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

Filing Status Check only one box.	If yo	Single Married filing jointly unchecked the MFS box, enter the nonis a child but not your dependent	ame of									
Your first name and middle initial				Last name					Your social security number			
VAMSHI				ANNASARAPU					290-75-2518			
If joint return, s	pouse's	first name and middle initial	Last name					Spous	Spouse's social security number			
Home address	(numbe	r and street). If you have a P.O. box, see	instruct	tions.			Apt. no.	Presid	Presidential Election Campaign			
									Check here if you, or your			
City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code											v, want \$3	
LONE TREE				CO			0124	_	to go to this fund. Checking a box below will not change			
Foreign country name				Foreign province/state/o			eign postal coc		ax or ref		lalige	
			To ordigin profiling ordinary				orgri poorar oo		∑ Y	_	Spouse	
At any time du	ring 20	20, did you receive, sell, send, excl	nange,	or otherwise acquire	any financial	interest in	n any virtual	currency'	? <u> </u>	es [X No	
Standard Deduction	_	eone can claim:				dent						
Age/Blindness	You:	Were born before January 2, 1	956	Are blind Spo	ouse: Wa	as born b	efore Januar	v 2, 1956		s blind	d	
Dependents	s (see	instructions):		(2) Social security	(3) Rela	tionship	(4) 🗸 i	f qualifies f	or (see ir	ıstructi	ons):	
If more		rst name Last name		number		you	Child tax		1		dependents	
than four]				
dependents,]				
see instructions and check	s ——			_]				
here ▶]				
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					1	107	7,599.	
Attach	2a	Tax-exempt interest	2a		b Taxable in	terest		. 2	b			
Sch. B if required.	3a	Qualified dividends	3a b Ordinary dividends					. 3	b			
	4a	IRA distributions	4a		b Taxable a			. 4	b			
	5a	Pensions and annuities	5a		b Taxable a	mount .		. 5	b			
Standard	6a	Social security benefits	6a		b Taxable a	mount .		. 6	b			
Deduction for—	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here									8.	
• Single or Married filing separately, \$12,400	8	Other income from Schedule 1, lin	e9.					. [3		1,350.	
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inco	ome			> 9	9	103	3,257.	
Married filing jointly or Qualifying widow(er), \$24,800 Head of household, \$18,650 If you checked any box under Standard Deduction, see instructions.	10	Adjustments to income:										
	а	From Schedule 1, line 22				10a						
	b	Charitable contributions if you take	the sta	andard deduction. See	instructions	10b						
	С	Add lines 10a and 10b. These are	your tc	otal adjustments to in	ncome .			> 10	Ос			
	11	Subtract line 10c from line 9. This	is your	adjusted gross inco	me			▶ 1	1	103	3,257.	
	12	Standard deduction or itemized	deduc	tions (from Schedule	A)			. 1	2	12	2,400.	
	13	Qualified business income deduct	on. Att	tach Form 8995 or Fo	rm 8995-A			. 1	3			
	14	Add lines 12 and 13						. 1	4	12	2,400.	
	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less,	enter -0	<u> </u>		. 1	5	90),857.	

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

Form **1040** (2020)

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	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	15,890.						
	17	Amount from Schedule 2, line 3	17							
	18	Add lines 16 and 17	18	15,890.						
	19	Child tax credit or credit for other dependents	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		15,890.						
	23	Other taxes, including self-employment tax, from Schedule 2, line 10		0.						
	24	Add lines 22 and 23. This is your total tax	24	15,890.						
	25	Federal income tax withheld from:								
	a	Form(s) W-2	\cdot							
	b	Form(s) 1099								
	С	Other forms (see instructions)	05.4	10 000						
	d	Add lines 25a through 25c	25d	18,820.						
 If you have a qualifying child, 	26	2020 estimated tax payments and amount applied from 2019 return	26							
attach Sch. EIC.	27	Earned income credit (EIC)								
 If you have nontaxable 	28	Additional child tax credit. Attach Schedule 8812								
combat pay,	29 30	American opportunity credit from Form 8863, line 8	4							
see instructions.	31	Amount from Schedule 3, line 13	-							
	32	Add lines 27 through 31. These are your total other payments and refundable credits	> 32							
	33	Add lines 25d, 26, and 32. These are your total payments		18,820.						
	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,930.						
Refund	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here >		2,930.						
Direct deposit?	⊳ b	Routing number X X X X X X X X X X X X X X X X X X X	_	27550.						
See instructions.	▶d	Account number X X X X X X X X X X X X X X X X X X X								
	36	Amount of line 34 you want applied to your 2021 estimated tax								
Amount You Owe For details on	37	Subtract line 33 from line 24. This is the amount you owe now	37							
		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 instructions)								
Third Party		you want to allow another person to discuss this return with the IRS? See								
Designee		tructions		X No						
			rsonal identification nber (PIN) ▶							
Ciana		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and		t of my knowledge and						
Sign		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of wh								
Here	Yo	ur signature Date Your occupation If	the IRS ser	nt you an Identity						
	k.		Protection PIN, enter it here (see inst.)							
Joint return? See instructions.	0-	BOT I WARE ENGINEER	, , ,							
Keep a copy for	Spi		If the IRS sent your spouse an Identity Protection PIN, enter it here							
your records.		(Se	ee inst.) ►							
	Ph	one no. Email address								
Paid Preparer	Pre	parer's name Preparer's signature Date PTIN		Check if:						
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 05/04/2021 P020	82703	Self-employed						
Use Only			Phone no. (678)965-9522							
	Fin	m's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Fir	rm's EIN ► 30-1017196							
Go to www.irs.go	v/Forn	a1040 for instructions and the latest information. BAA REV 04/16/21 PRO		Form 1040 (2020)						