/cell telephone number			
•	•	9199490068			
Spouse's signature (if joint return)	Date	Daytime telephone number			
•		•	•		
Paid preparer's signature	Date	Telephone number	Paid Preparer's PTIN		
•SYAM PRIYA RAM SAGAR GUPT	•091621	• 6789659522	P02082703		
Paid preparer's name	•		FEIN		
SYAM PRIYA RAM SAGAR GUPT	TALL		301017196		
Firm's name, address and ZIP code GLOBAL TAXES	LLC		Self-employed		
• 2530 PEBBLE CREEK LN CUM	MING G	A 30041 -	N		

Third Party Designee - Complete the following to authorize DRS to contact another person about this return.

Designee's name	Telephone number	Personal identification number (PIN)
•	•	·

Form CT-1040, Page 3 of 4

10401220V031555



• 347972901

Schedule 1 - Modifications to Federal Adjusted Gross Income				
31. Interest on state and local government obligations other than Connect			31.	0
32. Mutual fund exempt-interest dividends from non-Connecticut state or i		government	01.	· ·
obligations		y	32.	0
33. Taxable amount of lump-sum distributions from qualified plans not incl	uded in fed	deral adjusted		
gross income			33.	0
34. Beneficiary's share of Connecticut fiduciary adjustment: Entered only	if greater th	han zero.	34.	0
35. Loss on sale of Connecticut state and local government bonds			35.	0
36. Section 168(k) federal bonus depreciation deduction allowed for property	placed in s	service during this year.	36.	0
36a. 80% of Section 179 federal deduction.			36a.	0
37. Other - specify ●			37.	0
38. Total additions: Add Lines 31 through 37.			38.	0
39. Interest on U.S. government obligations			39.	0
40. Exempt dividends from certain qualifying mutual funds derived from U	_	-	40.	0
41. Social Security benefit adjustment (from Social Security Benefit Adjust	ment Worl	ksheet)	41.	0
42. Refunds of state and local income taxes			42.	0
43. Tier 1 and Tier 2 railroad retirement benefits and supplemental annuiti	es		43.	0
44. Military retirement pay			44.	0
45. 25% of income received from Connecticut Teachers' Retirement Syste			45.	0
46. Beneficiary's share of Connecticut fiduciary adjustment: Entered only	it less than	zero.	46.	0
47. Gain on sale of Connecticut state and local government bonds			47.	0
48. CHET contributions made in 2020 or an excess carried forward from a prior year Acct. #:			40	0
an excess carried forward from a prior year Acct. #:			48.	U
48a. 25% of Section 168(k) federal bonus depreciation deduction added ba	ack in prec	eding three years	48a.	0
48b. 28% of pension or annuity income.	20K III P100	•	48b.	0
49. Other - specify ●			49.	0
50. Total subtractions: Add Lines 39 through 49.			50.	0
Schedule 2 - Credit for Income Taxes Paid to Qualifying Jurisdictions	3			
51. Modified Connecticut adjusted gross income			51.	0
		Col. A		Col. B
		301. A		30i. B
52. Qualifying jurisdiction's name and two-letter code 52.				
FO New Compositions in composition to the composition of any design of the composition of				
53. Non-Connecticut income included on Line 51 and reported on a	E2	0		0
qualifying jurisdiction's income tax return (from Schedule 2 worksheet)	53.	0		0
54. Line 53 divided by Line 51	54.	0.0000		0.0000
55. Income tax liability: Line 11 subtracted from Line 6.	55.	0		0
56. Line 54 multiplied by Line 55	56.	0		0
30. Line 34 multiplied by Line 33	30.	O		O
57. Income tax paid to a qualifying jurisdiction	57.	0		0
	=-	_		_
58. Lesser of Line 56 or Line 57	58.	0		0
59. Total credit: Add Line 58, all columns.			59.	0
,				_

Form CT-1040, Page 4 of 4





• 347972901

Schedule 3 - Property Tax Credit

	N	65 years or older	N	One or more depende	ents on fed	deral r	eturn
Qualifying Property Name of Connecticut Tax Town or District Description of Property Date(s) Paid	t •	Primary Residence	•	Auto 1	•		Auto 2
Amount Paid	60.	0	61.	0	62.		0
63. Total property tax paid: Add Lines 60), 61, a	and 62.			63.		0
64. Maximum property tax credit allowed					64.	•	200
65. Lesser of Line 63 or Line 64.					65.	•	0
66. Property tax credit limitation decimal at	mount	: If zero, the amount from	Line 65	is entered on Line 68.	66.	•	0.00
67. Line 65 multiplied by Line 66.					67.	•	0
68. Line 67 subtracted from Line 65.					68.		0
Schedule 4 - Individual Use Tax 69a. Use tax at 1% (from Connecticut Inc	dividu	al I Isa Tay Warkshaat Sa	oction A	Column 7)	69a.		0
69b. Use tax at 6.35% (from Connecticut					69b.		0
69c. Use tax at 7.75% (from Connecticut	Indiv	idual Use Tax Worksheet,	Section	n C, Column 7)	69c.		0
69d. Use tax at 2.99% (from Connecticut	Indiv	idual Use Tax Worksheet,	Section	n D, Column 7)	69d.		0
69. Individual use tax: Add Lines 69a, 6 Schedule 5 - Contributions to Designa					69. •		0
70a. AR					70a.		0
70b. OT					70b.		0
70c. ES/W					70c.		0
70d. BCR					70d.		0
70e. SNS					70e.		0
70f. MR					70f.		0
70g. CBS					70g.		0
70h. MHCIA					70h.		0
70. Total Contributions: Add Lines 70. Taxpayer email	a thro	ugh 70h.			70.		0