# 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

	1.01.01.00							
Submis	ssion Identification Number (SID)							
Taxpaye	r's name	Social securi	al security number					
GANG	GA MANOJ SRIRAMPURAM	375-67	375-67-2551					
Spouse's	s name	Spouse's soo	Spouse's social security number					
Part	Tax Return Information — Tax Year Ending December 31, 2020 (Ent	er year you a	re aut	thorizina	1			
	whole dollars only on lines 1 through 5.	er year you a	i e au	inonzing.	<i>)</i>			
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
	Adjusted gross income		1 1	1	,009.			
	Total tax		2	_	0.			
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		76.			
	Amount you want refunded to you		4		76.			
	Amount you owe		5					
Part		keep a cop	y of y	our retu	rn)			
my kno return (of to send for any Agent to payment authoriz payment business taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amendowledge 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, transing my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the originate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the office of my federal 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 terminate, 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 payment information necessary to answer inquiries and resolve issues related to the alignment in the content of the payment (PIN) below is my signature for the income tax return (original or amended) I nic Funds Withdrawal Consent.	ove are the amounter, or electro- ejection of the to U.S. Treasury andicated in the to ution to debit the atte the authorizate equests must be the processing of a payment. I fur	ounts fonic retransmised ax preparation. The receive of the electrons of t	from the incurrence of the control o	come tax tor (ERO) ne reason Financial tware for bunt. This cancel) a er than 2 syment of that the			
	yer's PIN: check one box only		Τ.Τ.					
$\times$	-	e mv PIN	2 5	5 5 1	as my			
<u> </u>	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	ao 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 <b>and</b> 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 generat	a my PINI			as my			
ш	ERO firm name	_	ter five	digits, but	asiny			
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros				
	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 <b>and</b> 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	<b>EFIN/PIN.</b> 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 ent	er all ze	eros				
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 <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of	omitting this retu	urn in a	accordance				
ERO's	signature ▶ Date ▶							
	ERO Must Retain This Form — See Instructions							
	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

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 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	ime					Your	Your social security number			
GANGA MANOJ				RAMPURAM					375	375-67-2551			
If joint return, spouse's first name and middle initial				me					Spou	Spouse's social security number			
	•	er and street). If you have a P.O. box, se	e instructi	ons.				Apt. no.	- 1			on Campaign	
		RA DRIVE			104-		710				re if you, filing joint	tly, want \$3	
		ce. If you have a foreign address, also c	complete s	lete spaces below. State MI			1 10170 1		to go	to go to this fund. Checking a			
SOUTH LYON  Foreign country name				Foreign province/state/county			<u> </u>		_	box below will not change your tax or refund.  You Spouse			
									le your				
At any time du	ring 20	020, did you receive, sell, send, exc	change, c	or otherwise acquire	e any	financial intere	est in	any virtual	currency	/? [	Yes	<b>⊠</b> No	
Standard Deduction		<b>leone can claim:</b> You as a d Spouse itemizes on a separate retu	•										
Age/Blindness	you:	Were born before January 2,	1956	Are blind S	oouse	: Was bo	rn be	efore Januar	y 2, 195	6	☐ Is bli	nd	
Dependent				(2) Social securi		(3) Relationsh					see instruc	ctions):	
If more		irst name Last name		number		to you		Child tax cred		- 1		er dependents	
than four													
dependents,									]				
see instruction and check	5 —								]				
here ►													
	1_	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1		773.	
Attach	2a	Tax-exempt interest	2a		<b>b</b> T	axable interes	t			2b			
Sch. B if required.	3a	Qualified dividends	3a		b C	Ordinary divide	nds			3b			
required.	4a	IRA distributions	4a		b T	axable amour	ıt.			4b			
	5a	Pensions and annuities	5a		b T	axable amour	ıt.			5b			
Standard	6a	Social security benefits	6a		<b>b</b> T	axable amour	ıt.			6b			
Deduction for— Single or	7	Capital gain or (loss). Attach School	edule D if required. If not required, check here						7		236.		
Married filing	8	Other income from Schedule 1, line 9								8			
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							<b>•</b>	9		1,009.	
Married filing	10	Adjustments to income:											
jointly or Qualifying	а	From Schedule 1, line 22											
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 your total adjustments to income							<b>•</b>	10c			
household, \$18,650	11	Subtract line 10c from line 9. This is your adjusted gross income							<b>•</b> _	11		1,009.	
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 deduction. Attach Form 8995 or Form 8995-A								13			
Deduction, see instructions.	14	Add lines 12 and 13								14	1	2,400.	
	15	Taxable income. Subtract line 14	4 from lin	e 11. If zero or less	, ente	er -0				15		0.	

Form 1040 (2020	)								Page <b>2</b>
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	0.
	17	Amount from Schedule 2, lin	-				_	17	
	18	Add lines 16 and 17						18	0.
	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	0.
	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 total tax				▶	24	0.
	25	Federal income tax withheld	I from:						
	а	Form(s) W-2				25a	76.		
	b	Form(s) 1099				25b		7	
	С	Other forms (see instruction	s)			25c		7	
	d	Add lines 25a through 25c						25d	76.
If you have a	26	2020 estimated tax paymen	ts and amount a	pplied from 20	)19 return			26	
qualifying child,	27	Earned income credit (EIC)			<sup>N</sup> o .	27			
attach Sch. EIC.	28	Additional child tax credit. A				28			
nontaxable	29	American opportunity credit	from Form 8863	3, line 8		29			
combat pay, see instructions.	30	Recovery rebate credit. See				30			
	31	Amount from Schedule 3, lir				31		7 1	
	32	Add lines 27 through 31. The	32						
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>							76.
Defund	34	If line 33 is more than line 24	•					34	76.
Refund	35a								76.
Direct deposit?	▶b	Routing number 1 1 1				_	Savings		
See instructions.	►d	Account number 4 8 8							
	36	Amount of line 34 you want							
Amount	37	Subtract line 33 from line 24	. This is the <b>am</b> e	ount you owe	now		▶	37	
You Owe		Note: Schedule H and Sch							
For details on how to pay, see		2020. See Schedule 3, line 1							
instructions.	38	Estimated tax penalty (see in							
<b>Third Party</b>		you want to allow another	person to disc	cuss this retu	rn with the IRS?				
Designee	ins	tructions					•		<b>X</b> No
		signee's ne ▶		Phone no. ▶			sonal ident ber (PIN)		
0:		der penalties of perjury, I declare t	that I have everning		d accompanying och				et of my knowledge and
Sign		ief, they are true, correct, and com							
Here	You	ur signature		Date	Your occupation		If th	e IRS ser	nt you an Identity
	\	g					Prot	ection Pl	N, enter it here
Joint return?					DATA MANAGI	ER (see	inst.) 🕨		
See instructions. Keep a copy for	Spouse's signature. If a joint return, <b>both</b> must sign.			Date	Spouse's occupat				nt your spouse an
your records.								inst.)	ection PIN, enter it here
		one no. (901) 337-623	7	Email address	MAN∩ TCD TD AMDI	JRAM95@GMAIL.C	,		
		eparer's name	Preparer's signat		MANOUSKIKAMP	Date	PTIN		Check if:
Paid	'		1 .		בווסיים יימודמא		P0208	2703	Self-employed
Preparer						11/20/2021			(678) 965-9522
Use Only		n's name ► GLOBAL TA: n's address ► 2530 Pebb.		n Cummin	~ CZ 300/1				·
0-1				III CUIIIIIIIIII			<u> </u>	n's EIN ▶	
GO TO WWW.Irs.go	v/r-orm	n1040 for instructions and the late	ist information.		BAA	REV 08/30/21 PR	U		Form <b>1040</b> (2020)

#### SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

#### **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

2020

Attachment Sequence No. **12** 

Name(s) shown on return Your social security number 375-67-2551 GANGA MANOJ SRIRAMPURAM 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. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) 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 . . . . . . . . . . . . . . 8,934. 8,874. 176. 236. 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 . . . . . . . . 7 236. 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 16 236. • 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? ☐ 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

Part I

Social security number or taxpayer identification number

375-67-2551

GANGA MANOJ SRIRAMPURAM

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) (e) enter a code in column (f). (d) Cost or other basis Gain or (loss). (c) (a) (b) See the separate instructions. Date sold or Proceeds See the **Note** below 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 10/23/20 12/25/20 8,847. 8,783. W 176. 240. ROBINHOOD CRYPTO LLC 10/26/20 12/25/20 87. 91 -4. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

8,934.

236.

negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

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

8,874.