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

IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly [ou checked the MFS box, enter the reson is a child but not your depender	name of								
Your first name	and m	iddle initial	Last na	me					Your s	ocial secu	urity number
VINAY K	UMAR		DOTI	- -					737-	-43-81	.13
If joint return, s	pouse's	s first name and middle initial	Last na	me					Spous	e's social s	security number
HARSHA			CHAN	INAKA					893-	-73-58	54
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				Apt. no.	Presid	ential Elec	ction Campaign
1030 CR	AIGM:	EADE DR									ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete s	paces below.	Sta	te	ZIP	code			ointly, want \$3 d. Checking a
MORRISV	ILLE				N	2	2	7560			ot change
Foreign country	y name		F	Foreign province/stat	e/coun	ty	For	eign postal cod	e your ta	ax or refur Ω Υο ι	
At any time du	ıring 20	020, did you receive, sell, send, exc	hange, c	or otherwise acquir	e any	financial inte	rest ir	any virtual o	currency	?	s 🔀 No
Standard Deduction	_	eone can claim:		•		-	t				
Age/Blindness	s You:	Were born before January 2, 1	956	Are blind S	pouse	: Was b	orn b	efore January	, 2, 1956	☐ Is	blind
Dependents	s (see	instructions):		(2) Social secur	itv	(3) Relation	ship	(4) ✓ if	qualifies f	for (see ins	tructions):
If more		irst name Last name		number	,	to you		Child tax		1	other dependents
than four											
dependents, see instruction	_										
and check	5 —										
here ▶ □											
	1	Wages, salaries, tips, etc. Attach	Form(s) \	W-2						1	173,292.
Attach	2a	Tax-exempt interest	2a		b T	axable intere	est		. 2	!b	
Sch. B if required.	3a	Qualified dividends	3a		b (Ordinary divid	dends		. 3	b	
	4a	IRA distributions	4a		b T	axable amou	unt .		. 4	b	
	5a	Pensions and annuities	5a		b T	axable amou	unt .		. 5	ib	
Standard	6a	Social security benefits	6a		b T	axable amou	unt .		. 6	ib	
Deduction for— Single or	7	Capital gain or (loss). Attach Sche	dule D if	frequired. If not re	quired	, check here		•		7	55.
Married filing	8	Other income from Schedule 1, lir	ne 9 .						{	8	-37,090.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your total in	come				> _ 9	9	136,257.
Married filing	10	Adjustments to income:									
jointly or Qualifying	а	From Schedule 1, line 22				1	0a				
widow(er), \$24,800	b	Charitable contributions if you take	the star	ndard deduction. S	ee inst	ructions 1	0b				
Head of	С	c Add lines 10a and 10b. These are your total adjustments to income								0c	
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted gross in	come				▶ 1	1	136,257.
If you checked	12	Standard deduction or itemized	deduct	ions (from Schedu	le A)				. 1	2	24,800.
any box under Standard	13	Qualified business income deduct	tion. Atta	ach Form 8995 or I	orm 8	8995-A .			. 1	3	
Deduction, see instructions.	14	Add lines 12 and 13							. 1	4	24,800.
	15	Taxable income. Subtract line 14	from lin	e 11. If zero or les	s, ente	er -0			. 1	5	111,457.

16	Form 1040 (2020))									Page 2
18		16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	16,101.
19		17	Amount from Schedule 2, lin	ne 3						17	
20		18	Add lines 16 and 17							18	16,101.
21		19	Child tax credit or credit for	other dependen	ts					19	
22 Subtract line 21 from line 18. If zero or less, enter -0 23 0. Other taxes, including self-employment tax, from Schedule 2, line 10 23 0. Other taxes, including self-employment tax from Schedule 2, line 10 24 Add lines 22 and 23. This is your total tax 25 25 5 5 5 5 5 5 5		20	Amount from Schedule 3, lin	ie 7						20	
23		21	Add lines 19 and 20							21	
24 Add lines 22 and 23. This is your total tax		22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	16,101.
25 Federal income tax withheld from: a Form(s) W-2 25a 16,149 25b 25c 2		23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .				23	0.
a Form(s) W-2		24	Add lines 22 and 23. This is	your total tax					. 1	24	16,101.
b Form(s) 1099		25	Federal income tax withheld	from:							
Collect forms (see instructions) 256		а	Form(s) W-2				25a	16	,149		
d Add lines 25a through 25c 25d 16,149.		b	Form(s) 1099				25b				
1		С	Other forms (see instructions	s)			25c				
1		d	Add lines 25a through 25c							25d	16,149.
Earned income credit (EIC) South are lated size. Fig. 28 Additional child tax credit. Attach Schedule 8812 28 28 28 28 29 29 29 2	• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20)19 return				26	
attach Sch. ElC. 28	qualifying child,						1				
and merican opportunity credit from Form 8863, line 8. 29 30 30 31 32 American opportunity credit. See instructions . 30 31 32 Add lines 27 through 31. These are your total other payments and refundable credits . ▶ 32 33 Add lines 27 through 31. These are your total payments . ▶ 33 16,149.		28					28				
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 33 Add lines 25d, 26, and 32. These are your total payments 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 36 Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 37 Be instructions. 38 Amount of line 34 you want applied to your 2021 estimated tax 39 Subtract line 33 from line 24. This is the amount you owe now 30 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. 39 Estimated tax penalty (see instructions) 30 Do you want to allow another person to discuss this return with the IRS? See instructions 30 Designee's Phone no. 31 Do you want to allow another person to discuss this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. 32 Phone no. (312)478-5018 33 Phone no. (312)478-5018 34 Preparer's name Preparer's signature 35 Phone no. (312)478-5018 36 Preparer's name Preparer's signature 37 Preparer's name Preparer's signature 38 Preparer's signature 39 Preparer's signature 30 Date Preparer's name Preparer's signature 31 Date Preparer's name Preparer's signature 32 Date Prim's sen Proceed. If name the first sen to the part of the first sen to the first sen to the first sen to t	nontaxable	29	American opportunity credit	from Form 8863	B. line 8		29				
31 Amount from Schedule 3, line 13 32 Add lines 25td, 26, and 32. These are your total other payments and refundable credits . ▶ 32 33 Add lines 25td, 26, and 32. These are your total payments . ▶ 33 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid . 34 48. 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here . ▶ □ 35b Account number □ □ 5 □ 3 □ □ □ □ 1 □ 6 □ ▶ c Type: ☒ Checking ☐ Savings 36 Amount of line 34 you want applied to your 2021 estimated tax . ▶ 36 37 Amount of line 34 you want applied to your 2021 estimated tax . ▶ 36 38 Amount of line 34 you want applied to your 2021 estimated tax . ▶ 36 39 Amount of line 34 you want applied to your 2021 estimated tax . ▶ 36 30 Subtract line 33 from line 24. This is the amount you owe now . ▶ 37 30 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. 39 Estimated tax penalty (see instructions) . ▶ 38 30 Designee's name ▶ □ Do you want to allow another person to discuss this return with the IRS? See instructions line 12e, and complete. Declaration of prepare (other than taxpayer) is based on all information of which prepare has any knowledge and belief, they are true, correct, and complete. Declaration of prepare (other than taxpayer) is based on all information of which preparer has any knowledge. 30 Propose Soprear's signature. If a joint return, both must sign. Date Spouse's occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶ □ 31 Preparer's name Preparer's signature. P		30	***		*		30				
Add lines 27 through 31. These are your total other payments and refundable credits 32			•								
Refund 34								edits	.)	> 32	
Refund 34			· ·	•						_	16.149.
Sign Here Sign Here Do you want to allow another person to discuss this return with the IRS? See instructions. Do you want to allow another person to discuss this return with the IRS? See instructions. Do you want to allow another person to discuss this return with the IRS? See instructions. Date Date Proparer's signature Date Preparer's signature Potence Potence Proparer's signature Potence Proparer's signature Preparer's											
Direct deposit? See instructions	Refund						-	-		, —	
See instructions. ▶ d Account number 2 3 7 7 0 3 5 4 8 8 0 2 6 4 Amount You Owe For details on how to pay, see instructions. Third Party Designee Sign Here Joint return? See instructions. Sign Here Joint return? See instructions. Sopuse's signature Phone no. (312)478-5018 Preparer your records. Preparer's name Preparer's signature Preparer's land of the land 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. Estimated tax penalty (see instructions) So you want to allow another person to discuss this return with the IRS? See instructions Phone no. Personal identification number (PIN) Date Your occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.) Spouse's signature. If a joint return, both must sign. Date Preparer's signature Sym PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 09/29/2021 P02082703 Self-employed Firm's name GLOBAL TAXES LLC Firm's address 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN 30-1017196	Direct deposit?										10.
Amount You Owe For details on how to pay, see instructions. Third Party Designee Sign Here Joint return? See instructions. Joint return? See instructions. Sign Here Joint return? See instructions. Sign Here Joint return? See instructions. Spouse's signature Phone no. (312)478-5018 Preparer's name Preparer's signature Preparer's signature Preparer's signature Preparer Use Only Amount of line 34 you want applied to your 2021 estimated tax . ▶ 36 37 Subtract line 33 from line 24. This is the amount you owe now									Javing		
Amount You Owe For details on how to pay, see instructions. Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions							36	Γ΄			
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Sign Here Solection For details on how to pay, see instructions 38 2020. See Schedule 3, line 12e, and its instructions for details.		31			•						
Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions Designee's Phone Personal identification number (PIN) ▶ Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature Date Your occupation For the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶ Spouse's signature. If a joint return, both must sign. Spouse's signature. If a joint return, both must sign. Phone no. (312)478-5018 Email address Dvinaykumar.y@gmail.com Preparer's name Sym Priva Ram Sagar Gupta Tallam Syam Priva Ram Sagar Gupta Tallam (578)965-9522 Firm's name ▶ GLOBAL Taxes Lic Firm's address ▶ 2530 Pebble Creek Lin Cumming GA 30041 Firm's EIN ▶ 30-1017196				·	•		of the	taxes you	owe to	or	
Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions		20	•	•			20	1			
Designee's name Designee's name Personal identification number (PIN) Personal identific	-										
Designee's name Date Your occupation Date Your occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.) Designee's name Designee's name Population of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.) Spouse's signature. Spouse's signature. If a joint return, both must sign. Phone no. (312)478-5018 Date Soprtware EngIneer Soprtware EngIneer Preparer's name Preparer's name Preparer's signature Date Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 09/29/2021 P02082703 Self-employed Firm's name Firm's name GLOBAL TAXES LLC Firm's address Phone no. (678)965-9522 Firm's address S2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN 30-1017196			. *					Yes. Co	mplet	e below	X No
Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature Date Your occupation Fith lRS sent you an Identity Protection PIN, enter it here (see inst.) ▶	Designee										_
Here belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature Date			• .								
Here Solution So	Sian										
Joint return? See instructions. Keep a copy for your records. Spouse's signature. If a joint return, both must sign. Spouse's signature. If a joint return, both must sign. Spouse's signature. If a joint return, both must sign. Spouse's occupation If the IRS serit you an identity Protection PIN, enter it here (see inst.) ▶	•	be	lief, they are true, correct, and com	plete. Declaration of	of preparer (othe	r than taxpayer) is l	based on	all informatio	n of wh	nich prepar	er has any knowledge.
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Phone no. (312)478-5018 Email address Dvinaykumar.y@gmail.com Preparer's name Preparer's signature Date PTIN Check if: SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 09/29/2021 P02082703 □ Self-employed Firm's name GLOBAL TAXES LLC Phone no. (678)965-9522 Firm's address 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN 30-1017196	Keep a copy for	Sp.	ouse's signature. If a joint return, t	Jour must sign.	Date	opouse's occupa	ation		- 1		, ,
Preparer's name	your records.					SOFTWARE	ENGI	NEER	(s	ee inst.) ►	
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Preparer Use Only Firm's name GLOBAL TAXES LLC Phone no. (678)965-9522	Deid	Pre	eparer's name	Preparer's signat	ure						Check if:
Freparer Use Only Firm's name ► GLOBAL TAXES LLC Phone no. (678)965-9522 Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN ► 30-1017196		SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLA	M 09/	29/2021	P020	82703	Self-employed
Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN ▶ 30-1017196	•	Fir	m's name ▶ GLOBAL TAX	XES LLC					Р	none no.	(678)965-9522
1010	Use Uniy	Fir	m's address ▶ 2530 Pebb	le Creek L	n Cummin	g GA 30041					
	Go to www.irs.go	ov/Forr	n1040 for instructions and the late	st information.		BAA	REV	08/30/21 PRO			

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
VINAY KUMAR DOTI & HARSHA CHANNAKA

Your social security number
737-43-8113

Par	t I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶		
3	Business income or (loss). Attach Schedule C	3	-37,090.
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	
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-NR,		27 000
Par	t II Adjustments to Income	9	-37,090.
10	Educator expenses	10	
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	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

Department of the Treasury

▶ Go to www.irs.gov/ScheduleC for instructions and the latest information.

Internal Revenue Service (99) Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074 Attachment Sequence No. 09

	f proprietor						security number (SSN)
	AY KUMAR DOTI						-43-8113
Α	Principal business or profession	on, inclu	iding product or service (se	e instru	uctions)	B Enter	r code from instructions
	SOFTWARE SERVICES					D Empl	▶ 5 1 9 1 0 0 oyer ID number (EIN) (see instr.)
С	Business name. If no separate SOFTWARE SERVICES	e busine	ss name, leave blank.			 Embi	Syer ID Humber (EIN) (See Instr.)
E	Business address (including s	uita or r	200m no) • 1030 CD7	тсмп	ANE ND		
_	City, town or post office, state		´		NC 27560		
F		Cash			O41 (
G					2020? If "No," see instructions for li	mit on lo	SSES X Yes No
H							
 I					n(s) 1099? See instructions		
J							
Part		o roquii (54 T GITTI(G) T G G G T T T T T T				<u> </u>
1	Gross receipts or sales. See in	nstructio	ons for line 1 and check the	box if	this income was reported to you or		
-	•				1	1	
2	Returns and allowances					2	
3	Subtract line 2 from line 1 .					3	
4	Cost of goods sold (from line	42) .				4	
5	Gross profit. Subtract line 4	from lin	e3			5	
6	Other income, including federa	al and s	tate gasoline or fuel tax cre	edit or r	refund (see instructions)	6	
7	Gross income. Add lines 5 a	nd 6 .			<u> </u>	7	
Part			for business use of you	r hom	<u> </u>		
8	Advertising	8		18	Office expense (see instructions)	18	
9	Car and truck expenses (see		10.050	19	Pension and profit-sharing plans	19	
	instructions)	9	10,350.	20	Rent or lease (see instructions):		10.000
10	Commissions and fees .	10		а	Vehicles, machinery, and equipment		19,200.
11	Contract labor (see instructions)	11		b	Other business property		
12 13	Depletion Depreciation and section 179	12		21	Repairs and maintenance		
	expense deduction (not			22	Supplies (not included in Part III) Taxes and licenses		
	included in Part III) (see	13		24	Travel and meals:	23	
4.4	instructions)	13		24 a	Travel	24a	
14	(other than on line 19).	14		b	Deductible meals (see	2-40	
15	Insurance (other than health)	15			instructions)	24b	6,100.
16	Interest (see instructions):			25	Utilities		1,440.
а	Mortgage (paid to banks, etc.)	16a		26	Wages (less employment credits)		
b	Other	16b		27a	Other expenses (from line 48) .	27a	
17	Legal and professional services	17		b	Reserved for future use		
28	Total expenses before expen	ses for	business use of home. Add	l lines 8	8 through 27a ▶	28	37,090.
29	Tentative profit or (loss). Subtr	ract line	28 from line 7			29	-37,090.
30	Expenses for business use of	of your	home. Do not report these	e expe	nses elsewhere. Attach Form 8829)	
	unless using the simplified me						
	Simplified method filers only	/: Enter	the total square footage of	(a) you			
	and (b) the part of your home				Use the Simplified		
			-	ter on l	ine 30	30	
31	Net profit or (loss). Subtract				1		
	If a profit, enter on both Some standard that the standard that the standard transfer is the standard transfer in the standard transfer is the standard transfer in th		, ,		, , ,		37 000
	checked the box on line 1, see		ctions). Estates and trusts, (enter o	n Form 1041, line 3.	31	-37,090.
20	If a loss, you must go to lin If you have a loss, sheek the h		dooriboo vous issuedant	in #l=1-	octivity. See instructions		
32	If you have a loss, check the b				1		
	• If you checked 32a, enter t		•			32a	X All investment is at risk.
	SE, line 2. (If you checked the Form 1041, line 3.	NOX OU	inie i, see trie iirie 31 instruc	uons).	Locates and trusts, enter on	32b	
	 If you checked 32b, you mu 	ust attac	ch Form 6198. Your loss m	ay be I	imited.		at risk.

BAA

Schedule C (Form 1040) 2020 Page **2**

Part	Cost of Goods Sold (see instructions)				
33	Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (att	ach ev	nlana	tion)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor if "Yes," attach explanation	ry?	. [Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35			
36	Purchases less cost of items withdrawn for personal use	36			
37	Cost of labor. Do not include any amounts paid to yourself	37			
38	Materials and supplies	38			
39	Other costs	39			
40	Add lines 35 through 39	40			
41	Inventory at end of year	41			
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42			
Part	Information on Your Vehicle. Complete this part only if you are claiming car or and are not required to file Form 4562 for this business. See the instructions for file Form 4562.				
43	When did you place your vehicle in service for business purposes? (month/day/year) ▶ 06/10/201	.8			
44	Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your	vehicle	for:		
а	Business 18,000 b Commuting (see instructions) c	Other			3,000
45	Was your vehicle available for personal use during off-duty hours?			Yes	⊠ No
46	Do you (or your spouse) have another vehicle available for personal use?			X Yes	☐ No
47a	Do you have evidence to support your deduction?			X Yes	☐ No
b	If "Yes," is the evidence written?			Yes	X No
Part	Other Expenses. List below business expenses not included on lines 8–26 or li	ne 30).		
48	Total other expenses. Enter here and on line 27a	48			

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

▶ Go to www.irs.gov/ScheduleD for instructions and the latest information.
 ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return
VINAY KUMAR DOTI & HARSHA CHANNAKA

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

Your social security number

737-43-8113

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 524. 469. 55. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 55. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss)

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

11

12

13

14

15

Schedule D (Form 1040) 2020 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 55. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

8949

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No. 12A

OMB No. 1545-0074

Internal Revenue Service

Department of the Treasury

Social security number or taxpayer identification number

737-43-8113

VINAY KUMAR DOTI & HARSHA CHANNAKA

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss). (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired (sales price) from column (d) and disposed of and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (g) instructions Robinhood Securities LLC | 12/27/19 05/04/20 524. 469. 55. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

524.

55.

negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

above is checked), or line 3 (if Box C above is checked) ▶

469.

Additional information from your 2020 Federal Tax Return

Schedule C (SOFTWARE SERVICES): Profit or Loss from Business

Line 25 Itemization Statement

Description	Amount
INTERNET(12M*120\$P.M)	1,440.
Total	1,440.

Control Contro	e All	•	of Yo	our	020	_		<u>i</u> na C	ncome Departmer	nt of R		DOR Use Only				
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Your Signa	iture					Date	Spor	ıse's Sigi	nature (If filing jo	int return, bo	oth must sign.)	Date		24785 ct Phone	018 No. (Include are	ea code)
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Paid Prepa			141 5	SAGAR GU	IPT 09	29 2 Date	_		ntact Phone Num	ber (Include	e area code)				.96 I, SSN, or PTIN	
	If yo	u ARE N	OT di		-						R, RALEIGH, N REVENUE, P.O.			H, NC 27	640-0640	

Name	(First 10 Characters) DOTI Your Social Security Number	73743	38113
	D-400 Line-by-Line Information		
6.	Federal Adjusted Gross Income	6.	13625'
7.	Additions to Federal Adjusted Gross Income	7.	13023
8.	Add Lines 6 and 7	8.	13625
9.	Deductions From Federal Adjusted Gross Income	9.	13023
10.	Child Deduction	0.	
	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.	
11.	N.C. Itemized Deduction	11.	
11.	Deduction amount	11.	2150
12.	a. Add Lines 9, 10b, and 11	12a.	2150
	b. Subtract amount on Line 12a from Line 8	12b.	11475
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.000
14.	N.C. Taxable Income	14.	11475
15.	N.C. Income Tax	15.	602
16.	Tax Credits	16.	
17.	Subtract Line 16 from Line 15	17.	602
18.	Consumer Use Tax	18.	002
	You certify that no Consumer Use Tax is due		
19.	Add Lines 17 and 18	19.	602
	Carolina Income Tax Withheld		
<u>North</u>			
North 20a.	Your tax withheld	20a.	33
20a. 20b.	Your tax withheld Spouse's tax withheld Tax Payments	20a. 20b.	33 349
20a. 20b.	Spouse's tax withheld		349
20a. 20b. Other	Spouse's tax withheld Tax Payments	20b.	
20a. 20b. Other 21a. 21b.	Spouse's tax withheld Tax Payments 2020 estimated tax Paid with extension	20b. 21a. 21b.	349
20a. 20b. Other 21a. 21b. 21c.	Spouse's tax withheld Tax Payments 2020 estimated tax Paid with extension Partnership	21a. 21b. 21c.	349
20a. 20b. Other 21a. 21b. 21c. 21d.	Spouse's tax withheld Tax Payments 2020 estimated tax Paid with extension Partnership S Corporation	21a. 21b. 21c. 21d.	349
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.	349
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.	349
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	21a. 21b. 21c. 21d. 22. 23. 24.	349
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 Subtract Line 24 from Line 23	21a. 21b. 21c. 21d. 22. 23. 24. 25.	349
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.	349 383 383 219
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	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.	349 383 383 219
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	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	349 383 383 219
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.	349
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	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	349 383 383 219
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	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	349 383 383 219
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	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. 27.	349 383 383 219
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	349 383 383 219
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	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	349 383 383 219
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.	349 383 383 219 219
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Exception to Underpayment of Estimated Tax Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Income Tax Payth of Refund to Apply to:	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	349 383 383 219 219
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou	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 unt of Refund to Apply to: Amount of Line 28 to be applied to 2021 Estimated Income Tax	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	349 383 383 219
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou 29. 30.	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 ant of Refund to Apply to: Amount of Line 28 to be applied to 2021 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	349 383 383 219
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amount 29. 30. 31.	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 unt of Refund to Apply to: Amount of Line 28 to be applied to 2021 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund N.C. Education Endowment Fund	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	349 383 383 219