E <b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		(99) Jrn 20	020		MB No. 154	5-0074	IRS Use	Only-	-Do not wr	ite or staple	in this space.	
Filing Status Check only one box.	lf yo	Single Married filing jointly under the matching both the MFS box, enter the matching a child but not your dependent	ame of y	ed filing separa /our spouse. If		,				<i>,</i> .		, ,	low(er) (QW) ne qualifying	
Your first name	and mi	iddle initial	Last nar	me							Your so	ial securi	ty number	
			SWAR	SWARNA VENKATA SAI							747-05-8803			
				ast name							Spouse's social security number			
Home address		er and street). If you have a P.O. box, see A WAY	instructio	ons.				A	vpt. no.			<b>itial Electi</b> ere if you,	on Campaign or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete si	oaces below.		State		ZIP co	de				ntly, want \$3	
DUBLIN				CA							to go to this fund. Checking a box below will not change			
Foreign country name			F	Foreign province/state/county							your tax or refund.			
					,	lancy					You	Spouse		
At any time du	ring 20	020, did you receive, sell, send, exch	nange, o	r otherwise ac	cquire a	any fina	ancial inter	est in a	ny virtua	l cur	rency?		X No	
Standard Deduction		eone can claim:					dependent							
Age/Blindness	S You:	Were born before January 2, 19	956	Are blind	Spo	use:	Was bo	rn befo	ore Janua	ry 2	, 1956	Is bl	lind	
Dependents	-			(2) Social s			(3) Relations				-	(see instru	ictions):	
If more		irst name Last name		numb			to you		Child ta				her dependents	
than four										7				
dependents,									C	-				
see instruction	s ——								C	-				
and check here ►									L	=				
	1	Wages, salaries, tips, etc. Attach F	orm(c) \	N 2					L		1	1	<u> </u>	
Attach Sch. B if required.	 2a		2a	····		· · ·			• •	• •	2b	<u> </u>	0.	
			2a 3a	122			able interes		• •	• •	20 3b			
	3a			122	<b>b</b> Ordinary dividend <b>b</b> Taxable amount.				• •	• •			122.	
	4a		4a		_				• •	• •	4b			
	5a		5a				able amour		• •	• •	5b			
Standard Deduction for—	6a	Social security benefits 6a b Taxable amount									6b		1 600	
<ul> <li>Single or Married filing separately, \$12,400</li> </ul>	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ►									7		1,629.	
	8	Other income from Schedule 1, line 9							• •	• •	8		<u>-5,027.</u>	
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>										1	90,108.	
<ul> <li>Married filing jointly or</li> </ul>	10	Adjustments to income:						I						
Qualifying	а	From Schedule 1, line 22       10a         Charitable contributions if you take the standard deduction. See instructions       10b									_			
widow(er), \$24,800	b													
<ul> <li>Head of household, \$18,650</li> </ul>	С	Add lines 10a and 10b. These are	your <b>tot</b>	al adjustmen	ts to in	come				. 🕨	► 10c			
	11	Subtract line 10c from line 9. This is your adjusted gross income									11	1	90,108.	
<ul> <li>If you checked</li> </ul>	12	Standard deduction or itemized deductions (from Schedule A)										1	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. If zero or	r less, e	enter -	0	<u> </u>			15	1	77,708.	
For Disclosuro	Privao	v Act, and Paperwork Reduction Act N	otico so	o congrato inst	ruction	-						Form	a <b>1040</b> (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	37,861.	
	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	37,861.	
	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	37,861.	
	23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	99.	
	24	Add lines 22 and 23. This is your total tax	24	37,960.	
	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	36,262.	
• If you have a	26	2020 estimated tax payments and amount applied from 2019 return	26		
qualifying child,	27	Earned income credit (EIC)			
attach Sch. EIC. • If you have	28	Additional child tax credit. Attach Schedule 8812			
nontaxable	29	American opportunity credit from Form 8863, line 8			
combat pay, see instructions.	30	Recovery rebate credit. See instructions	1		
	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	33	36,262.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34		
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a		
Direct deposit? See instructions.	►b	Routing number X X X X X X X X X X X ► c Type: Checking Savings			
	►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	37	Subtract line 33 from line 24. This is the <b>amount you owe now</b>	37	1,698.	
You Owe	0.	Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for			
For details on		2020. See Schedule 3, line 12e, and its instructions for details.			
how to pay, see 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		structions	below.	× No	
	De	signee's Phone Personal identi	fication		
		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				, ,	
	YO		If the IRS sent you an Identity Protection PIN, enter it here		
Joint return?			inst.) 🕨		
See instructions.	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation If the	e IRS ser	nt your spouse an	
Keep a copy for your records.				ection PIN, enter it here	
your records.			inst.) 🕨		
		one no. Email address			
Paid		eparer's name Preparer's signature Date PTIN		Check if:	
Preparer	SYAN	1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 05/10/2021 P0208		Self-employed	
Use Only			ne no. (	678)965-9522	
	Fir	m's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm	i's EIN ▶	30-1017196	
Go to www.irs.go	ov/Form	n1040 for instructions and the latest information. BAA REV 04/20/21 PRO		Form <b>1040</b> (2020	