# 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

Submission Identification Number (SID)		•		
Taxpayer's name	Social securit	y numb	er	
MURALI MOHAN GANTA	505-51-	-0065		
Spouse's name	Spouse's soc	ial secu	rity numbe	r
AJITA DEGALA	820-15	-5303	3	
Part I Tax Return Information — Tax Year Ending December 31, (E	nter year you a	re aut	horizing	.)
Enter whole dollars only on lines 1 through 5.				
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
<b>1</b> Adjusted gross income		1	136	5,881.
2 Total tax		2	12	2,237.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	14	1,003.
4 Amount you want refunded to you		4	1	L,766.
<b>5</b> Amount you owe		5		
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a	nd keep a cop	y of y	our retu	ırn)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trato send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent.	ansmitter, or electron rejection of the transition of the transition to debit the titution to debit the innate the authorizant requests must be an the processing of the payment. I furt	onic retuents ansmissed its distance of the entry to ation. To receive the electrical transfer acknowledge in the electric receive the electric receive electric returns and electric returns ele	urn origina sion, (b) t esignated aration so this acc o revoke ed no lat ectronic pa	ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the
Taxpayer's PIN: check one box only				
X I authorize GLOBAL TAXES LLC to enter or gener	rate my PIN $\frac{1}{2}$	0 0		as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent		ligits, but all zeros	,
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN r below.				
Your signature ▶ Date	<b>-</b>			
Spouse's PIN: check one box only				
I authorize GLOBAL TAXES LLC to enter or generation signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN and your return is filed using the Practitioner PIN rebelow.	Ent doi am now authorizin	n't enter ng. Ch	ligits, but all zeros eck this	
Spouse's signature ▶ Date				
Practitioner PIN Method Returns Only—continue be	low			
Part III Certification and Authentication — Practitioner PIN Method Only				
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5	8 7 2 7  Don't enter	8 6 er all zei		3 9
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incor authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am serequirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers	submitting this retu	ırn in a	ccordance	
ERO's signature ▶ Date	•			
ERO Must Retain This Form — See Instruction				

Don't Submit This Form to the IRS Unless Requested To Do So

E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

Filing Status Check only		Single X Married filing jointly									
one box.	•	ou checked the MFS box, enter the son is a child but not your depende		of your spouse. If yo	u chec	ked the HC	)H or Q\	N box, enter th	ne child's	s name if th	ne qualifying
Your first name	and m	iddle initial	Last	name					Your so	ocial securi	ty number
MURALI I	AHON	N	GAI	NTA					505-	51-006	5
If joint return, s	pouse's	s first name and middle initial	Last	name					Spouse	's social se	curity number
AJITA			DEC	GALA					820-	15-530	3
Home address	(numbe	er and street). If you have a P.O. box, se	e instru	ctions.				Apt. no.			on Campaign
2964 COI	NSUE	LO WAY								here if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also c	omplete	e spaces below.	Sta	ate	ZIF	code code	1 '	0,	ntly, want \$3 Checking a
Round Ro	ock				Т	X	7	8665		low will not	
Foreign country	y name			Foreign province/sta	te/cour	nty	Foi	reign postal code	your ta	x or refund	. Spouse
At any time du	ring 20	020, did you receive, sell, send, exc	change	, or otherwise acqui	ire any	financial ir	iterest ii	n any virtual cu	rrency?	Yes	⊠ No
Standard Deduction		eone can claim:  You as a d Spouse itemizes on a separate retu	•			'	ent				
Age/Blindness	S You:	Were born before January 2,	1956	Are blind	Spouse	e: Was	born b	efore January	2, 1956	☐ Is b	lind
Dependents	s (see	instructions):		(2) Social secu	ırity	(3) Relati	onship	(4) <b>√</b> if α	ualifies fo	or (see instru	uctions):
If more	•	irst name Last name		number to you Child			Child tax c		1 '	ther dependents	
than four	SAI	I AISHANI GANTA		768-90-3396 Daughter		ter	×				
dependents, see instruction	SHF	REEMAN M GANTA		898-66-6168 Son		Son	X				
and check	5										
here ▶ □											
	1	Wages, salaries, tips, etc. Attach	Form(s	s) W-2					. 1	1	39,492.
Attach	2a	Tax-exempt interest	2a		b <sup>-</sup>	Taxable inte	erest		. 2b	)	11.
Sch. B if required.	3a	Qualified dividends	3a	24.	<b>b</b> (	Ordinary div	vidends		. 3b	)	24.
	4a	IRA distributions	4a		b T	Taxable am	ount .		. 4b	)	
	5a	Pensions and annuities	5a		b T	Taxable am	ount .		. 5b	)	
Standard	6a	Social security benefits	6a		b T	Taxable am	ount .		. 6b	)	
Deduction for— Single or	7	Capital gain or (loss). Attach School	edule D	) if required. If not re	equired	d, check he	re .	▶[	_ 7		1,327.
Married filing	8	Other income from Schedule 1, li	ne 9 .						. 8		-3,673.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8	. This is your <b>total i</b> i	ncome				▶ 9	1	37,181.
Married filing jointly or	10	Adjustments to income:									
Qualifying	а	From Schedule 1, line 22					10a				
widow(er), \$24,800	b	Charitable contributions if you take	e the st	andard deduction. S	See ins	tructions	10b	30	0.		
Head of	С	Add lines 10a and 10b. These are	•	-					▶ 10		300.
household, \$18,650	11	Subtract line 10c from line 9. This	s is you	ır adjusted gross ir	ncome				<b>▶</b> 11	1 1	36,881.
If you checked any box under	12	Standard deduction or itemized	dedu	ctions (from Sched	ule A)				. 12		24,800.
Standard	13	Qualified business income deduc	tion. A	ttach Form 8995 or	Form 8	8995-A .			. 13	3	
Deduction, see instructions.	14	Add lines 12 and 13							. 14		24,800.
	15	Taxable income Subtract line 1.	4 from	line 11 If zero or les	ss ent	or -0-			15	: 1	12.081.

Form 1040 (2020	))										Page 2
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		. 16	;	16,3	237.
	17	Amount from Schedule 2, lin	ne 3				<u> </u>	. 17			
	18	Add lines 16 and 17						. 18	1	16,	237.
	19	Child tax credit or credit for	other dependen	ts				. 19	,	4,0	000.
	20	Amount from Schedule 3, lin	ne 7					. 20	,		
	21	Add lines 19 and 20						. 21		4,0	000.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. 22	:	12,	237.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .			. 23	;		0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					▶ 24	,	12,	237.
	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a	14,0	03.			
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c	,					. 25	d	14,	003.
	26	2020 estimated tax payment							,		
<ul> <li>If you have a L qualifying child,</li> </ul>	27	Earned income credit (EIC)				27					
attach Sch. EIC.   If you have	28	Additional child tax credit. A				28					
nontaxable	29	American opportunity credit				29					
combat pay, see instructions.	30	Recovery rebate credit. See		•		30					
	31	Amount from Schedule 3. lin				31					
	32	Add lines 27 through 31. The						▶ 32	,		
	33	Add lines 25d, 26, and 32. T	•						_	14	003.
	34							. 34			766.
Refund	35a	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b> Amount of line 34 you want <b>refunded to you.</b> If Form 8888 is attached, check here									766.
Direct deposit?	> b	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -									700.
See instructions.		Account number X X X					Sav	irigs			
	▶ d					<del>                                     </del>					
A	36	Amount of line 34 you want a						. 0-	_		
Amount You Owe	37	Subtract line 33 from line 24		-					_		
For details on		Note: Schedule H and Sch									
how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details.									
instructions.	38	Estimated tax penalty (see in				38					
Third Party		you want to allow another	•				0		. 🔽	No	
Designee		structions				<del></del>		lete belov	_	NO	
		signee's me ▶		Phone no. ▶			ersonai umber (l	identificatio PIN) ▶	<sup>л</sup> [ ]		$\Box$
Sign		der penalties of perjury, I declare t	hat I have examine						est of i	my knowle	edge and
Sign		lief, they are true, correct, and com									
Here	Yo	ur signature		Date	Your occupation			If the IRS	sent yo	u an Ident	ity
	k.							Protection		nter it here	e
Joint return?	<b>L</b>				SAP SOLUTI		ECT	(see inst.)			$\perp \perp \perp$
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion		If the IRS : Identity Pr			
your records.					TEACHER			(see inst.)	_	T F IIN, EIIU	T
	———Ph	one no.		Email address	TEMETITIE			,			
		eparer's name	Preparer's signat	l .		Date	PT	īN	Chr	eck if:	
Paid		I PRIYA RAM SAGAR GUPTA TALLAM	'		בווסדים די אוו. או			208270	I —	Self-emp	oloved
Preparer				AMUNG PERMI	COLIM INDIAN	102/20/202	-   FU				
Use Only		m's name ► GLOBAL TA m's address ► 2530 Pebb		n Cummin	a G7 200/1			Phone no.			
				III CUIIIIIIIII				Firm's EIN		30-101	
Go to www.irs.go	ov/Forr	n1040 for instructions and the late	st information.		BAA	REV 02/15/21	PRO			Form <b>10</b> 4	+U (2020)

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

**Additional Income and Adjustments to Income** 

OMB No. 1545-0074

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. Attachment Sequence No. **01** 

Your social security number

MURA	ALI MOHAN GANTA & AJITA DEGALA 50	05-51-0	065
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 E <b>5</b>	-3,673.
6	Farm income or (loss). Attach Schedule F	. 6	
7	Unemployment compensation	. 7	
8	Other income. List type and amount ▶		
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-N		2 672
Par	line 8	.   3	-3,673.
10	Educator expenses	. 10	
11	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	l l	
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 <b>adjustments to income.</b> Enter here a on Form 1040, 1040-SR, or 1040-NR, line 10a		

### 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

MURALI MOHAN GANTA & AJITA DEGALA

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

Your social security number 505-51-0065

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 (sales price) Form(s) 8949, Part I, combine the result (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 . . . . . . . . . . . . . . . . 457. 1,410. 1,867. 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 1,410. 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 574. 491. -83. Totals for all transactions reported on Form(s) 8949 with Box E checked . . . . . . . . . . . . . . . . . . 10 Totals for all transactions reported on Form(s) 8949 with 

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

-83.

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 1,327. • 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. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 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 qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X 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

Internal Revenue Service

Name(s) shown on return

Department of the Treasury

Social security number or taxpayer identification number

505-51-0065

MURALI MOHAN GANTA & AJITA DEGALA

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 disposed of (sales price) and see Column (e. from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (a) Code(s) from Amount of adjustment instructions with column (a) instructions ROBINHOOD SECURITIES LLC 02/05/20 11/11/20 1,867. 457. 1,410. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

**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.

1,867.

1,410.

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) ▶

457.

Form 8949 (2020) Attachment Sequence No. 12A Page

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side MURALI MOHAN GANTA & AJITA DEGALA

Social security number or taxpayer identification number

505-51-0065

Before you check Box D, E, or F 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.

### Part II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.

<ul><li>✗ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on	Form(s) 1099	-B showing bas	•		`	<del>2</del> )
1  (a) Description of property	(b) Date acquired	(c) Date sold or disposed of	<b>(d)</b> Proceeds	(e) Cost or other basis. See the <b>Note</b> below	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	(Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD SECURITIES LLC	05/07/19	06/30/20	491.	574.			-83.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 8b (if Box D above	al here and inc	lude on your					

**Note:** If you checked Box D 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.

above is checked), or line 10 (if Box F above is checked) ▶

491.

574.

### **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)

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

Name(s) shown on return Your social security number

MURA	LI MOHAN GANTA & AJITA DEGALA						50	)5-51-(	065	,	
Part	Income or Loss From Rental Real Estate and Ro	yaltie	s Note	e: If you	are in th	ne business o	f renti	ng person	al pro	perty,	use
	Schedule C. See instructions. If you are an individual, rep	ort farı	m rental	income	or loss f	rom Form 48	35 on	page 2, li	ne 40		
A Did	d you make any payments in 2020 that would require you to	file F	orm(s) 1	1099? S	See inst	ructions .			Y	es X	No
	Yes," did you or will you file required Form(s) 1099?		. ,								
1a	Physical address of each property (street, city, state, ZIF										
Α	2964 CONSUELO WAY ROUND ROCK TX 78665		,								
В											
С											
1b	Type of Property 2 For each rental real estate pro	nerty I	isted		Fair	Rental	Per	sonal Us	е		n.,
	(from list below)  3 above, report the number of fa personal use days. Check the if you meet the requirements to	ir rent	al and		1	Days		Days		Q.	JV
Α	3 personal use days. Check the if you meet the requirements to	<b>QJV</b> b	ox only	Α		365		0		Г	7
В	qualified joint venture. See inst	tructio	ns.	В						Ī	<del>-</del>
С	<del> </del>			С						Ī	<u> </u>
[vpe	of Property:										
	gle Family Residence 3 Vacation/Short-Term Rental	5 La	nd		7 Self-	Rental					
	ti-Family Residence 4 Commercial		yalties			er (describe)					
ncom				Α	0 0 11.10	E				С	
3	Rents received	3									
4	Royalties received	4									
Exper											
5	Advertising	5									
6	Auto and travel (see instructions)	6									
7	Cleaning and maintenance	7									
8	Commissions	8									
9	Insurance	9									
10	Legal and other professional fees	10									
11	Management fees	11									
12	Mortgage interest paid to banks, etc. (see instructions)	12		3,	673.						
13	Other interest	13		- ,							
14	Repairs	14									
15	Supplies	15									
16	Taxes	16									
17	Utilities	17									
18	Depreciation expense or depletion	18									
19	Other (list) ►	19									
20	Total expenses. Add lines 5 through 19	20		3,	673.						
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										
	file <b>Form 6198</b>	21		-3,	673.						
22	Deductible rental real estate loss after limitation, if any,										
	on Form 8582 (see instructions)	22	(	-3,6	573.)	(		) (			)
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a						
b	Total of all amounts reported on line 4 for all royalty prop				23b						
С	Total of all amounts reported on line 12 for all properties				23c		3,6	73.			
d	Total of all amounts reported on line 18 for all properties				23d						
е	Total of all amounts reported on line 20 for all properties				23e		3,6	73.			
24	Income. Add positive amounts shown on line 21. Do no	t inclu	ıde any	losses				24			
25	Losses. Add royalty losses from line 21 and rental real estate		_		nter tot	al losses her	e .	25 (		3,6	73.)
26	Total rental real estate and royalty income or (loss).	Comh	ine line	s 24 ar	nd 25. F	Enter the res	sult				
	here. If Parts II, III, IV, and line 40 on page 2 do not										
	Schedule 1 (Form 1040) line 5. Otherwise, include this at		-					26		<b>–</b> 3	673.

# Form **8867**

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and
Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

OMB No. 1545-0074

Attachment Sequence No. **70** 

505-51-0065

Department of the Treasury

▶ To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. ▶ Go to www.irs.gov/Form8867 for instructions and the latest information.

Internal Revenue Service Taxpayer name(s) shown on return Taxpayer identification number

Enter preparer's name and PTIN

MURALI MOHAN GANTA & AJITA DEGALA

Part I	Due Diligence Requirements
Please of	check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I-

SYAI	M PRIYA RAM SAGAR GUPTA TALLAM P020	82703	}		
Part	Due Diligence Requirements				
	e check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and contract benefit(s) claimed (check all that apply).	•	the rela		arts I–V HOH
1	Did you complete the return based on information for tax year 2020 provided by the taxpayer reasonably obtained by you?		Yes	No	N/A
2	If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS instructions, and/o AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the sinformation, and all related forms and schedules for each credit claimed?	r the same	×		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do bothe following.	th of			
	<ul> <li>Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's response determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.</li> </ul>				
	• Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH status and to figure the amount(s) of any credit(s)		×		
4	Did any information provided by the taxpayer or a third party for use in preparing the return information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yo," answer questions 4a and 4b. If "No," go to question 5.)	es,"		<b>.</b>	
	Did you make reasonable inquiries to determine the correct, complete, and consistent information?	_	$\dashv$	×	
a	Did you contemporaneously document your inquiries? (Documentation should include the ques				
b	you asked, whom you asked, when you asked, the information that was provided, and the impact information had on your preparation of the return.)	t the			
5	Did you satisfy the record retention requirement? To meet the record retention requirement, you keep a copy of your documentation referenced in 4b, a copy of this Form 8867, a copy of applicable worksheet(s), a record of how, when, and from whom the information used to prepare 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to file	must any orm the			
	the amount(s) of the credit(s)		X		
		-			
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility fo	r the			
U	credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his return is selected for audit?	s/her	X		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year? .		×		
	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)				
а	Did you complete the required recertification Form 8862?	_			
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete correct Schedule C (Form 1040)?	and .			

orm 88	867 (2020)			Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	Yes	No	N/A
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?			
Part	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	claim (	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the taxpayer has not lived with the child for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?			
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar			
	statement to the return?	X		
Part	,			
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the question and related expenses for the claimed AOTC?		Yes	No
Part	V Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing statu	s, go to	o Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax	x year	Yes	No
Part	and provided more than half of the cost of keeping up a home for the year for a qualifying person? VI Eligibility Certification			
ı are	➤ You will have complied with all due diligence requirements for claiming the applicable credit(s) as status on the return of the taxpayer identified above if you:	nd/or H	OH fili	ng
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's respo in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit( status and to figure the amount(s) of the credit(s);			
	<ul> <li>B. Complete this Form 8867 truthfully and accurately and complete the actions described in this check credit(s) claimed and HOH filing status, if claimed;</li> </ul>	list for a	ıny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 Document Retention.	67 instr	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	<ol><li>Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).</li></ol>	's eligib	ility for	the
	<ol><li>A record of how, when, and from whom the information used to prepare this form and the applica obtained.</li></ol>	ble wor	ksheet(	(s) was
	<ol><li>A record of any additional information you relied upon, including questions you asked and the tax determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount</li></ol>			
	▶ If you have not complied with all due diligence requirements, you may have to pay a \$540 penalty comply related to a claim of an applicable credit or HOH filing status.	for eac	ch failu	ire to
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct	t and	Yes	No
	complete?	.,	<b>₩</b>	<del>                                     </del>

**Passive Activity Loss Limitations** 

► See separate instructions.

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

Attachment

Identifying number

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

▶ Go to www.irs.gov/Form8582 for instructions and the latest information.

Sequence No. 858

OMB No. 1545-1008

MURALI MOHAN GANTA & AJITA DEGALA 505-51-0065 Part I 2020 Passive Activity Loss Caution: Complete Worksheets 1, 2, and 3 before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a 1a Activities with net income (enter the amount from Worksheet 1, column (a)) . 0. **b** Activities with net loss (enter the amount from Worksheet 1, column (b)) . . . 1b 3,673. c Prior years' unallowed losses (enter the amount from Worksheet 1, column (c)) 1c 1d -3,673. **Commercial Revitalization Deductions From Rental Real Estate Activities** 2a Commercial revitalization deductions from Worksheet 2, column (a) 2a Prior year unallowed commercial revitalization deductions from Worksheet 2, 2b column (b) c Add lines 2a and 2b 2c **All Other Passive Activities** 3a Activities with net income (enter the amount from Worksheet 3, column (a)) . 3a **b** Activities with net loss (enter the amount from Worksheet 3, column (b)) . . . 3b 3с c Prior years' unallowed losses (enter the amount from Worksheet 3, column (c)) 3d Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c. 2b. or 3c. 4 -3,673.If line 4 is a loss and: Line 1d is a loss, go to Part II. • Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III. • Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. 5 Enter the **smaller** of the loss on line 1d or the loss on line 4 . . . . . . . . 5 3,673. 6 Enter \$150,000. If married filing separately, see instructions . . . . . . 150,000. 7 7 Enter modified adjusted gross income, but not less than zero. See instructions 140,554. Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8. 8 Subtract line 7 from line 6 . . . . . . . 9,446. Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions 9 9 4,723. 10 10 3,673. If line 2c is a loss, go to Part III. Otherwise, go to line 15. Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Part III Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions. 11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions. 11 12 12 13 13 14 Enter the **smallest** of line 2c (treated as a positive amount), line 11, or line 13 14 **Total Losses Allowed** Part IV 15 Add the income, if any, on lines 1a and 3a and enter the total . . . . . . . . . . 15 0. Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions 3,673. 16

Caution: The worksheets must be filed to				/ for your	record	S.				
Worksheet 1—For Form 8582, Lines 1	<b>a, 1b, and 1c</b> (se	e instruction	ns)							
Name of activity	Currer	it year		Prior	years		Overall gain or loss			
Name of activity	(a) Net income (line 1a)	(b) Net lo (line 1b		(c) Una loss (li		(d)	) Gain	(e) Loss		
2964 CONSUELO WAY	0.	3,6	73.					3,673.		
Total. Enter on Form 8582, lines 1a, 1b, and 1c	0.	3,6	73.							
Worksheet 2—For Form 8582, Lines 2	a and 2b (see ins	structions)								
Name of activity	<b>(a)</b> Current deductions (		unall	<b>(b)</b> Pri owed ded	or year uctions (	line 2b)	(c)	Overall loss		
Total. Enter on Form 8582, lines 2a and										
2b ▶ Worksheet 3—For Form 8582, Lines 3	a. <b>3b. and 3c</b> (se	e instruction	ns)							
	Currer			Prior y	years		Overall g	gain or loss		
Name of activity	(a) Net income (line 3a)	(b) Net Io		(c) Unallowed loss (line 3c)		(d)	d) Gain (e) Loss			
	(iii o oa)	(1110 00	,	1000 (111	10 00)					
Total. Enter on Form 8582, lines 3a, 3b,										
and 3c · · · · · · · · · · · · · · · ► Worksheet 4—Use This Worksheet if a	n Amount Is Sh	own on Fo	rm 8	582 Line	10 or	14 Sec	inetructi	ons		
Worksheet + Ose This Worksheet in a		01111 0111 0	0	l link	7 10 01	14.000	, inoti doti			
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	6	(b) R	atio		Special wance	(d) Subtract column (c) from column (a)		
2964 CONSUELO WAY	E Ln 22	3,6	73.	1.000	00000		3,673.	0.		
Total		3,6	573.	1.0	00		3,673.	0.		
Worksheet 5—Allocation of Unallowed	d Losses (see ins	structions)								
Name of activity	Form or schedu and line numbe to be reported of (see instruction	er on	<b>(a)</b> Lo	ess	<b>(</b> b)	<b>)</b> Ratio	(c)	Unallowed loss		
Total						1 00				