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

Submi	ission Identification Number (SID)						
Taxpaye	er's name	Social sec	ırity num	ber			
SAI	KOUNDINYA MARKA	468-7	1-952	1			
Spouse	e's name	Spouse's s	Spouse's social security number				
Dort	Tax Return Information — Tax Year Ending December 31, 2020	(Entor year year	aro au	thorizing	<u> </u>		
Part	whole dollars only on lines 1 through 5.	(Enter year you	are au	itiionzing.)		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1 1	1 66	,958.		
2	Total tax		2		, 797.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	-	,893.		
4	Amount you want refunded to you		4		,096.		
5	Amount you owe		5		,000.		
Part		et and keep a co	py of	your retu	rn)		
my know return (to send for any Agent to payment authoric payment business taxes to person to send for the total f	penalties of perjury, I declare that I have examined a copy of the income tax return (original or a owledge and belief, it is true, correct, and complete. I further declare that the amounts in Proceedings of the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provided my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reastly delay in processing the return or refund, and (c) the date of any refund. If applicable, I author to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accept of my federal taxes owed on this return and/or a payment of estimated tax, and the financial ization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the total the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellates days prior to the payment (settlement) date. I also authorize the financial institutions involve to receive confidential information necessary to answer inquiries and resolve issues related and identification number (PIN) below is my signature for the income tax return (original or ame	art I above are the a er, transmitter, or election for rejection of the ize the U.S. Treasury count indicated in the il institution to debit to terminate the author ation requests must ed in the processing to the payment. I fear	mounts tronic re transmi and its tax pre he entry ization. be rece of the e urther ac	from the incepturn original ission, (b) the designated paration soft to this accordio revoke (ived no late electronic packnowledge	come tax tor (ERO) ne reason Financial ftware for bunt. This cancel) a er than 2 ayment of that the		
	onic Funds Withdrawal Consent.	, 					
-	ayer's PIN: check one box only	an anata may DIN	1 9	5 2 1			
×	I authorize GLOBAL TAXES LLC to enter or g			digits, but	as my		
	signature on the income tax return (original or amended) I am now authorizing.		don't ente	er all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner P below.						
Your s	signature ▶ D	oate ► 05/06/202					
Snous	se's PIN: check one box only	_					
		enerate my PIN			as my		
	ERO firm name	-	Enter five digits, but				
	signature on the income tax return (original or amended) I am now authorizing.		don't ente	er all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner P below.						
Spous	se's signature ▶ □	Date ▶					
	Practitioner PIN Method Returns Only—continue	e below					
Part	III Certification and Authentication — Practitioner PIN Method Only						
ERO's	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		
		THOU	nter all z	C109			
authori	by that the above numeric entry is my PIN, which is my signature for the electronic individual in its individual in its first that I confirm that I ements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provents.	am submitting this r	eturn in	accordance			
FRO's	s signature ▶ □	Date ▶					
	ERO Must Retain This Form — See Instruct						
	Don't Submit This Form to the IRS Unless Request						

E1040 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 uchecked the MFS box, enter the reson is a child but not your dependen	ame of y											
Your first name	and mi	iddle initial	Last nar	me					Y	our so	cial securi	ty number		
SAI KOUNDINYA				A					4	468-71-9521				
If joint return, s	pouse's	s first name and middle initial	Last nar	ne					s	pouse'	s social se	curity number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				Apt. no.	P	reside	ntial Electi	on Campaign		
1521 EA	ST R	AYAL						1232		Check here if you, or your				
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete sp	paces below.	Sta	ate	ZIF	code		spouse if filing jointly, want \$3 to go to this fund. Checking a				
FARMERS	BRA	NCH		TX 75							box below will not change			
Foreign countr	y name		F	oreign province/stat	e/cour	nty	For	eign postal co	ode your tax or refund.					
										You Spous				
At any time du	ring 20	020, did you receive, sell, send, exc	hange, o	r otherwise acqui	re any	financial ir	nterest ir	n any virtua	l curre	ency?	Yes	⋈ No		
Standard Deduction	_	eone can claim: You as a de Spouse itemizes on a separate retur		•			ent							
				7										
	-	Were born before January 2, 1	956 _	Are blind S	pouse	e: ∐ Was	s born b	efore Janua			ls b			
Dependent	,	•		(2) Social security (3) Relationship				1		- 1	fies for (see instructions): it Credit for other dependents			
If more	(1) F	irst name Last name	number			to you		Child tax cr		iit	Credit for ot	her dependents		
than four dependents,								L	<u> </u>					
see instruction	s ——							L						
and check								L	_					
here ►								L		\dashv				
Attach	_1_	Wages, salaries, tips, etc. Attach	1, ,	V-2						1		73,274.		
Sch. B if	2a	Tax-exempt interest	2a			Taxable int				2b				
required.	3a	Qualified dividends	3a	6.		Ordinary di				3b		6.		
	4a	IRA distributions	4a			Taxable am			4b					
	5a	Pensions and annuities	5a			Taxable am				5b				
Standard Deduction for—	6a	,	6a			Taxable am				6b		4.60		
Single or	7	,		dule D if required. If not required, check here						7	+	468.		
Married filing separately,	8	Other income from Schedule 1, lir								8		<u>-6,790.</u>		
\$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. I	nis is your total ir	icome					9		66,958.		
 Married filing jointly or 	10	Adjustments to income:	11											
Qualifying widow(er),	a	From Schedule 1, line 22								-				
\$24,800	\$24,800 b Charitable Contributions if you take the standard deduction. See instructions								- 40					
 Head of household, 	C	Add lines 10a and 10b. These are	•	-						100		66 050		
\$18,650	11	Subtract line 10c from line 9. This	•	-						11		66,958.		
 If you checked any box under 	12	Standard deduction or itemized		•	,					12		12,400.		
Standard Deduction,	13	Qualified business income deduct	юп. Атта	cn Form 8995 or I	-orm 8	SYSS-A .						12 400		
see instructions.	14 15	Add lines 12 and 13 Taxable income. Subtract line 14	from lin							14 15		12,400. 54,558.		
	13	i avanie ilicollie. Suntfact illie 14	HOITI IIII	z i i. ii zero or les	o, ente	JI -U				10	1 '	J 1, J J J .		

Form 1040 (2020)									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	7,797.
	17	Amount from Schedule 2, lin	-						17	
	18	Add lines 16 and 17							18	7,797.
	19	Child tax credit or credit for	other dependen	ts					19	
	20	Amount from Schedule 3, lin	ne 7						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0					22	7,797.
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 10 .				23	0.
	24	Add lines 22 and 23. This is			•			. ▶	24	7,797.
	25	Federal income tax withheld	d from:							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	а	Form(s) W-2				25a	10	,893.		
	b	Form(s) 1099				25b		,		
	С	Other forms (see instruction				25c				
	d	Add lines 25a through 25c	,			_			25d	10,893.
	26	· ·							26	10,000
 If you have a L qualifying child, 	26 2020 estimated tax payments and amount applied from 2019 return									
attach Sch. EIC.	28 Additional child tax credit. Attach Schedule 8812							\dashv		
If you have nontaxable	29									
combat pay, see instructions.	30	American opportunity credit from Form 8863, line 8								
3cc manuchons.	31	•				31				
	31 Amount from Schedule 3, line 13								32	
									33	10,893.
	34									3,096.
Refund	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here								3,096.
Direct deposit?	⊳ b									3,000.
See instructions.	►d	Account number 4 8 8 0 6 2 9 9 9 7 3 9								
	36	Amount of line 34 you want applied to your 2021 estimated tax 36								
Amount		-							37	
You Owe	37	Subtract line 33 from line 24		-						
For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.								
how to pay, see instructions.	38	Estimated tax penalty (see i	•			38				
Third Party Designee		you want to allow another	•				Yes. C	omplete	below.	× No
Boolgiloo		signee's		Phone				onal iden		
		me ▶		no. ►				ber (PIN)		
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to									
Here	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information									, ,
1.0.0	Yo	ur signature		Date	Your occupation			- 1		nt you an Identity IN, enter it here
laint vatuus 0					 SOFTWARE :	FNCTN	arrb Gaar	- 1	e inst.)	IN, enter it nere
Joint return? See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat		111111			nt your spouse an
Keep a copy for	J Gp	ouco o oignataror ir a joint rotarri,	2011 aot olg							ection PIN, enter it here
your records.								(see	e inst.) ►	
	Ph	one no.		Email address						
Paid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:
	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	1 05/0	07/2021	P0208	32703	Self-employed
Preparer Use Only	Firm's name ► GLOBAL TAXES LLC Phon						one no.	(678) 965-9522		
Use Office	Firm's address ▶ 2530 Pebble Creek In Cumming GA 30041 Firm'							n's EIN ▶	30-1017196	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV	04/16/21 PR)		Form 1040 (2020)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

SAI KOUNDINYA

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

MARKA

► 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

468-71-9521

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	-6,790.
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,	9	6 700
Par	line 8	9	-6,790.
10		10	
11	Educator expenses	10	
•	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		
	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your adjustments to income. Enter here and		
	on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

SCHEDULE 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 468-71-9521 SAI KOUNDINYA MARKA

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 (sales price) (or other basis) Form(s) 8949, Part I, combine the result 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 2,224. 1,756. 468. 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 7 468. 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 (or other basis) Form(s) 8949, Part II, (sales price) 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 9 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

Schedule D (Form 1040) 2020 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 468. • 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 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. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 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

Part I

Department of the Treasury

Social security number or taxpayer identification number

468-71-9521

SAI KOUNDINYA MARKA

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.

instructions). For long-term transactions, see page 2.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see

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). (d) Cost or other basis Gain or (loss). (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 and see Column (e) (sales price) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (Mo., day, yr.) combine the result (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions Robinhood Securities LLC |10/15/20 |12/12/20 2,224. 1,756. 468. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract 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

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.

2,224.

468.

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

1,756.

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

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.

Attachment Sequence No. **13** Your social security number

SAI	KOUNDINYA MARK	TA.						468	3-71-95	21
Part		From Rental Real Estate and Ro	valties	Note: If	vou a	are in th	e business o			
		instructions. If you are an individual, rep	-		-					
A Dic	l you make any payme	nts in 2020 that would require you to	o file Fo	rm(s) 109	9? S	ee instr	uctions .		🗆	Yes X No
		ou file required Form(s) 1099?								
1a	Physical address of	each property (street, city, state, ZIF	P code)							
Α	6-3-113 IMLIPU	RA STREET HANAMAKONDA,	WARAN	GAL TE	LANC	GANA	IN 5060	01		
В										
С										
1b	Type of Property (from list below)	For each rental real estate pro above, report the number of fa personal use days. Check the	perty lis air rental	ted and			Rental Jays		onal Use Days	QJV
Α	3	If you meet the requirements to	o file as	a	Α		365		0	
В		qualified joint venture. See ins	tructions		В					
С					С					
Type o	of Property:									•
1 Sing	gle Family Residence	3 Vacation/Short-Term Rental	5 Land	b	7	7 Self-	Rental			
	ti-Family Residence	4 Commercial	6 Roy	alties	8	3 Othe	r (describe)		
Incom	e:	Properties:			Α		E	3		С
3	Rents received		3		ļ	570.				
4	Royalties received .		4							
Expen										
5			5							
6		nstructions)	6							
7	~	nance	7		1,3	250.				
8			8							
9			9							
10		ssional fees	10							
11	-		11		1,	350.				
12		d to banks, etc. (see instructions)	12							
13			13			000.				
14			14			400.				
15			15		1,	250.				
16			16							
17			17		1,	110.				
18		e or depletion	18							
19	Other (list)		19							
20	•	lines 5 through 19	20		/,.	360.				
21		line 3 (rents) and/or 4 (royalties). If								
		instructions to find out if you must			<i>.</i>	700				
00			21		-0,	790.				
22	on Form 8582 (see in	*	22 (-6,7	90.)	()()
23a		eported on line 3 for all rental prope				23a		570	U.	
b		eported on line 4 for all royalty prop				23b				
C		eported on line 12 for all properties				23c				
d		eported on line 18 for all properties				23d		7 00		
e		eported on line 20 for all properties				23e		7,360		
24	·	e amounts shown on line 21. Do no		-				_	24	C 700
25		sses from line 21 and rental real estate							25 (6 , 790.)
26		ate and royalty income or (loss).								
		V, and line 40 on page 2 do not 40), line 5. Otherwise, include this a							26	-6,790.