E1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		(99) urn	202	0	OMB No.	1545-007	74 IRS U	se Only	–Do not w	rite or staple	in this space.	
Filing Status Check only one box.	s 🗙 د If yo] Marrie ame of y	ed filing s	eparately (N use. If you c	,			sehold (H	OH)	Qua	lifying wid	low(er) (QW)	
Your first name	•	, ,	Last na	me							Your so	cial securi	ty number	
			GOPI	GOPIGARI							716-25-7839			
				ast name							Spouse's social security number			
Home address		er and street). If you have a P.O. box, see ott NW	instructio	ons.					Apt. no.			ntial Electi nere if you,	on Campaign	
City, town, or post office. If you have a foreign address, also complete			mplete s	te spaces below. State				ZIF				spouse if filing jointly, want \$3		
HUNTERSVILLE							1				to go to this fund. Checking a box below will not change			
Foreign countr			F	Foreign province/state/co			_					your tax or refund.		
				i ereigii protinee, etato, e								You	Spouse	
At any time du	ring 20	020, did you receive, sell, send, exch	nange, c	or otherw	ise acquire	any f	financial in	nterest i	n any virt	ual cu	irrency?	 Yes	X No	
Standard Deduction		eone can claim:			Your spous dual-status			ənt						
Age/Blindness	S You:	Were born before January 2, 1	956	Are bli	nd Spo	ouse	: 🗌 Was	s born b	efore Jar	uary 2	2, 1956	🗌 ls b	lind	
Dependents	-			(2) S	ocial security		(3) Relati					r (see instru	ictions):	
If more		irst name Last name			number		to yo			d tax ci			her dependents	
than four														
dependents,										$\overline{\Box}$				
see instruction and check	s ——													
here														
	1	Wages, salaries, tips, etc. Attach F	form(c)	N 2							. 1		<u> </u>	
Attach	· · ·		2a	vv-z .		 				•	2b		<u>, 1</u> , <u>1</u>	
Sch. B if required.	2a 2a	· ·				b Taxable interest				•	· –			
	3a		3a				b Ordinary dividendb Taxable amount .			·	. 3b			
/	4a		4a							•	. 4b			
	5a		5a				axable am		•	. <u>5b</u>				
Standard Deduction for –	6a	Social security benefits 6a b Taxable amount								· -	. <u>6b</u>			
 Single or Married filing separately, \$12,400 	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here									7			
	8	Other income from Schedule 1, lin		· · ·	• • •					•	. 8		-4,470.	
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8. T	his is you	ur total inco	ome					▶ 9		89,709.	
Married filing	10	Adjustments to income:												
jointly or Qualifying	а	From Schedule 1, line 22									_			
widow(er), \$24,800	b	Charitable contributions if you take	haritable contributions if you take the standard deduction. See instructions 10b							25	0.			
 Head of 	с	Add lines 10a and 10b. These are	your tot	al adjust	tments to i	ncon	ne				► <u>10</u>	;	250.	
household, \$18,650	11	Subtract line 10c from line 9. This is your adjusted gross income								▶ 11		89,459.		
 If you checked 	12	Standard deduction or itemized	deduct	ions (fror	n Schedule	A)					. 12		12,400.	
any box under Standard	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A												
Deduction, see instructions.	14	Add lines 12 and 13									. 14		12,400.	
	15	Taxable income. Subtract line 14	from lin	e 11. lf z	ero or less,	ente	r-0				. 15	1	77,059.	
For Disclosuro	Privac	Act and Paperwork Reduction Act N										Eorn	1040 (2020)	

Form 1040 (2

Form 1040 (2020))			Page 2					
	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🗌 4972 3 🗌	16	12,747.					
	17	Amount from Schedule 2, line 3	17						
	18	Add lines 16 and 17	18	12,747.					
	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	22	12,747.					
	23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	0.					
	24	Add lines 22 and 23. This is your total tax	24	12,747.					
	25	Federal income tax withheld from:							
	а	Form(s) W-2							
	b	Form(s) 1099							
	с	Other forms (see instructions)							
	d	Add lines 25a through 25c	25d	14,591.					
 If you have a qualifying child, attach Sch. EIC. If you have 	26	2020 estimated tax payments and amount applied from 2019 return	26						
	27	Earned income credit (EIC)							
	28	Additional child tax credit. Attach Schedule 8812							
nontaxable combat pay,	29	American opportunity credit from Form 8863, line 8							
see instructions.	30	Recovery rebate credit. 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	477.					
	33	Add lines 25d, 26, and 32. These are your total payments	33	15,068.					
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,321.					
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	2,321.					
Direct deposit?	►b	Routing number 0 2 1 2 0 0 3 3 9 ► c Type: X Checking Savings							
See instructions.	►d	Account number 3 8 1 0 4 8 6 0 5 8 2 7							
	36	Amount of line 34 you want applied to your 2021 estimated tax							
Amount	37	Subtract line 33 from line 24. This is the amount you owe now	37						
You Owe		Note: Schedule H and Schedule SE filers, line 37 may not represent all 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)							
Third Party	Do	you want to allow another person to discuss this return with the IRS? See							
Designee	ins	structions	below.	🗙 No					
		signee's Phone Personal ident							
		me no, number (PIN)							
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic							
Here				nt you an Identity					
Joint return?	. 10		Protection PIN, enter it here						
		SOFTWARE ENGINEER (see	inst.) 🕨						
See instructions.	Sp			nt your spouse an					
Keep a copy for your records.	,		itity Prote inst.) ►	ection PIN, enter it here					
,			1131.)						
		one no. Email address eparer's name Preparer's signature Date PTIN		Check if:					
Paid			2202	_					
Preparer		1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/22/2021 P0208		Self-employed					
Use Only				678)965-9522					
		-	i's EIN ▶						
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 03/13/21 PRO		Form 1040 (2020)					