Form 1040-V 2020 Page **2**

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Pennsylvania, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, Ohio, Oregon, North Dakota, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V 2020**

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service

(99) **2020**

Form 1040-V Payment Voucher

▶ Use this voucher when making a payment with Form 1040.

► Do not staple this voucher or your payment to Form 1040.

► Make your check or money order payable to the 'United States Treasury.'

Write your social security number (SSN) on your check or money order.

MANIKANTA POTHURI

4106 HARWIN CR HENRICO GLEN ALLEN VA 23060 INTERNAL REVENUE SERVICE P.O. BOX 931000 LOUISVILLE, KY 40293-1000

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 m	iddle initial	Last na	me					Y	our so	cial securit	y number
MANIKAN	ГΑ		POTH	IURI					3	85-	73-273	6
If joint return, s	pouse's	s first name and middle initial	Last na	me					Sį	pouse'	s social sec	curity number
	,	er and street). If you have a P.O. box, se CR HENRICO	ee instruction	ons.				Apt. no.	С	heck h	nere if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also d	complete s	paces below.	Sta	te	ZIP	code code			0,	itly, want \$3 Checking a
GLEN AL	LEN				V	A	23	3060	bo	ox bel	ow will not	change
Foreign country	y name		F	Foreign province/state	e/coun	ty	For	reign postal co	de yo	our tax	or refund.	Spouse
At any time du	ring 20	020, did you receive, sell, send, ex	change, c	or otherwise acquire	e any	financial in	terest in	n any virtual	curre	ncy?	Yes	∑ No
Standard Deduction		eone can claim:					nt					
Age/Blindness	you:	Were born before January 2,	1956	Are blind S	ouse	: Was	born be	efore Janua	ry 2, 1	956	☐ Is bli	ind
Dependents	-			(2) Social securi	ty	(3) Relation	nship	(4) 🗸	if quali	ifies fo	r (see instru	ctions):
If more		irst name Last name		number	,	to yo	u .	Child ta		- 1		her dependents
than four											[
dependents, see instruction	s										[
and check											[
here											[
	1	Wages, salaries, tips, etc. Attach	Form(s)	N-2						1	10	07,200.
Attach Sch. B if	2a	Tax-exempt interest	2a		b T	axable inte	rest			2b		
required.	3a	Qualified dividends	3a	180.	b C	ordinary div	idends			3b	·	180.
	4a	IRA distributions	4a		b T	axable amo	ount .			4b	<u> </u>	
	5a	Pensions and annuities	5a		b T	axable amo	ount .			5b	<u> </u>	
Standard	6a	Social security benefits	6a		b T	axable amo	ount .			6b		
Deduction for— Single or	7	Capital gain or (loss). Attach Sch	edule D if	required. If not red	quired	, check her	e .	•	▶ □	7	2	26 , 378.
Married filing	8	Other income from Schedule 1, li	ne 9 .							8		32,800.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7	, and 8. T	his is your total in	come				. ▶	9	10	00,958.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22				[10a					
widow(er), \$24,800	b	Charitable contributions if you tak	e the star	ndard deduction. Se	e inst	ructions	10b	3	300.			
Head of	С	Add lines 10a and 10b. These are	e your tot	al adjustments to	incor	ne				100	>	300.
household, \$18,650	11	Subtract line 10c from line 9. This	s is your a	adjusted gross inc	ome				. ▶	11	10	00,658.
If you checked	12	Standard deduction or itemized	d deduct	ions (from Schedul	e A)					12	: 1	12,400.
any box under Standard	13	Qualified business income deduc	tion. Atta	ch Form 8995 or F	orm 8	995-A .				13		
Deduction, see instructions.	14	Add lines 12 and 13								14	.]	12,400.
See marructions.	15	Taxable income. Subtract line 1	4 from lin	e 11. If zero or less	s, ente	r-0				15		88,258.

Form 1040 (2020)									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	15,245.
	17	Amount from Schedule 2, lin	ne 3						17	
	18	Add lines 16 and 17							18	15,245.
	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	15,245.
	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	15,245.
	25	Federal income tax withheld	d from:							,
	а	Form(s) W-2				25a	14	343.		
	b	Form(s) 1099				25b		,		
	С	Other forms (see instruction				25c				
	d	Add lines 25a through 25c	,						25d	14,343.
	26	2020 estimated tax paymen							26	,
 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			-	
occ mondendino.	31	Amount from Schedule 3, lin				31			-	
	32	Add lines 27 through 31. Th					edite	•	32	
	33	Add lines 25d, 26, and 32. T	,						33	14,343.
	34	If line 33 is more than line 24		<u> </u>					34	11,515.
Refund	35a	Amount of line 34 you want				•	=		35a	
Direct deposit?	⊳ b	Routing number X X X			► c Type:			Savings		
See instructions.	►d	Account number X X X						Cavings		
	36	Amount of line 34 you want								
Amount	37	Subtract line 33 from line 24						•	37	902.
You Owe		Note: Schedule H and Sch		-						
For details on		2020. See Schedule 3, line	·	•	•	or the t	.axes you	OWE 101		
how to pay, see instructions.	38	Estimated tax penalty (see i	•			38				
Third Party	Do	you want to allow another				See				
Designee		structions	•				🗌 Yes. C	omplete	below.	X No
-		signee's		Phone				onal ident		
		me ►		no. ►				ber (PIN)		
Sign		der penalties of perjury, I declare ief, they are true, correct, and con								
Here		ur signature	ipicio. Deciaration	Date	Your occupation	asca on	all lillorifiati			nt you an Identity
	, 10	ur signature		Date	Tour occupation					IN, enter it here
Joint return?					SOFTWARE I	ENGIN	IEER	(see	e inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat	tion				nt your spouse an
Keep a copy for your records.	,								ntity Prote e inst.) ▶	ection PIN, enter it here
your rootido.								(See	e inst.)	
		one no.	I	Email address		T		DTINI		0
Paid		eparer's name	Preparer's signat			Date		PTIN		Check if:
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	1 04/2	26/2021	P0208		Self-employed
Use Only		m's name ► GLOBAL TA								(678) 965-9522
		m's address ▶ 2530 Pebb		n Cummin	g GA 30041			Firn	n's EIN ▶	
Go to www.irs.go	v/Forn	n1040 for instructions and the late	est information.		BAA	REV	04/16/21 PR	0		Form 1040 (2020)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

2020 Attachment Sequence No. 01

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

MANIKANTA POTHURI

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

385-73-2736

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	-32,815.
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ► Substitute Payment from 1099-Misc 1. Other Income from box 3 of 1099-Misc 14.	8	15.
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR,		10.
	line 8	9	-32,800.
Par	t II Adjustments to Income		
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

SCHEDULE C (Form 1040)

Department of the Treasury

Profit or Loss From Business

(Sole Proprietorship)

▶ Go to www.irs.gov/ScheduleC for instructions and the latest information. Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074 Attachment Sequence No. 09

Social security number (SSN) Name of proprietor 385-73-2736 MANIKANTA POTHURI B Enter code from instructions Α Principal business or profession, including product or service (see instructions) **▶** | 5 | 1 | 9 | 1 | 0 | 0 SOFTWARE ENGINEER C Business name. If no separate business name, leave blank. D Employer ID number (EIN) (see instr.) E Business address (including suite or room no.) ► 4106 HARWIN CR HENRICO City, town or post office, state, and ZIP code GLEN ALLEN, VA 23060 F Accounting method: (1) X Cash (2) Accrual (3) ☐ Other (specify) ► × Yes G Did you "materially participate" in the operation of this business during 2020? If "No," see instructions for limit on losses ... Н ☐ Yes × No Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions ☐ No If "Yes," did you or will you file required Form(s) 1099? . . Part I Income Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on 1 1 2 2 3 Subtract line 2 from line 1 3 Cost of goods sold (from line 42) 4 5 5 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . 6 7 Gross income. Add lines 5 and 6 Part II Expenses. Enter expenses for business use of your home only on line 30. Advertising Office expense (see instructions) 19 19 Pension and profit-sharing plans . 9 Car and truck expenses (see 20 9 14,375. instructions). Rent or lease (see instructions): 10 10 Commissions and fees . Vehicles, machinery, and equipment 20a а 14,400. 11 Contract labor (see instructions) 11 b Other business property . . . 20b 200. 12 Depletion 12 21 Repairs and maintenance . . . 21 Depreciation and section 179 13 22 Supplies (not included in Part III) . 22 expense deduction (not 23 Taxes and licenses included in Part III) (see 24 13 Travel and meals: instructions). 14 Employee benefit programs Travel. . . . 24a (other than on line 19). . 14 Deductible meals (see 2,400. 15 Insurance (other than health) 15 instructions) 24b 25 1,440. 25 16 Interest (see instructions): Utilities 26 Mortgage (paid to banks, etc.) 16a Wages (less employment credits). 26 а 16b b Other 27a Other expenses (from line 48) . . 27a 17 Legal and professional services 17 Reserved for future use . . 27b 32,815. 28 Total expenses before expenses for business use of home. Add lines 8 through 27a 28 29 29 -32,815. 30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. **Simplified method filers only:** Enter the total square footage of (a) your home: . Use the Simplified and (b) the part of your home used for business: Method Worksheet in the instructions to figure the amount to enter on line 30 30 31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. 31 -32,815. • If a loss, you must go to line 32. 32 If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule 32a X All investment is at risk. SE, line 2. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on 32b Some investment is not Form 1041, line 3. at risk. If you checked 32b, you must attach Form 6198. Your loss may be limited.

BAA

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

Part	Cost of Goods Sold	(see instructions)				
33	Method(s) used to value closing inventory: a	☐ Cost b ☐ Lower of cost o	r market c \(\sigma\) Other	(attach exp	olanation)	
34	Was there any change in determine	ning quantities, costs, or valuations betw	een opening and closing inve	ntory?	Yes	☐ No
35	Inventory at beginning of year. If	different from last year's closing inventor	y, attach explanation	. 35		
36	Purchases less cost of items with	ndrawn for personal use		. 36		
37	Cost of labor. Do not include any	amounts paid to yourself		. 37		
38	Materials and supplies			. 38		
39	Other costs			. 39		
40	Add lines 35 through 39			. 40		
41	Inventory at end of year			. 41		
42	Cost of goods sold. Subtract lin	ne 41 from line 40. Enter the result here a	nd on line 4	. 42		
Part		Vehicle. Complete this part onl to file Form 4562 for this business				
43	When did you place your vehicle	in service for business purposes? (month	n/day/year) ▶ 07/05/2	019		
44	Of the total number of miles you	drove your vehicle during 2020, enter the	number of miles you used yo	our vehicle	for:	
а	Business 25,0	b Commuting (see instructions)		c Other _		25,000
45	Was your vehicle available for per	rsonal use during off-duty hours?			. X Yes	☐ No
46	Do you (or your spouse) have and	other vehicle available for personal use?.			. Yes	⊠ No
47a	Do you have evidence to support	your deduction?			. Yes	⊠ No
b	If "Yes," is the evidence written?				. Yes	☐ No
Part	V Other Expenses. Lis	t below business expenses not in	ncluded on lines 8-26 o	r line 30.		
48	Total other expenses. Enter her	re and on line 27a		. 48		

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

► Go to www.irs.gov/ScheduleD for instructions and the latest information.

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

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

2020

OMB No. 1545-0074

Attachment Sequence No. **12**

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

MANIKANTA POTHURI

Your social security number 385-73-2736

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 1,269,014. 1,245,955. 3,519. 26,578. 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 103. 109. -6. Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 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 26,572. 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 202. -193. Totals for all transactions reported on Form(s) 8949 with 10 Totals for all transactions reported on Form(s) 8949 with -1. 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss)

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

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

BAA

-194.

11

12

13

14

15

Schedule D (Form 1040) 2020 Page 2

Part III Summary 26,378. 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 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**

Department of the Treasury

Internal Revenue Service

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

Name(s) shown on return
MANIKANTA POTHURI

Social security number or taxpayer identification number

385-73-2736

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.

Part I 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.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

	(B) Short-term transactions (C) Short-term transactions				sis wasn't report	ed to the IF	RS	•
1	(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an a	any, to gain or loss. amount in column (g), de in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)
	(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (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)
Robi	nhood Securities LLC	01/01/20	12/31/20	1,257,759.	1,238,486.	W	3 , 519.	22,792.
APE:	X CLEARING	01/01/20	12/31/20	11,255.	7,469.			3,786.
ne Se	otals. Add the amounts in columns egative amounts). Enter each total chedule D, line 1b (if Box A above is checked), or line 3 (if Box boxe is checked).	al here and inc e is checked), li i	lude on your ne 2 (if Box B	1.269.014	1.245.955.		3.519.	26.578.

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.

Form 8949 (2020) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side MANIKANTA POTHURI

Social security number or taxpayer identification number 385 - 73 - 2736

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.

✗ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on	Form(s) 1099	-B showing bas)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a co	f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (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	01/01/19	12/31/20	9.	202.			-193.
2 Totals. Add the amounts in columns negative amounts). Enter each tota 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) ▶

9.

202.

8949

Department of the Treasury

Internal Revenue Service

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 Attachment Sequence No. 12A

Name(s) shown on return MANIKANTA POTHURI Social security number or taxpayer identification number

385-73-2736

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. Part I 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. (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 X (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 (g), (h) (e) enter a code in column (f). (d) Cost or other basis Gain or (loss). (c) (a) (b) Proceeds See the **Note** below See the separate instructions. Subtract column (e) Date sold or 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.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD CRYPTO LLC	01/01/20	12/31/20	100.	100.			0.
Robinhood Securities LLC	01/01/20	12/13/20	3.	9.			-6.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and ince is checked), lir	lude on your ne 2 (if Box B	103.	109.			-6.

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.

Form 8949 (2020) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side MANIKANTA POTHURI

Social security number or taxpayer identification number 385-73-2736

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.

(D)	Long-term transactions	reported on Form(s)	1099-B showing	basis was	reported to the	IRS (see N	l ote above)
/ -\	and the second second		4000 D I '			1 100	

(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

5	X.	(F	F)	Long-term	transactions	not re	ported to	you on	Form	1099-l	Ξ

(i) Long-term transactions	not reported	to you on i c	JIII 1099-D				
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	disposed of (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	01/01/19	12/31/20	2.	3.			-1.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	I here and inc is checked), lir	lude on your ne 9 (if Box E	2.	3.			-1.

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.

MANIKANTA POTHURI 385-73-2736 1

Additional information from your 2020 Federal Tax Return

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

Ln 24b: 50% limit Itemization Statement

Description	Amount
M&E (240D*\$20P.D) AS PER IRS PUB 1542	4,800.
Total	4,800.

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

Line 20b Itemization Statement

Description	Amount
RENT (12M*\$1200 P.M)	14,400.
Total	14,400.

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

Line 25 Itemization Statement

Description	Amount
TELEPHONE BILLS(12M*\$70 PM)	840.
INTERNET BILLS(12M*\$50 PM)	600.
Total	1,440.





MANIKANTA

POTHURI

4106 HARWIN CR HENRICO

GLEN ALLEN

VA 23060

					
SSN - You PC	TH	385732736	Vendor ID 1555		XXXXXX 7
SSN - Spouse					
Fed Adj Gross Income (FAGI)	1.	100658.	Withholding (VA) - You	19A.	5362.
Additions	2.		Withholding (VA) - Spouse	19B.	
Subtotal	3.	100658.	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 Overpaymer	nt 6.		Credit - Schedule OSC	24.	
Subtractions	7.		Credits - Schedule CR	25.	
Subtotal Subtractions	8.		Total Payments / Credits	26.	5362.
Total VA Adj Gross Income (VA	(GI) 9.	100658.	Tax You Owe	27.	
Itemized Deductions - VA Sch	A 10.		Tax Overpayment	28.	144.
Standard Deduction	11.	4500.	Overpayment Credited to Next Year	29.	
Exemptions	12.	930.	VAC - Virginia 529 / ABLEnow	30.	
Deductions	13.		VAC - Other Contributions	31.	
Subtotal (Deductions & Exemp	tions) 14.	5430.	Addition to Tax, Penalty & Interest	32.	
VA Taxable Income	15.	95228.	Sales and Use Tax	33.	
Amount of Tax	16.	5218.	Amount You Owe Will Pay by Credit/Debit Card N		
Spouse Tax Adjustment (STA)	17.		Your Refund	ı	144.
VAGI - Spouse	17A.		Bank Routing #	C	051400549
Net Amount of Tax	18.	5218.	Bank Account #		55680
L	_		Danit/1000dit()	10001	

__LAR __DLAR __DTD __LTD \$_____

Page 1 of 2





Filing Status, Age & License Info	ormation	Additional Filing Information	on _	
Filing Status	1	Locality	087	
Federal Head of Household		Name or Filing Status Change		
DOB - You	08191993	Address Change		
VA Driver's License ID - You	В65319008	VA Return Not Filed Last Year		
VA Driver's License - Iss. Date - Y	ou 10292020	Dependent on Another's Return		
Spouse Name (Filing Status 3 On	y)	Farmer / Fisherman / Merchant Seaman		
		Amended		
DOB - Spouse		Reason Code Overseas on Due Date		
VA Driver's License ID - Spouse				
VA Driver's License - Iss. Date - S		Federal EIC & Amount		
You 1	Exemptions (B) 65 & Over - You	Deceased Indicator		
Spouse	65 & Over - Spouse	No Sales & Use Tax Due Indicator	X	
Dependents	Blind - You	Obtain Electronic 1099G		
Total (A)	Blind - Spouse	ID Theft PIN		
	Total (B)			
С	ontact Information			

(We), the undersigned, declare under penalty of law that I (we) have examined this return & to the best of my (our) knowledge, it is a true, correct & complete return. If you are requesting direct deposit of your refund by providing bank information on your return, you are certifying that the information provided is for a domestic account within the territorial jurisdiction of the United States.

Signature - You	Date		Phone - You		2606673446
Signature - Spouse	Date		Phone - Spouse		
Signature - Preparer <u>SYAM PRIYA RAM SAGAR GUPTA TALLAM</u>	Date	042621	Phone - Preparer		6789659522
The Tax Department may discuss my/our return with my/our pr	eparer.		Preparer Information	7	P02082703

GLOBAL TAXES LLC

2530 PEBBLE CREEK LN CUMMING

GA 30041

Page 2 of 2

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

supporting 760CG documents.

2020 Schedule INC/CG

385732736

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



POTHURI



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Γ					٦
385732736	M	5362.	472954697	30472954697F001	107200.

 Total VA Withholding
 SSN
 VA Withholding

 You
 385732736
 5362.

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

2020 Schedule FED/CG

MANIKANTA

POTHURI

087

4106 HARWIN CR HENRICO

GLEN ALLEN VA 23060

385732736

SCHEDULE C and/or SCHEDULE F INFORMATION

	30111	DOLL C and/or Scribbor	LL I INI ONWATION		
1.	Schedule Name	First Schedule Info.	С	Second Schedule Info.	
2.	Gross Receipts or Sales				
3.	epreciation/Expense Deduction				
4.	Business Activity Code	519100			
5.	Business Locality Code	590			
6.	Car & truck expenses	14375.			
7.	Inventory at end of year				
8.	# of miles you used your vehicle for: Business	25000			
9.	# of miles you used your vehicle for: Commuting				
10.	# of miles you used your vehicle for: Other	25000			
		COUEDINE 2400 INC	ODMATION		

SCHEDULE 2106 INFORMATION

- 11. # of miles you used your vehicle for: Business
- 12. # of miles you used your vehicle for: Commuting
- 13. # of miles you used your vehicle for: Other
- 14. % of business use of vehicle: Vehicle 1
- 15. % of business use of vehicle: Vehicle 2

SCHEDULE 4562 INFORMATION

- 16. Property Used more than 50% in qualified business Type of Property
- 17. ate placed in service
- 18. Business/Investment Use %
- 19. Cost or other basis
- 20. Depreciation Deduction
- 21. Elected Section 179 Cost
- 22. Business Locality Code

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!

Virgir	ia Submission Identification Number (SID)					
Your	Name	B Your Social Sec	curity Number			
MAN]	KANTA POTHURI	385-73-27	36			
Spou	se's Name	A Spouse's Social				
Part	I Tax Return Information	A Spouse	B Yourself			
1.	Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)		100658.			
2.	Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		100658.			
3.	Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		95228.			
4.	Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		5218.			
5.	Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		5362.			
6.	Amount you Owe (Form 760CG, Line 35; Form 760PY, Line 35; Form 763, Line 35)		0002.			
7.	Refund (Form 760CG, Line 36; 760PY, Line 36; Form 763, Line 36)		144.			
Part	II Declaration of Taxpayer and Signature Authorization					
numb filing liable Virgin refund of the signa	n Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security ter) and the amount shown in Part I above agree with the information and amounts shown on the corresponding line a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service in Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return at or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber sure pen, or computer software program. Agree's e-File PIN: check one box only I authorize the ERO named below to enter my e-File PIN 3 2 7 3 6 as my signature on my 2020 e-file Do not enter all zeros	s of my electronic incord timely payment of my se Provider to transmit rand, if applicable, the didirectly involve a financistamp, mechanical devi	ne tax return. If I am tax liability, I remain ny complete return to rect deposit of my cial institution outside ce, such as a			
	GLOBAL TAXES LLC					
	ERO Firm Name I will enter my e-File PIN as my signature on my 2020 e-filed Virginia individual income tax return. Check this box and 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	Your Signature Date					
	se's e-File PIN: check one box only					
	I authorize the ERO named below to enter my e-File PIN as my signature on my 2020 e-file Do not enter all zeros	ed Virginia individual inc	ome tax return.			
	ERO Firm Name					
	I will enter my e-File PIN as my signature on my 2020 e-filed Virginia individual income tax return. Check this box and 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			
•	se's Signature Date					
Part	III 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				
above Electror cor	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'	Signature Date04-2	6-21				