Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

illemai nevenue Service						
Submission Identification Number (SID)						
Taxpayer's name		Social secu	rity numb	er		
NAGA PAVAN KUMAR KONDURU		057-08	3-1758	3		
Spouse's name		Spouse's so	cial secu	rity num	ber	
Part I Tax Return Information — Tax Year Ending December 31,	(Enter	year you	are aut	horizii	2a)	
Enter whole dollars only on lines 1 through 5.	(Litter	year you	are aut	11011211	ig.)	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1 Adjusted gross income			1 1		60,2	242.
2 Total tax			2			312.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3		11,1	172.
4 Amount you want refunded to you			4		6,6	560.
5 Amount you owe			5			
Part II Taxpayer Declaration and Signature Authorization (Be sure year)	ou get and k	eep a co	py of y	our re	eturn	1)
return (original or amended) I am now authorizing. I consent to allow my intermediate service poto send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt of for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial instituti payment of my federal taxes owed on this return and/or a payment of estimated tax, and the finauthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agrayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment obusiness days prior to the payment (settlement) date. I also authorize the financial institutions taxes to receive confidential information necessary to answer inquiries and resolve issues repersonal identification number (PIN) below is my signature for the income tax return (original of Electronic Funds Withdrawal Consent.	r reason for reje authorize the U. ion account indi nancial institution ent to terminate ancellation required in the involved in the related to the p	ction of the S. Treasury cated in the in to debit the the authorial the processing and ayment. I further than the	transmis and its cotax prepose entry to zation. To be received the electrons are the received the received the acceptance of the second the received	ssion, (b) designate paration to this a revoked no ectronic knowled	the ted Find software (cause (cause) later to be detected by the cause of the cause	reason nancial vare for nt. This ncel) a than 2 nent of nat the
Taxpayer's PIN: check one box only		Г		\top		
	r or generate i	my PIN	3 1 7	7 5 8	8] ,	as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing		Ě	nter five o		ut	ao iiiy
I will enter my PIN as my signature on the income tax return (original or amif you are entering your own PIN and your return is filed using the Practitic below.	ended) I am n					
Your signature ►	Date ► _					
Spouse's PIN: check one box only						
· <u> </u>	r or generate i	my DINI			Π,	ac mv
ERO firm name	or generate i	,	nter five	digits. b		as my
signature on the income tax return (original or amended) I am now authorizing	ng.		on't ente			
I will enter my PIN as my signature on the income tax return (original or am if you are entering your own PIN and your return is filed using the Practitic below.						
Spouse's signature ▶	Date ►					
Practitioner PIN Method Returns Only—cor						
Part III Certification and Authentication — Practitioner PIN Method C	Only					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected P	PIN. 5 8	7 2 7	8 6	1 9	8	9
, , , , , ,		Don't er	iter all ze	ros	-	
I certify that the above numeric entry is my PIN, which is my signature for the electronic indivauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i>	that I am subm	itting this re	turn in a	ccorda	nce w	
ERO's signature ▶	Date ▶					
ERO Must Retain This Form — See Ins						
Don't Submit This Form to the IRS Unless Req		o So				

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 u checked the MFS box, enter the son is a child but not your depende	name of	ed filing separately your spouse. If you		_		•	_			, , , ,
Your first name and middle initial Last name You							Your social security number					
NAGA PA	VAN I	KUMAR	KONE	URU					0.5	057-08-1758		
If joint return, s	pouse's	s first name and middle initial	Last na	me					Spe	ouse's	s social sec	urity number
	•	er and street). If you have a P.O. box, se ORD PLACE	ee instruction	ons.				Apt. no.	Ch	eck h	nere if you,	•
City, town, or p	ost offi	ce. If you have a foreign address, also o	complete s	paces below.	Sta	te	ZIF	code			0,	tly, want \$3 Checking a
HENRICO					V	A		3233	bo	x belo	ow will not	•
Foreign country	y name		F	Foreign province/state	e/coun	ty	Foi	eign postal co	de you	ur tax	or refund.	Spouse
At any time du	ıring 20	020, did you receive, sell, send, ex	change, c	or otherwise acquir	e any	financial i	nterest i	n any virtual	curren	icy?	Yes	⊠ No
Standard Deduction	_	eone can claim:	•				ent					
Age/Blindness	s You:	Were born before January 2,	1956	Are blind S	oouse	: Wa	s born b	efore Janua	ry 2, 19	956	☐ Is bli	nd
Dependents	s (see	instructions):		(2) Social secur	ty	(3) Relat	ionship	(4) 🗸	if qualifi	es for	r (see instruc	ctions):
If more		irst name Last name		number	-	to y	ou	Child ta		- 1		ner dependents
than four												
dependents, see instruction	. —											
and check												
here ▶ □												
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1	7	71,417.
Attach Sch. B if	2a	Tax-exempt interest	2a		b T	axable int	erest			2b		
required.	3a	Qualified dividends	3a		b (Ordinary di	vidends			3b		
	4a	IRA distributions	4a		b T	axable an	nount .			4b		
	5a	Pensions and annuities	5a		b T	axable an	nount .			5b		
Standard	6a	Social security benefits	6a		b T	axable an	nount .			6b		
Deduction for— Single or	7	Capital gain or (loss). Attach Sch	edule D if	frequired. If not red	quired	, check he	ere .	•	· 🗌	7		690.
Married filing	8	Other income from Schedule 1, li	ne 9 .							8		-8,265.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8. T	his is your total in	come					9	6	53,842.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22					10a	3,6	500.			
widow(er), \$24,800	b	Charitable contributions if you tak	e the star	ndard deduction. Se	e inst	ructions	10b					
Head of	С	Add lines 10a and 10b. These are	e your tot	al adjustments to	inco	me				10c	;	3,600.
household, \$18,650	11	Subtract line 10c from line 9. This	s is your a	adjusted gross ind	ome					11	ϵ	50,242.
If you checked	12	Standard deduction or itemized	d deduct	ions (from Schedu	le A)					12	1	L2,400.
any box under Standard	13	Qualified business income deduc	ction. Atta	ach Form 8995 or F	orm 8	8995-A .				13		
Deduction, see instructions.	14	Add lines 12 and 13								14	1	12,400.
occ monuclions.	15	Taxable income. Subtract line 1	4 from lin	e 11. If zero or less	s, ente	er-0				15	4	17,842.

Form 1040 (2020))									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			. 16	6,312.
	17	Amount from Schedule 2, lir			.					
	18	Add lines 16 and 17							. 18	6,312.
	19	Child tax credit or credit for	other dependen	ts					. 19	
	20	Amount from Schedule 3, lir	ne 7						. 20	
	21	Add lines 19 and 20							. 21	
	22	Subtract line 21 from line 18							. 22	6,312.
	23	Other taxes, including self-e	,						. 23	0.
	24	Add lines 22 and 23. This is			•				▶ 24	6,312.
	25	Federal income tax withheld	-							0,312.
	a	Form(s) W-2				25a	11	,172	2.	
	b	Form(s) 1099				25b		,		
	c	Other forms (see instruction				25c				
	d	Add lines 25a through 25c	•						. 25d	11,172.
		2020 estimated tax paymen								11,1/2.
 If you have a L qualifying child, 	26	Earned income credit (EIC)				1 1		•	. 20	
attach Sch. EIC.	27					27				
If you have nontaxable	28	Additional child tax credit. A				28				
combat pay,	29	American opportunity credit		•		29				
see instructions.	30	Recovery rebate credit. See				30		,800	J.	
	31	Amount from Schedule 3, lir				31			▶ 32	1 000
	32	ŭ	Add lines 27 through 31. These are your total other payments and refundable credits > Add lines 25d, 26, and 32. These are your total payments							1,800.
Refund	33		-							12,972.
	34	If line 33 is more than line 24				-	-		. 34	6,660.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here							35a	6,660.
Direct deposit? See instructions.	►b	Routing number 0 7 3 0 0 0 1 7 6 ▶ c Type: ▼ Checking □ Savings Account number 4 4 5 0 0 2 4 6 8 9 5 9 □ □ Savings						gs		
coo mondonono.	▶ d					+ + -	_			
	36	Amount of line 34 you want	applied to your	2021 estimate	ed tax ►	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe	now			. 1	▶ 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 in	nstructions) .		<u> ▶</u>	38				
Third Party		you want to allow another	•				¬., .			
Designee		structions				. ▶ [•	te below.	X No
		signee's ne ▶		Phone no. ▶				onal ide ber (PII	entification	
Ciara		der penalties of perjury, I declare t	that I have evamine		l accompanying sch	adulas a			,	et of my knowledge and
Sign		ief, they are true, correct, and com								
Here	Yo	ur signature		Date	Your occupation			If	the IRS se	nt you an Identity
	k	G			·					IN, enter it here
Joint return?					SOFTWARE I	ENGIN	IEER	(5	see inst.) 🕨	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupat	ion				nt your spouse an
your records.	,								see inst.) 🕨	ection PIN, enter it here
		one ne		Email address				(-	,,,	
_		one no. eparer's name	Preparer's signat	Email address		Date		PTIN		Check if:
Paid		•	1 .		T7\		0/2021		090332	Self-employed
Preparer		SSMANIKUMARAPPANA	RVSSMANIK	UNAKAPPAN	NA	UZ/1	.9/2021			
Use Only		m's name ► GLOBAL TA		m (1,1,1,1,1)	~ (7) 20041					646)727-7157
		m's address ► 2530 Pebb		in Cumming				F	irm's EIN	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV	02/07/21 PR)		Form 1040 (2020)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

NAGA PAVAN KUMAR KONDURU

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No. 01 Your social security number

057-08-1758

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	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-8,265.
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,		
Par	t II Adjustments to Income	9	-8,265.
	•		
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	3,600.
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	3,600.

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99)

► 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.

Name(s) shown on return Your social security number 057-08-1758 NAGA PAVAN KUMAR KONDURU

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I 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 5,377. 0. 690. 6,067. 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 7 690. 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) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15

BAA

Schedule D (Form 1040) 2020 Page 2

Part III **Summary** 690. 16 Combine lines 7 and 15 and enter the result 16 • 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.

Form **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.

OMB No. 1545-0074

2020
Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

057-08-1758

NAGA PAVAN KUMAR KONDURU

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 05/08/20 06/10/20 6,067. 5,377. W 0. 690. 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.

6,067.

690.

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) ▶

5,377.

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.

OMB No. 1545-0074

Attachment Sequence No. **13**

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.

Your social security number

	. PAVAN KUMAR KO								57-08			
Part	Income or Loss	From Rental Real Estate and Ro	yaltie	s Note	If you a	are in th	e business o	f rent	ing pers	onal pr	operty, ι	ıse
	Schedule C. See i	nstructions. If you are an individual, repo	ort farr	m rental i	ncome o	r loss fi	om Form 48	35 or	n page 2	, line 40	٥.	
A Did	d you make any paymer	nts in 2020 that would require you to	file F	orm(s) 1	099? Se	e instr	uctions .			Y	′es 🗵	No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?								□ Y	′es 🗌	No
1a		each property (street, city, state, ZIF										
Α	VIJAYAWADA VIJ	AYAWADA IN										
В												
С												
1b	Type of Property	2 For each rental real estate prop	perty I	isted		Fair	Rental	Per	sonal l	Jse	QJ	V
	(from list below)	above, report the number of fa personal use days. Check the	ir rent	al and			ays		Days		QU	
Α	1	if you meet the requirements to	o file a	sa	Α		365		()		
В		qualified joint venture. See inst	ructio	ns.	В							
С					С							
Type o	of Property:											
	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd	7	' Self-	Rental					
	ti-Family Residence		6 Ro	yalties	8	Othe	r (describe))				
Incom	ie:	Properties:			Α		В	3			С	
3			3		4	450.						
4	Royalties received .		4									
Exper												
5	_		5									
6	•	nstructions)	6									
7		ance	7		1,2	249.						
8			8									
9			9									
10	_	ssional fees	10									
11	•		11									
12		d to banks, etc. (see instructions)	12									
13			13									
14	•		14			548.						
15			15		2,8	340.						
16			16			200						
17			17		Ι,	978.						
18		or depletion	18									
19	Other (list)		19		0 [71 -						
20	•	ines 5 through 19	20		8,	715.						
21		line 3 (rents) and/or 4 (royalties). If										
	file Form 6198	nstructions to find out if you must	21		-8,2	265						
22		octate loss after limitation if any	21		0,2							
22	on Form 8582 (see ins	estate loss after limitation, if any,	22	(-8,2	65 N	()/			١
23a	·	eported on line 3 for all rental prope		11	-0,2	23a	1	4	50.			,
b		eported on line 4 for all royalty prope				23b			30.			
C		eported on line 12 for all properties				23c						
d		eported on line 18 for all properties				23d						
e		eported on line 20 for all properties				23e		8,7	15.			
24		e amounts shown on line 21. Do no	t incl						24			
25	•	sses from line 21 and rental real estate		-		nter tota	al losses her	е.	25 (8,2	65.)
26		ate and royalty income or (loss).									J / 2	/
20		V, and line 40 on page 2 do not										
		(0), line 5. Otherwise, include this ar							26		-8,	265.

Form **8917**(Rev. January 2020)

Tuition and Fees Deduction

► Attach to Form 1040 or 1040-SR.

► Go to www.irs.gov/Form8917 for the latest information.

OMB No. 1545-0074

Attachment Sequence No. **60**

Internal Revenue Service
Name(s) shown on return

Department of the Treasury

NAGA PAVAN KUMAR KONDURU

Your social security number 057-08-1758



Use this form for qualified tuition and fees paid in 2018, 2019, or 2020, and later years if legislation extends the deduction (see instructions). File a separate Form 8917 for each year after 2017 for which you qualify to take the deduction.

You can't take both an education credit from Form 8863 and the tuition and fees deduction from this form for the same student for the same tax year.

Before you begin:

- ✓ To see if you qualify for this deduction, see Who Can Take the Deduction in the instructions below.
- ✓ If you file Form 1040 or 1040-SR, figure any write-in adjustments.
 - For 2018: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040), line 36.
 - For 2019: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22.
 - For 2020 and later years: Figure any write-in adjustments for Schedule 1 (Form 1040 or 1040-SR); see the Instructions for Forms 1040 and 1040-SR.

	the Instructions for Forms 1040 and 1040-SR.		
1	(a) Student's name (as shown on page 1 of your tax return) First name Last name	(b) Student's social security number (as shown on page 1 of your tax return)	(c) Adjusted qualified expenses (see instructions)
	NAGA PAVAN KUMAR KONDURU	057-08-1758	3,600.
2	Add the amounts on line 1, column (c), and enter the total	2	3,600.
3	Enter the amount from your "total income" line of Form 1040 or 1040-SR	63,842.	
4	• For 2018: Enter the total of the amounts on your 2018 Schedule 1 (Form 1040), lines 23 through 33, plus any write-in adjustments you entered on the dotted line next to Schedule 1 (Form 1040), line 36.		
	• For 2019 and 2020: Enter the total of the amounts on your 2019 Schedule 1 (Form 1040 or 1040-SR), lines 10 through 20, plus any write-in adjustments you entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22.		
	• For later years: See www.irs.gov/Form8917 to find out if the line references above for 2019 have changed	4	
5	Subtract line 4 from line 3.* If the result is more than \$80,000 (\$160,000 stop; you can't take the deduction for tuition and fees		63,842.
	* If you're filing Form 2555, 2555-EZ, or 4563, or you're excluding incom Effect of the Amount of Your Income on the Amount of Your Deduction amount to enter on line 5.	,	
6	Tuition and fees deduction. Is the amount on line 5 more than \$65,6 filing jointly)?	000 (\$130,000 if married	
	Yes. Enter the smaller of line 2, or \$2,000.	6	3,600.
	No. Enter the smaller of line 2, or \$4,000.		

Also enter this amount on line 21 of the 2019 and 2020 Schedule 1 (Form 1040 or 1040-SR), or line 34 of the 2018 Schedule 1 (Form 1040). See *www.irs.gov/Form8917* to find out if the line references above for 2019 have changed.





NAGA PAVAN K KONDURU

3931 BIDDEFORD PLACE APT 10

HENRICO VA 23233

SSN - You KOND		057081758	Vendor ID	1555		ххххх
SSN - Spouse						
Fed Adj Gross Income (FAGI)	1.	60242.	Withholding (VA) - Yo	ou	19A.	3633.
Additions	2.		Withholding (VA) - Sp	oouse	19B.	
Subtotal	3.	60242.	Estimated Payments		20.	
Age Deduction - You	4A.		2019 Overpayment		21.	
Age Deduction - Spouse	4B.		Extension Payments		22.	
Soc Sec & Tier 1 Railroad	5.		Credit - Low-Income	or EIC	23.	
State Income Tax Overpayment	6.		Credit - Schedule OS	С	24.	
Subtractions	7.		Credits - Schedule CF	3	25.	
Subtotal Subtractions	8.		Total Payments / Cre	dits	26.	3633.
Total VA Adj Gross Income (VAGI)	9.	60242.	Tax You Owe		27.	
Itemized Deductions - VA Sch A	10.		Tax Overpayment		28.	739.
Standard Deduction	11.	4500.	Overpayment Credite	d to Next Year	29.	
Exemptions	12.	930.	VAC - Virginia 529 / A	ABLEnow	30.	
Deductions	13.		VAC - Other Contribu	itions	31.	
Subtotal (Deductions & Exemptions)) 14.	5430.	Addition to Tax, Pena	Ity & Interest	32.	
VA Taxable Income	15.	54812.	Sales and Use Tax		33.	
Amount of Tax	16.	2894.	Amount You Owe	Cond N		
Spouse Tax Adjustment (STA)	17.		Will Pay by Credit/Debit Your Refund	Card N	1	739.
VAGI - Spouse	17A.		D 1 D 1' "			072000176
Net Amount of Tax	18.	2894.	Bank Routing #		C	073000176
L			Bank Account #		44500	02468959

__LAR __DLAR __DTD __LTD \$_____

Page 1 of 2





Filing Status, Age 8	ormation	Addition	Additional Filing Information					
Filing Status			1	Locality		087		
Federal Head of H	lousehold			Name or Filing Status Cha	inge			
DOB - You		072519	94	Address Change				
VA Driver's Licens	e ID - You	в636311	11	VA Return Not Filed Last Y	′ear			
VA Driver's Licens	e - Iss. Date - Yo	ou 091120	20	Dependent on Another's R	eturn			
Spouse Name (Fil	ing Status 3 Onl	y)		Farmer / Fisherman / Merc	chant Seaman			
DOD 0				Amended				
DOB - Spouse	- ID - O			Reason Code				
VA Driver's Licens				Overseas on Due Date				
VA Driver's Licens				Federal EIC & Amount				
Exemptions (A) You	1	Exemptions (B) 65 & Over - You		Deceased Indicator				
Spouse		65 & Over - Spouse		No Sales & Use Tax Due I	ndicator	X		
Dependents		Blind - You		Obtain Electronic 1099G				
Total (A)	1	Blind - Spouse		ID Theft PIN				
		Total (B)						
	declare under pena			t of my (our) knowledge, it is a true, cor on provided is for a domestic account w				
Signature - You		Date		Phone - You		8045083158		
Signature - Spouse		Date		Phone - Spouse				
Signature - Preparer _]	KUMARAPPANA Date	Phone - Preparer		6467277157				
The Tax Department may discuss my/our return with my/our preparer. Preparer Information 7 P02090332								

GLOBAL TAXES LLC

CUMMING

2530 PEBBLE CREEK LN

GA 30041

Page 2 of 2

1555 REV 02/09/21 PRO

File by May 1, 2021 Include Page 1, Page 2 and all

supporting 760CG documents.

2020 Schedule INC/CG

057081758

Report all W-2s, 1099s & VK-1s with VA Withholding

NAGA PAVAN K

KONDURU



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Г					⊣
057081758	W	3633.	263931050	30263931050F001	71417.

 Total VA Withholding
 SSN
 VA Withholding

 You
 057081758
 3633.

 Spouse
 Total # of W-2s,1099s & VK-1s
 01

VA-8879 Virginia Department of Taxation

Virginia Individual Income Tax e-File Signature Authorization

Tax Year 2020

DO NOT SEND THIS VA-8879 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

Virginia S	ubmission Identification Number (SID)							
Your Nam	ne	B Your Social Sec	urity Number					
NAGA PA	AVAN KUMAR KONDURU	057-08-17	58					
Spouse's	Name	A Spouse's Social						
Part I	Tax Return Information	A Spouse	B Yourself					
	leral Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)	A Spouse						
	ginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		60242.					
`	table Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		60242.					
	ginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		54812. 2894.					
`	hholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		3633.					
	ount you Owe (Form 760CG, Line 35; Form 760PY, Line 35; Form 763, Line 35)		3033.					
	und (Form 760CG, Line 36; 760PY, Line 36; Form 763, Line 36)		739.					
	Declaration of Taxpayer and Signature Authorization		739.					
Return Orinumber) an filing a bala liable for the Virginia Tarefund or do of the territal signature parameters. I au	December 31, 2020, and to the best of my knowledge and belief, it is true, correct and complete. I further declare that the information I provided to my Electronic Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security number or individual tax identification number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If I am filling a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Provider to transmit my complete return to Virginia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, the direct deposit of my refund or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program. Taxpayer's e-File PIN: check one box only I authorize the ERO named below to enter my e-File PIN 8 1 7 5 8 as my signature on my 2020 e-filed Virginia individual income tax return. Do not enter all zeros							
	ERO Firm Name Il enter my e-File PIN as my signature on my 2020 e-filed Virginia individual income tax return. Check this box I your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	only if you are entering	your own e-File PIN					
Your Signa	ature Date							
Spouse's	e-File PIN: check one box only							
□ Iau	thorize the ERO named below to enter my e-File PIN as my signature on my 2020 e-file Do not enter all zeros	d Virginia individual inc	ome tax return.					
_	ERO Firm Name							
∐ I wi and	Il enter my e-File PIN as my signature on my 2020 e-filed Virginia individual income tax return. Check this box I your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	only if you are entering	your own e-File PIN					
Part III	Certification and Authentication – Practitioner PIN Method Only							
ERO's EF	IN/PIN: Enter your six-digit EFIN followed by your five digit self-selected PIN. 5 8 7 2 7 8 6	1 9 8 9						
above. I confidence of computer of computer of the computer of	Do not enter all zeros I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2020 Virginia individual income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Virginia's publication Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2020). EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.							
ERO's Sig	nature Date Date	9-21						