E 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			_	ed filing separately		_		,	. —	_		. , . ,
one box.		u checked the MFS box, enter the son is a child but not your depende		your spouse. If you	chec	ked the HOI	H or Q\	V box, ente	r the c	:hild's	name if t	he qualifying
Your first name	and m						Y	Your social security number				
PURUSHOTTHAM GAN				PATHITEKMAL	ı				0	043-65-3980		
If joint return, spouse's first name and middle initial Last n				me					Sı	Spouse's social security number		
PRASHANTHI GAN.				ANAPATHITEKMAL					9	956-90-5894		
Home address	(numbe	er and street). If you have a P.O. box, se	ee instruction	ons.				Apt. no.	P	reside	ntial Elect	ion Campaign
1441 BO	NHAM	PRWY									nere if you	
City, town, or p	ost offi	ce. If you have a foreign address, also	complete s	paces below.	Sta	ite	ZIP	code code			0,	ntly, want \$3
LANATAN.	A			TX			76			to go to this fund. Checking a box below will not change		
Foreign countr	y name		F	Foreign province/state/county			For	Foreign postal code		our tax	or refund	l.
											You	Spouse
At any time du	ıring 20	020, did you receive, sell, send, ex	change, o	or otherwise acquire	e any	financial int	erest ir	n any virtua	l curre	ncy?	Yes	⊠ No
Standard Deduction	_	eone can claim:	•				nt					
Deduction	;	Spouse itemizes on a separate retu	urn or you	were a dual-status	s aller	1						
Age/Blindnes	s You	Were born before January 2,	1956	Are blind Sp	oouse	: Was	born b	efore Janua	ıry 2, 1	956	☐ Is b	olind
Dependent	s (see	instructions):		(2) Social securi	ty	(3) Relatio	nship	(4) 🗸	if quali	qualifies for (see instructions):		
If more	(1) F	irst name Last name		number to you			ı	Child tax cred			Credit for o	ther dependents
than four												
dependents, see instruction	s ——											
and check	<u> </u>											
here ►												
•	_1_	Wages, salaries, tips, etc. Attach	Form(s) \	N-2						1		41,888.
Attach Sch. B if	2a	Tax-exempt interest	2a		b 7	axable inter	rest			2b		
required.	3a_	Qualified dividends	3a		b (Ordinary divi	dends			3b		
· · · · · · · · · · · · · · · · · · ·	4a	IRA distributions	4a		b 7	axable amo			4b			
	5a	Pensions and annuities	5a		b 7	axable amo	unt .			5b		
Standard Deduction for—	6a	Social security benefits	6a			axable amo				6b		
• Single or	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □								7		
Married filing separately,	8	Other income from Schedule 1, line 9								8		
\$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9		41,888.
 Married filing jointly or 	10	Adjustments to income:				1	. 1					
Qualifying	а	From Schedule 1, line 22								_		
widow(er), \$24,800	b	Charitable contributions if you take the standard deduction. See instructions 10b										
 Head of household, 	С	Add lines 10a and 10b. These are your total adjustments to income								100		
\$18,650	11	Subtract line 10c from line 9. This is your adjusted gross income							. ▶	11		41,888.
 If you checked any box under 	12	Standard deduction or itemized deductions (from Schedule A)								12		24,800.
Standard	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A								13	_	
Deduction, see instructions.	14	Add lines 12 and 13							14		24,800.	
	15	Taxable income. Subtract line 1	4 from lin	e 11. If zero or less	s, ente	er-0				15		17,088.

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	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 4972	3 🗍		16	1,708.	
	17	Amount from Schedule 2, lir	-				-	17		
	18	Add lines 16 and 17						18	1,708.	
	19	Child tax credit or credit for	other dependen	ts				19	<u> </u>	
	20	Amount from Schedule 3, lir	ne 7					20	392.	
	21	Add lines 19 and 20						21	392.	
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				22	1,316.	
	23	Other taxes, including self-e	emplovment tax.	from Schedule	e 2. line 10 .			23	0.	
	24	Add lines 22 and 23. This is			·		▶	24	1,316.	
	25	Federal income tax withheld	,						1,0101	
	а	Form(s) W-2				25a 3	3,482.			
	b	Form(s) 1099								
	c	Other forms (see instruction								
	d	Add lines 25a through 25c	,			25c		25d	3,482.	
	26	2020 estimated tax paymen						26	3, 102.	
 If you have a L qualifying child, 	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit. A				28		1		
If you have nontaxable	29	American opportunity credit				29		1		
combat pay, see instructions.	30	Recovery rebate credit. See		•			3,600.	1		
see mstructions.	31	Amount from Schedule 3, lir				31	, 000.	-		
	32	,						32	3,600.	
	33	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							7,082.	
	34							33	5,766.	
Refund	35a	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid							5,766.	
Direct deposit?	b b	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ ☐ 3 Routing number 0 3 1 1 1 0 0 6 4 9 ▶ c Type: ▼ Checking ☐ Savings							3,700.	
See instructions.	►d	Routing number 0 3 1 1 0 0 6 4 9 ▶ c Type: ▼ Checking Savings Account number 7 0 2 3 8 1 2 1 6 6								
	36	Amount of line 34 you want applied to your 2021 estimated tax ► 36								
Amount		· ·				-		37		
You Owe	37	Subtract line 33 from line 24. This is the amount you owe now								
For details on										
how to pay, see instructions.	38	2020. See Schedule 3, line 12e, and its instructions for details. Estimated tax penalty (see instructions)								
Third Party Designee		you want to allow another	•		rn with the IRS?	. —	omplete k	relow	⋉ No	
Designee		signee's		Phone			onal identi			
		me ►		no. 🕨			ber (PIN)			
Sign		der penalties of perjury, I declare								
Here	bel	ief, they are true, correct, and com	of preparer (othe	r than taxpayer) is ba	on of which	ı prepare	er has any knowledge.			
11010	You	Your signature		Date	Your occupation				nt you an Identity	
l=:tt 0					IT EMPLOYEE			inst.) ▶	N, enter it here	
Joint return? See instructions.	Sno	ouse's signature. If a joint return,	Date	Spouse's occupation			,	nt vour spouse an		
Keep a copy for	Op.	Spouse's signature. If a joint return, both must sign.			opouse s occupat	1011		f the IRS sent your spouse an dentity Protection PIN, enter it here		
your records.				HOME MAKE	(see	inst.) 🕨				
	Pho	one no.		Email address						
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	P0208	082703 Self-employed			
Preparer	Firr	m's name ▶ GLOBAL TA	XES LLC				Phor	ne no. (678)965-9522	
Use Only	Firr	m's address ▶ 2530 Pebb	g GA 30041		Firm	's EIN ▶	30-1017196			
Go to www.irs.go	ov/Form	n1040 for instructions and the late	est information.		BAA	REV 02/01/21 PR	<u> </u>		Form 1040 (2020)	
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