## E 1040 Department of the Treasury—Internal Revenue Service (99) U.S. Individual Income Tax Return

2020

OMB No. 1545-007

IBS Use Only—Do not write or staple in this space

Filing Status Check only one box.	If yo	Single Married filing jointly [ u checked the MFS box, enter the loon is a child but not your depender	name of	ed filing separately your spouse. If you								
Your first name	and m	iddle initial	Last na	me					You	r soc	ial securi	ty number
PRAMOD			KALV	'ALA					10	1-8	9-463	3
If joint return, s	pouse's	s first name and middle initial	Last na	me					Spor	use's	social se	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	e instruction	ons.				Apt. no.	Pres	iden	tial Election	on Campaign
9733 LOI	NGST	ONE LN			_						ere if you,	or your itly, want \$3
City, town, or p	ost offi	ce. If you have a foreign address, also c	omplete s	paces below.	Sta			code				Checking a
CHARLOT'	ΓE				No	C	28	3277	box	belo	w will not	change
Foreign country	y name		F	Foreign province/state	e/coun	ty	Fore	eign postal code	e your	tax	or refund.	. Spouse
At any time du	ıring 20	020, did you receive, sell, send, exc	hange, c	or otherwise acquire	e any	financial intere	st in	any virtual o	currenc	y?	Yes	<b>⊠</b> No
Standard Deduction		eone can claim:				a dependent						
Age/Blindness	s You:	Were born before January 2,	1956	Are blind Sr	ouse	: Was bor	n be	efore January	/ 2, 195	56	☐ Is bl	lind
Dependent				(2) Social securi	tv	(3) Relationsh					(see instru	ictions):
If more	•	First name Last name number to you Child tax of							- 1		her dependents	
than four												
dependents, see instruction												
and check	s —											
here ▶ 🗌												
	1	Wages, salaries, tips, etc. Attach	Form(s) \	W-2						1	1	51,238.
Attach	2a	Tax-exempt interest	2a		b T	axable interest			. L	2b		
Sch. B if required.	3a	Qualified dividends	3a		<b>b</b> 0	Ordinary divider	nds		. L	3b		
	4a	IRA distributions	4a		<b>b</b> T	axable amount	t.			4b		
	5a	Pensions and annuities	5a		<b>b</b> T	axable amount	t.			5b		
Standard	6a	Social security benefits	6a		<b>b</b> T	axable amount	t.		. [	6b		
Deduction for —	7	Capital gain or (loss). Attach Sche	edule D if	frequired. If not red	quired	, check here		•		7		
Single or Married filing	8	Other income from Schedule 1, lin	ne 9 .						. [	8		-6,410.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your <b>total in</b>	come				<b>•</b>	9	1	44,828.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22				10a	a					
widow(er), \$24,800	b	Charitable contributions if you take	e the star	ndard deduction. Se	e inst	ructions 10k	)					
Head of	С	Add lines 10a and 10b. These are	your <b>tot</b>	tal adjustments to	inco	me			<b>•</b>	10c		
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted gross inc	ome				•	11	1	44,828.
If you checked	12	Standard deduction or itemized	deduct	ions (from Schedul	e A)				. [	12		12,400.
any box under Standard	13	Qualified business income deduc	tion. Atta	ach Form 8995 or F	orm 8	8995-A				13		
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 less	. ente	er -0			.	15	1.	32,428.

Form 1040 (2020	))									F	Page 2
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16		25,8	62.
	17	Amount from Schedule 2, lin	пе 3					17			
	18	Add lines 16 and 17						18		25,8	62.
	19	Child tax credit or credit for	other dependent	ts				19			
	20	Amount from Schedule 3, lin	ne 7					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0				22		25,8	62.
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 10			23			0.
	24	Add lines 22 and 23. This is	your total tax				▶	24		25,8	62.
	25	Federal income tax withheld	d from:								
	а	Form(s) W-2				<b>25a</b> 29	,349				
	b	Form(s) 1099				25b					
	С	Other forms (see instruction	s)			25c					
	d	Add lines 25a through 25c						25d		29,3	49.
• If you have a	26	2020 estimated tax paymen	ts and amount a	pplied from 20	)19 return			26			
qualifying child,	27	Earned income credit (EIC)			No .	27					
attach Sch. EIC.  If you have	28	Additional child tax credit. A				28					
nontaxable	29	American opportunity credit	from Form 8863	3, line 8		29					
combat pay, see instructions.	30	Recovery rebate credit. See	instructions .			30					
	31	Amount from Schedule 3, lin	ne 13			31					
	32	Add lines 27 through 31. Th	ese are your tota	al other paym	ents and refunda	ble credits .	▶	32			
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>								29,3	49.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amour		34		3,48	87.	
Herana	35a	Amount of line 34 you want			3 is attached, chec	ck here	. ▶ 🗌	35a		3,48	87.
Direct deposit?	▶b	Routing number 1 1 1	0 0 0 6	1 4	▶ c Type: 🛛	Checking	Savings	;			
See instructions.	▶d	Account number 0 0 0	0 0 0 7	6 0 1 0	0 8 6 2 6						
	36	Amount of line 34 you want	applied to your	2021 estimate	ed tax 🕨	36					
Amount	37	Subtract line 33 from line 24	1. This is the <b>am</b> o	ount you owe	now		•	37			
You Owe		Note: Schedule H and Sch	nedule 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									
instructions.	38	Estimated tax penalty (see i	nstructions) .		🕨	38					
<b>Third Party</b>	Do	you want to allow another	r person to disc	cuss this retu	rn with the IRS?						
Designee	ins	structions				Yes. C	omplete	below.	X N	0	
		signee's me ▶		Phone no. ▶			onal iden ber (PIN)			ТТ	$\neg \neg$
<u> </u>		der penalties of perjury, I declare	that I have examine				( /		et of my	knowlod	
Sign		lief, they are true, correct, and com									
Here	Yo	ur signature		Date	Your occupation		lf tl	ne IRS se	nt you ar	n Identity	V
	\						tection P	IN, enter	it here	<u> </u>	
Joint return?					SOFTWARE E	,	e inst.) 🕨				
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupati	on		ne IRS se entity Prot			
your records.								e inst.) ▶	SCHOILE	IN, eriter	Triere
	Ph	one no.		Email address	l		1,50	, .			
		eparer's name	Preparer's signat	l		Date	PTIN		Check	if:	
Paid		1 PRIYA RAM SAGAR GUPTA TALLAM			GUPTA TALLAM	02/16/2021		32703		elf-emplo	oved
Preparer		m's name ► GLOBAL TA	1			1 22, 10, 2021				965-9	
Use Only		m's address ► 2530 Pebb		n Cummin	g GA 30041			m's EIN ▶		-1017	
					J 200		1		J 0	/	

REV 02/07/21 PRO

## **SCHEDULE 1** (Form 1040)

**Additional Income and Adjustments to Income** 

OMB No. 1545-0074 Attachment

Department of the Treasury Internal Revenue Service

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.

Sequence No. 01 Your social security number

PRAM	MOD KALVALA 10	1-89	-4633	3
Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received	. 2	2a	
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 E	5	-6,410.
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-N line 8		9	-6,410.
Par	t II Adjustments to Income			
10	Educator expenses		0	
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	. 1	2	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	. 1	3	
14	Deductible part of self-employment tax. Attach Schedule SE	. 1	4	
15	Self-employed SEP, SIMPLE, and qualified plans	. 1	15	
16	Self-employed health insurance deduction	. 1	16	
17	Penalty on early withdrawal of savings	. 1	7	
18a	Alimony paid	. 18	8a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions) ▶			
19	IRA deduction	. 1	9	
20	Student loan interest deduction	. 2	20	
21	Tuition and fees deduction. Attach Form 8917	. 2	21	
22	Add lines 10 through 21. These are your <b>adjustments to income.</b> Enter here a on Form 1040, 1040-SR, or 1040-NR, line 10a		22	

## **SCHEDULE E**

(Form 1040)

## **Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

20**20** 

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► Go to www.irs.gov/ScheduleE for instructions and the latest information.

Sequence No. 13
Your social security number

101-89-4633 PRAMOD KALVALA Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions . . . . . . Physical address of each property (street, city, state, ZIP code) Α H.NO.2-3-890, FLAT NO.301 NAVYA SPRINGS Apt. NAGOLE, UPPAL , HYDERABAD TELANGANA IN 500068 В C 1b **Fair Rental Personal Use** Type of Property For each rental real estate property listed QJV above, report the number of fair rental and **Days Days** (from list below) personal use days. Check the QJV box only if you meet the requirements to file as a A 365 Α 0 qualified joint venture. See instructions. В В С C Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: Properties: Α C 620. 3 Rents received . 3 4 4 Royalties received . Expenses: 5 5 120. Advertising . . . . . 6 Auto and travel (see instructions) . . 6 410. 7 7 280. Cleaning and maintenance . . . 8 Commissions. . . . . . 8 9 Insurance . . . . . . . . . . 9 10 Legal and other professional fees . . . 10 11 11 Mortgage interest paid to banks, etc. (see instructions) 12 12 13 Other interest. . . . . . . . . . . . 13 6,000. 220. 14 14 15 15 Supplies . . . . 16 Taxes . . . . . . 16 17 17 18 Depreciation expense or depletion . . . 18 19 19 Total expenses. Add lines 5 through 19 . . . . . 20 20 7,030. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must 21 -6,410.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . -6,410.) 23a Total of all amounts reported on line 3 for all rental properties 23a 620 **b** Total of all amounts reported on line 4 for all royalty properties 23b c Total of all amounts reported on line 12 for all properties 23c d Total of all amounts reported on line 18 for all properties 23d 23e e Total of all amounts reported on line 20 for all properties 7,030. 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 6,410. 25 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 -6,410.26

Control Con	le Al		of Yo	our	2020	-		<u>l</u> ina D		ent of	x Return Revenue	DOR Use Only			
		ar year 2	2020, 0	or fiscal yea		g		20	and ending			Are you a v		Yes	No X
PRAM 9733		NGST	ONE		VALA				Your	SSN:	101894633		use a veteran? ranted an auto	Yes omatic extension	No L to file
		7.7		7 MECKL		1			Spouse's				ederal income	tax return (For	
Filing	Statu	ıs X	1. Sin 4. Hea	gle ad of Househ	old _	1	ed Filing fying Wid	-	□ 3. M	arried Fi	iling Separately	Year spor	Yes L use died:	No X	
1	-			C. for the en ent for the e	-		Yes X Yes L	No No	$\square$		n for deceased n for deceased		Date of d		
									ucation End		nt Fund by maki				or all of
		•									payment of \$ for information			ate your overp	ayment
☐ Se	elect	box if yo	u, or i	f married fili	ng jointly,	your spo	use we	re out c	of the count	ry on A	pril 15, 2021, ar	nd a U.S. cit		lent.	
L Se	elect	box if re	turn is	filed and si	gned by E	xecutor,	Adminis	strator,	or Court-Ap	pointed	d Personal Rep	<u>resentative.</u>			
FS	1	PP	Y		DT	N	OC	N	TPRES	S Y	SPRES	S N	TV 1	N SVT	N
KALV		9733	3	28277	DS	N	EΑ	N	TD			SD		FDE	XT N
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10A				0		20B			0		27		(	)	Ž
10B				0		21A			0		29		(	)	
11	S	Y	I	N		21B			0		30		(		
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		turn B			efund D		nedules ar	502			nt Due Check here if you a	authorize the	O North Carolina	Department of	Pevenue
the best o	f my k	nowledge a	and belie	amined this returned, they are true,	correct, and	complete.			,	L to	discuss this retu	rn and attach	ments with the	e paid preparer	below.
Your Sign	ature					Date	Spor	use's Sigr	nature (If filing	joint retui	rn, both must sign.)	Date	_	192708 Phone No. ( <i>Include</i>	area code)
PAID PRE	PARE	R USE ON	ILY If	f prepared by a	person other	than taxpay	er, this cei	rtification	is based on all	informatio	on of which the prepa	arer has any kno	owledge.		
SYAM	_PR	<u>IY</u> A R	<u>AM</u> \$	SAGAR G	UPT 0	2 16 2	<u>1</u> 67	89659	9522				P020	82703	
		Signature				Date	Prep	arer's Co	ntact Phone Nu	•	clude area code)		Preparer's	s FEIN, SSN, or P	TIN
	<i>lf</i> y	ou ARE	NOT d		-						OX R, RALEIGH, OF REVENUE, P.C			IC 27640-0640	

Name	(First 10 Characters) KALVALA Your Social Security Number	10189	94633
	D-400 Line-by-Line Information		
6.	Federal Adjusted Gross Income	6.	144828
7.	Additions to Federal Adjusted Gross Income	7.	0
8.	Add Lines 6 and 7	8.	144828
9.	Deductions From Federal Adjusted Gross Income	9.	144020
10.	Child Deduction	Э.	
10.	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit	10a.	(
	b. Enter the amount of the child deduction	10b.	(
11.	N.C. Standard Deduction	11.	Y
11.	N.C. Itemized Deduction	11.	1
11.	Deduction amount	11.	10750
12.	a. Add Lines 9, 10b, and 11	12a.	10750
	b. Subtract amount on Line 12a from Line 8	12b.	134078
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.0000
14.	N.C. Taxable Income	14.	134078
15.	N.C. Income Tax	15.	7039
16.	Tax Credits	16.	, 005
17.	Subtract Line 16 from Line 15	17.	7039
18.	Consumer Use Tax	18.	, 005
	You certify that no Consumer Use Tax is due		Y
19.	Add Lines 17 and 18	19.	7039
	Carolina Income Tax Withheld		
<u>North</u>			
North 20a.	Your tax withheld	20a.	7541
20a. 20b.	Spouse's tax withheld	20a. 20b.	
20a. 20b. Other	Spouse's tax withheld  Tax Payments	20b.	(
20a. 20b.	Spouse's tax withheld  Tax Payments  2020 estimated tax	20b. 21a.	C
20a. 20b. Other 21a. 21b.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension	20b. 21a. 21b.	(
20a. 20b. Other 21a. 21b. 21c.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership	20b. 21a. 21b. 21c.	(
20a. 20b. Other 21a. 21b. 21c. 21d.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation	20b. 21a. 21b. 21c. 21d.	()
20a. 20b. Other 21a. 21b. 21c. 21d. 22.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments	21a. 21b. 21c. 21d. 22.	()
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments	21a. 21b. 21c. 21d. 22. 23.	() () () () () ()
20a. 20b. Other 21a. 21b. 21c. 21d. 22.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments	21a. 21b. 21c. 21d. 22.	7541
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments Amended Returns Only - Previous refunds	21a. 21b. 21c. 21d. 22. 23. 24.	7541
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments Amended Returns Only - Previous refunds Subtract Line 24 from Line 23	21a. 21b. 21c. 21d. 22. 23. 24. 25.	7541 7541
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments Amended Returns Only - Previous refunds Subtract Line 24 from Line 23 Tax Due	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	7541 7541
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments Amended Returns Only - Previous refunds Subtract Line 24 from Line 23  Tax Due Penalties	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	7541 7541 (0
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments Amended Returns Only - Previous refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	7541 7541 (0
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments Amended Returns Only - Previous refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	7541 00 7541 00 00
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments Amended Returns Only - Previous refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	7541 00 7541 00 00
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments Amended Returns Only - Previous refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	7541 00 7541 00 00 00
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments Amended Returns Only - Previous refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	7541 00 7541 00 00
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments Amended Returns Only - Previous refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment  ont of Refund to Apply to:	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	7541 () () () () () ()
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Spouse's tax withheld  Tax Payments  2020 estimated tax Paid with extension Partnership S Corporation Amended Returns Only - Previous payments Total Payments Amended Returns Only - Previous refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment  int of Refund to Apply to:  Amount of Line 28 to be applied to 2021 Estimated Income Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	7541 () () () () () () () ()
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