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

IIILEIIIAI N	levertue del vice					
Submis	ssion Identification Number (SID)					
Taxpayer	r's name	Social secu	ırity numk	er		
SAIP	PRASANNAREDDY BOGGULA	060-1	9-146	б		
Spouse's	s name	Spouse's s	ocial secu	urity num	ber	
Part	Tax Return Information — Tax Year Ending December 31, (Ent	er year you	aro au	horizin) (a)	
	whole dollars only on lines 1 through 5.	ei yeai you	are au	LITOTIZII	ig.)	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
	Adjusted gross income		1 1	6	57.	281.
	Total tax		2			863.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			593.
4	Amount you want refunded to you		4			730.
5	Amount you owe		5			
Part I	Taxpayer Declaration and Signature Authorization (Be sure you get and	l keep a co	py of y	our re	turr	1)
return (of to send for any of Agent to paymen authoriz paymen business taxes to personal	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transimy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for ridelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the orinitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the formal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resist days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) and the financial institutions involved in the processor of the payment (settlement) and the financial institutions involved in the processor of the payment (settlement) and the financial institutions involved in the processor of the payment (settlement) and the financial institutions involved in the processor of the payment (settlement) and the financial institutions involved in the processor of the payment (settlement) and the financial institutions involved in the processor of the payment (settlement) and the financial institutions involved in the processor of the payment (settlement) and the financial institutions involved in the processor of the payment (settlement) and the financial institutions involved in the processor of the payment (settlement) and the financial institutions involved in the processor of the payment (settlement) and the financial institution and the processor of the payment (settlement) and the processor of the payment (settlement) and the processor of the payment of the processor of the payment of the processor of the payment of the processor of t	emitter, or elective ejection of the U.S. Treasury adicated in the ution to debit to atte the author equests must the processing a payment. I fi	tronic reference transmission and its of tax prepherence entry ization. The received of the elurther acceived the receiver acceptance acceptanc	turn origing ssion, (b) designate paration sto this acroved no lectronic knowled	nato the ed Fi softw ccoul e (ca ater payr	r (ERO) reason nancial vare for nt. This uncel) a than 2 ment of hat the
	yer's PIN: check one box only	Г			7	
X	-	a my DINI	9 1 4	1 6 6		as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	·	Enter five don't ente		ıt	as my
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.					
Your si	ignature ▶ Date ▶					
Snous	e's PIN: check one box only	_				
	I authorize to enter or general	a my PINI			Ι,	as my
	ERO firm name	· _	Enter five	diaits. bu	_	as my
	signature on the income tax return (original or amended) I am now authorizing.	•	don't ente	r all zero	s	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.					
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue belo	W				
Part I	Certification and Authentication — Practitioner PIN Method Only					
ERO's	EFIN/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
		Don't e	nter all ze	ros		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of	omitting this re	eturn in a	accordan	iće v	
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To	Do So				

£1040

Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return

2020

OMB No. 1545-007

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

Filing Status Check only one box.	If yo	Single Married filing jointly bu checked the MFS box, enter the son is a child but not your dependent	name of	ed filing separately your spouse. If you	` ′	_		, ,	_		, ,	. , . ,
Your first name	and m	iddle initial	Last na	ıme					Your	soc	ial security	/ number
SAIPRAS	ANNA	REDDY	BOGG	GULA					060	0-1	9-1466	5
If joint return, s	pouse's	s first name and middle initial	Last na	ime					Spou	ıse's	social sec	urity number
	•	er and street). If you have a P.O. box, se	e instructi	ons.				Apt. no.	- 1			n Campaign
3970 FUI											ere if you, (f filing joint	or your ly, want \$3
	ost offi	ce. If you have a foreign address, also c	complete s	paces below.	Sta			code			0,	Checking a
MEMPHIS			1.		TI			3125			w will not	change
Foreign country	/ name			Foreign province/state	:/coun	ty	For	eign postal cod	e your	tax	or refund.	Spouse
At any time du	ring 20	020, did you receive, sell, send, exc	change, d	or otherwise acquire	e any	financial intere	est in	any virtual	currenc	y?	Yes	⊠ No
Standard Deduction		leone can claim: You as a d Spouse itemizes on a separate retu				•						
Age/Blindness	You:	: Were born before January 2,	1956 Г	Are blind Sr	ouse	: Was bo	rn be	efore Januar	v 2. 195	6	ls blii	nd
Dependents	_		_	(2) Social securi		(3) Relationsh					(see instruc	
If more		irst name Last name		number		to you		Child tax cre		- 1		er dependents
than four]
dependents,					-							
see instruction and check	s ——											
here ▶												
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1	7	4,111.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		. [2b		1.
Sch. B if required.	За	Qualified dividends	3a		b (Ordinary divide	nds			3b		
required.	4a	IRA distributions	4a		b T	axable amoun	t.			4b		
	5a	Pensions and annuities	5a		b T	axable amoun	t.			5b		
Standard	6a	Social security benefits	6a		b T	axable amoun	t.			6b		
Deduction for—	7	Capital gain or (loss). Attach Scho	edule D i	f required. If not red	ղuired	, check here		•		7		19.
Single or Married filing	8	Other income from Schedule 1, li	ne 9 .							8	_	6,850.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8. T	This is your total in	come				•	9	6	7,281.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22				10	а					
widow(er), \$24,800	b	Charitable contributions if you take the standard deduction. See instructions 10b										
Head of	С	Add lines 10a and 10b. These are	e your to t	tal adjustments to	inco	me			•	10c		
household, \$18,650	11	Subtract line 10c from line 9. This	s is your a	adjusted gross inc	ome				•	11	6	7,281.
If you checked	12	Standard deduction or itemized	d deduct	ions (from Schedul	e A)					12	1	2,400.
any box under Standard	13	Qualified business income deduc	tion. Atta	ach Form 8995 or F	orm 8	8995-A				13		
Deduction, see instructions.	14	Add lines 12 and 13								14		2,400.
	15	Taxable income. Subtract line 1	4 from lin	e 11. If zero or less	, ente	er -0				15	5	4,881.

Form 1040 (2020))								Page 2	
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	7,863.	
	17	Amount from Schedule 2, lir					_	17	0.	
	18	Add lines 16 and 17						18	7,863.	
	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	. If zero or less,	enter -0				22	7,863.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10			23	0.	
	24	Add lines 22 and 23. This is						24	7,863.	
	25	Federal income tax withheld	•						.,	
	а	Form(s) W-2				25a	3,593.			
	b	Form(s) 1099				25b	,			
	С	Other forms (see instruction				25c				
	d	Add lines 25a through 25c	,					25d	8,593.	
	26	2020 estimated tax paymen						26	0,000	
 If you have a L qualifying child, 	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit. A				28				
If you have nontaxable	29	American opportunity credit				29				
combat pay, see instructions.	30	Recovery rebate credit. See		•		30		-		
See instructions.	31	Amount from Schedule 3, lir				31		-		
	32	Add lines 27 through 31. The	32							
	33		33	8,593.						
	34	Add lines 25d, 26, and 32. These are your total payments							730.	
Refund	35a	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid Amount of line 34 you want refunded to you. If Form 8888 is attached, check here							730.	
Direct deposit?	b b	Routing number 0 8 1	35a	750.						
See instructions.	►d	Account number 3 5 5								
	36	Amount of line 34 you want								
Amount		•						37		
You Owe	37	Subtract line 33 from line 24		-				31		
For details on		Note: Schedule H and Sch 2020. See Schedule 3, line								
how to pay, see instructions.	38	Estimated tax penalty (see in								
		you want to allow another				38 Can				
Third Party Designee		•	•				omplete l	nelow.	X No	
Designee		signee's		Phone			sonal identi			
-		me ►		no. 🕨		num	ber (PIN)	>		
Sign		der penalties of perjury, I declare								
Here	bel	ief, they are true, correct, and com	plete. Declaration	of preparer (othe	r than taxpayer) is ba	ased on all informat	ion of whicl	n prepar	er has any knowledge.	
11010	Yo	ur signature		Date	Your occupation				nt you an Identity	
l=:-tt0					 SOFTWARE I		inst.) ▶	N, enter it here		
Joint return? See instructions.	Sn	ouse's signature. If a joint return,	hoth must sign	Date	Spouse's occupat				nt your spouse an	
Keep a copy for	Ор	ouse's signature. If a joint return,	Jour mast sign.	Date	opouse s occupat			ection PIN, enter it here		
your records.							(see	inst.) 🕨		
	Ph	one no.		Email address						
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/03/2021	P0208	082703 Self-employed		
Preparer	Fire	m's name ► GLOBAL TA	XES LLC				Pho	one no. (678)965-9522		
Use Only	Fir	m's address ▶ 2530 Pebb	le Creek L	n Cummin	g GA 30041			's EIN ▶		
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 02/21/21 PR	0		Form 1040 (2020)	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

Attachment

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. Sequence No. 01

Your social security number

SAIPRASANNAREDDY BOGGULA 060-19-1466 **Additional Income** Part I 1 Taxable refunds, credits, or offsets of state and local income taxes 1 2a **b** Date of original divorce or separation agreement (see instructions) 3 3 4 4 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 5 5 -6,850. 6 6 7 7 8 Other income. List type and amount 8 Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR. 9 9 -6,850. Adjustments to Income Part II 10 Educator expenses 10 Certain business expenses of reservists, performing artists, and fee-basis government 11 11 12 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 16 17 17 18a c Date of original divorce or separation agreement (see instructions) 19 19 IRA deduction 20 20 21 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

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.

2020

OMB No. 1545-0074

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return
SAIPRASANNAREDDY BOGGULA

Your social security number 060-19-1466

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 2,339. 2,371. 51. 19. 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 19. 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** 16 Combine lines 7 and 15 and enter the result 16 19. • 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 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.

2020 Attachment Sequence No. 12A

OMB No. 1545-0074

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

Part I

Social security number or taxpayer identification number

060-19-1466

SAIPRASANNAREDDY BOGGULA

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

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 (a) instructions Robinhood Securities LLC | 04/21/20 | 11/14/20 2,339. 2,371. W 51. 19. 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.

2,339.

19.

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) ▶

2,371.

SCHEDULE E

Department of the Treasury

Internal Revenue Service (99)

(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**

Name(s) shown on return

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

Your social security number
060-19-1466

	RASANNAREDDY BO				10		. 1		00-19-146	
Part		s From Rental Real Estate and Ro instructions. If you are an individual, rep	-		-				• .	
A Dic		nts in 2020 that would require you to								
		ou file required Form(s) 1099?								Yes No
1a		each property (street, city, state, ZIF								
A		BATHULAPALLI KALLUR, KHA			r TEL	ANGAN	IA IN 50	7209)	
В	,	-								
С										
1b	Type of Property	2 For each rental real estate prop	perty l	listed		Fair	Rental	Per	sonal Use	QJV
	(from list below)	above, report the number of fa personal use days. Check the	ir rent	al and		1	Days		Days	QJV
Α	3	it you meet the requirements to	o tile a	as a	Α		365		0	
В		qualified joint venture. See inst	ructio	ns.	В					
С					С					
Туре	of Property:									
1 Sing	le Family Residence	3 Vacation/Short-Term Rental	5 La	ınd		7 Self-	Rental			
2 Mult	ti-Family Residence	4 Commercial	6 R	oyalties		8 Othe	r (describe)		
Incom	e:	Properties:			Α			3		С
3	Rents received		3			450.				
4			4							· · · · · · · · · · · · · · · · · · ·
Expen										
5	Advertising		5							
6	Auto and travel (see i	nstructions)	6							
7		nance	7			850.				
8	Commissions		8							
9	Insurance		9							
10		essional fees	10							
11	Management fees .		11		1,	050.				
12		id to banks, etc. (see instructions)	12							
13	Other interest		13							
14	Repairs		14		1,	900.				
15	Supplies		15		1,	800.				
16	Taxes		16							
17			17		1,	700.				
18	Depreciation expense	e or depletion	18							
19	Other (list)		19							
20	Total expenses. Add	lines 5 through 19	20		7,	300.				
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If								
		instructions to find out if you must								
			21		-6,	850.				
22		I estate loss after limitation, if any,								
	•	structions)	22	[(-6,8	350.)	()(
23a		eported on line 3 for all rental prope				23a		4	50.	
b		eported on line 4 for all royalty prop				23b				
С		eported on line 12 for all properties				23c				
d		eported on line 18 for all properties				23d				
е		eported on line 20 for all properties				23e		7,3		
24		e amounts shown on line 21. Do no		,					24	
25	Losses. Add royalty lo	sses from line 21 and rental real estate	losse	s from li	ne 22. E	nter tot	al losses he	re .	25 (6,850.
26		ate and royalty income or (loss).								
		V, and line 40 on page 2 do not		-						C 050
	Schedule 1 (Form 10)	40) line 5. Otherwise, include this ar	mou in	t in the t	otal or	line 41	on page 2		26	-6.850