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

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

Filing Status Check only one box.	If yo	Single Married filing jointly unchecked the MFS box, enter the noon is a child but not your dependent	ame of y									
Your first name and middle initial			Last na	me				Your so	Your social security number			
KARTIK I	DEEP	AK	SHIR	RKE				073-99-4473				
If joint return, spouse's first name and middle initial			Last name				Spouse's social security number					
Home address (number and street). If you have a P.O. box, see 321 ESSEX STREET							Apt. no.	Presidential Election Campaign Check here if you, or your				
City, town, or post office. If you have a foreign address, also con HARRISON							code 7029	spouse if filing jointly, was to go to this fund. Checki box below will not change				
Foreign country name			Foreign province/state/county Foreign postal co				eign postal code		x or refund.			
At any time du	ring 20	020, did you receive, sell, send, excl	nange, c	or otherwise acquire	any financial i	nterest ir	n any virtual c	urrency?	☐ Yes	⊠ No		
Standard Deduction		eone can claim:		a total	99	ent						
Age/Blindness	You:	☐ Were born before January 2, 1	956	Are blind Spo	use: 🗌 Wa	s born be	efore January	2, 1956	☐ Is bl	lind		
Dependents If more		instructions): irst name Last name		(2) Social security number	(3) Relat	The same of the sa	(4) ✓ if of the control of the cont	A STATE OF THE STA	or (see instru Credit for ot	ictions): her dependents		
than four												
dependents,									Ī			
see instructions and check	s –—											
here ▶ □												
	1	Wages, salaries, tips, etc. Attach F	Form(s) \	W-2				. 1	,	54 , 818.		
Attach	2a	Tax-exempt interest	2a		b Taxable int	erest		. 2b)			
Sch. B if required.	3a	Qualified dividends	3a		b Ordinary di	vidends		. 3b	,			
required.	4a	IRA distributions	4a		b Taxable an	nount .		. 4b)			
	5a	Pensions and annuities	5a		b Taxable an	nount .		. 5b)			
Standard Deduction for—	6a	Social security benefits	6a		b Taxable an	nount .		. 6b)			
	7	Capital gain or (loss). Attach Sche	dule D if	required. If not requ	ired, check he	ere .	🕨	□ 7				
Single or Married filing	8	Other income from Schedule 1, lin	e9.					. 8				
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your total inco	me			▶ 9	Ţ	54,818.		
Married filing	10	Adjustments to income:										
jointly or Qualifying	a	From Schedule 1, line 22				10a	2,50	0.				
widow(er),	b	Charitable contributions if you take	the stan	dard deduction. See	instructions	10b						
\$24,800 • Head of	C	Add lines 10a and 10b. These are	your tot	al adjustments to in	ncome			▶ 10	С	2,500.		
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted gross inco	me			▶ 11	11	52,318.		
If you checked	12	Standard deduction or itemized	deducti	ions (from Schedule	A)			. 12	2	12,400.		
any box under Standard	13	Qualified business income deduct	ion. Atta	ch Form 8995 or For	m 8995-A .			. 13				
Deduction, see instructions.	14	Add lines 12 and 13						. 14		12,400.		
occ morractions.	15	Taxable income. Subtract line 14	from lin	e 11. If zero or less,	enter -0			. 15	5 3	39,918.		

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

Form 1040 (2020)

Form 1040 (2020))								Pa	age 2
	16	Tax (see instructions). Check if any from Form	n(s): 1 881	4 2 4972	3 🗌		16		4,59	4.
	17	Amount from Schedule 2, line 3					17			
	18	Add lines 16 and 17					18		4,59	$\overline{4}$.
	19	Child tax credit or credit for other depender	nts				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		4,59	4.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 10			23			0.
	24	Add lines 22 and 23. This is your total tax				. ▶	24		4,59	
	25	Federal income tax withheld from:								
	a	Form(s) W-2			25a 8	,013.				
	b	Form(s) 1099			25b				•	
	C	Other forms (see instructions)			25c					
	d	Add lines 25a through 25c					25d		8,01	3.
	26	2020 estimated tax payments and amount a					26	7		
 If you have a qualifying child, 	27	Earned income credit (EIC)			27					
attach Sch. EIC.	28	Additional child tax credit. Attach Schedule			28					
nontaxable	29	American opportunity credit from Form 886			29					
combat pay, see instructions.	30	Recovery rebate credit. See instructions .			30	7	1			
	31	Amount from Schedule 3, line 13			31					
	32	Add lines 27 through 31. These are your tot	al other paym	ents and refunda	ble credits	. ▶	32			
	33	Add lines 25d, 26, and 32. These are your to	otal payments			. •	33		8,01	 3.
Defined	34	If line 33 is more than line 24, subtract line 2					34		3,41	
Refund	35a	Amount of line 34 you want refunded to yo				▶ □	35a		3,41	
Direct deposit?	▶b	Routing number 0 2 1 2 0 2 3		▶ c Type: 🔀		Savings				
See instructions.	▶d	Account number 7 0 9 2 3 5 3	6 5			Ü				
	36	Amount of line 34 you want applied to your	2021 estimate	ed tax ►	36					
Amount	37	Subtract line 33 from line 24. This is the am	ount you owe	now		. ▶	37			
You Owe		Note: Schedule H and Schedule SE filers,	line 37 may r	not represent all o	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) .			38					
Third Party		you want to allow another person to dis	cuss this retur	rn with the IRS?						
Designee		instructions					× No			
		signee's me ▶	Phone no. ▶			onal identi ber (PIN)			$\overline{}$	\Box
Ciana		der penalties of perjury, I declare that I have examin		d accompanying sche				t of my kr		a and
Sign		ief, they are true, correct, and complete. Declaration								
Here	Yo	ur signature	Date	Your occupation				nt you an I		
	k							N, enter it	here	
Joint return? See instructions.			2	COMPUTER SYS			inst.) ▶			Ш
Keep a copy for	Sp	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	on			nt your spo ection PIN		here
your records.						0.000.000.000	inst.) ▶			\Box
	Ph	one no.	Email address							
Paid Preparer Use Only	Pre	eparer's name Preparer's signa	ture		Date	PTIN		Check if:		
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/22/2021	P0208	2703	Self	-employ	ed
	Fire	Firm's name ► GLOBAL TAXES LLC					ne no. (678)9	65 - 95	22
	Fire	m's address ▶ 2530 Pebble Creek I	Ln Cummin	g GA 30041		Firm	's EIN ▶	30-1	10171	96
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information.		BAA	REV 01/15/21 PRO)		Form	1040	(2020)

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

KARTIK DEEPAK SHIRKE

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

► 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 073-99-4473

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	1		
2 a	Alimony received	2a		
b	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	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		
Par	t II Adjustments to Income	5		
		40		
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	2 , 500.	
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	2,500.	