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

- Internal n	leveliue Selvice					
Submis	ssion Identification Number (SID)					
Taxpayer	r's name	Social secu	rity numb	er		
MOHI	NDER NIDIGUNTAPALEM	675-9	7-7109)		
Spouse's	s name	Spouse's so	cial secu	rity nu	mber	
Part	Tax Return Information — Tax Year Ending December 31, 2020 (Enter year you	are aut	horiz	ina)	
	whole dollars only on lines 1 through 5.	Linter year you	are au	HOHZ	iiig.)	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
	Adjusted gross income		111		57,	894.
	Total tax		2			795.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		6,	387.
4	Amount you want refunded to you		4			592.
5	Amount you owe		5			
Part I	Taxpayer Declaration and Signature Authorization (Be sure you get a	and keep a co	py of y	our r	eturr	1)
return (o to send for any o Agent to payment authorize payment business taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part original or amended) I am now authorizing. I consent to allow my intermediate service provider, to my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason if delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account 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 tend to the payment (settlement) date. I also authorize the financial institutions involved to receive confidential information necessary to answer inquiries and resolve issues related to ali identification number (PIN) below is my signature for the income tax return (original or amended in Funds Withdrawal Consent.	ransmitter, or election rejection of the the U.S. Treasury nt indicated in the stitution to debit the minate the authorin requests must lin the processing the payment. If the	ronic ret transmis and its c tax prep e entry t zation. To be received of the ele	urn ori sion, (lesigna aratior o this o revo yed no ectroni knowle	ginato (b) the ated Fin softwaccou oke (ca o later ic payredge t	r (ERO) reason nancial vare for nt. This uncel) a than 2 ment of hat the
	yer's PIN: check one box only					
X	l authorize GLOBAL TAXES LLC to enter or gene	erate mv PIN 🗀	7 7 1		9	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	· E	nter five on't ente			,
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.					
Your si	gnature ▶ Date	e >				
Spouse	e's PIN: check one box only	_				
	I authorize to enter or gene	erate my PIN				as my
	ERO firm name		nter five	digits, l		ao my
	signature on the income tax return (original or amended) I am now authorizing.	d	on't ente	r all zer	ros	
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.					
Spouse	e's signature ▶ Date	e >				
	Practitioner PIN Method Returns Only—continue b	elow				
Part II	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
			nter all ze	ros		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I amount of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Provider	submitting this re	turn in a	ccorda	anće v	
ERO's	signature ► Date	.				
	ERO Must Retain This Form — See Instruction	ns				
	Don't Submit This Form to the IRS Unless Requested					

E 1 1 1 Department of the Treasury—Internal Revenue Service (99) | 90 | 20

IRS Use Only—Do not write

e I UHU		U.S. Nonresident A	lien In	come Tax	Return	1 <i>Œ</i> (/2U	OMB N	lo. 154	5-0074	or staple in t	his space.
Filing Status		Single Married filing separa			ried)	Qualify	ying wido	w(er) (Q	W)			
Check only one box.	, ,	ou checked the QW box, enter the chalifying person is a child but not you										
Your first name	and r	middle initial	Last n	ame						Your ide	entifying nu	umber
MOLLTNDED			NITDI		יזאת					`	,	
MOHINDER Home address ('numh	per and street or rural route). If you h		GUNTAPALE				Apt. no.			97-7109 : 🔀 Indivi	
1600 WICK		· •	ave a r .v	5. Box, 300 mar	ractions.			7.pt. 110. 2060		O'IOOK III	_	e or Trus
		ce. If you have a foreign address, also	complete	spaces below.	State		ZIP cod					
AUSTIN TX	78	741										
Foreign country	nam	e F	oreign pr	ovince/state/co	ounty		Foreign	postal c	ode			
At any time duri	ng 20) 20, did you receive, sell, send, exch	nange, or	otherwise acqu	ire any fin	ancial in	terest in	any virtu	ıal cur	rency?	☐ Yes	X No
D				<u> </u>					(4)	4 if auali	fies for (see	inatr \
Dependents (see instructions):					(2) Dependent's (3) Depend		Dependen	t's		tax credi	1 0	for other
(see manachons).		(1) First name Last name		identifying number relati			onship to	you	Crilla			ndents
If more than four										<u> </u>		
dependents, see										<u> </u>		
instructions and										<u> </u>		-
check here ►										Н.	[
Income	1a	Wages, salaries, tips, etc. Attach F	` '							1a	59	,919.
Effectively	b	Scholarship and fellowship grants.		. ,	•	1	ent. See	instructi	ons .	1b		
Connected	С	Total income exempt by a treaty f	rom Sch	edule OI (Form	1040-NR)), Item						
With U.S.	•	L, line 1(e)			 . . .		1c			-	1	
Trade or	2a		2a				erest			2b		3.
Business	3a		3a			•	idends .			3b		٥.
	4a		4a			able am				4b		
	5a		5a		b rax	able am	ount			5b		
	6	Reserved for future use			 					7		472.
	7	Capital gain or (loss). Attach Scheoother income from Schedule 1 (Fo	•							8		4/2.
	8	,	,							• 9	60	,394.
	9 10	Add lines 1a, 1b, 2b, 3b, 4b, 5b, 7, Adjustments to income:	and o. i	riis is your tota i	enective	iy Comin		one .	. •	9	00	1,394.
		From Schedule 1 (Form 1040), line	20				100	2	,500	,		
	a b	Charitable contributions for certain				ı	10a 10b		, 500	, ·		
		Scholarship and fellowship grants				1	10c					
	c d	Add lines 10a through 10c. These					100		. •	▶ 10d	,	2,500.
	u 11	Subtract line 10d from line 9. This	•	-						11	1	,894.
	12	Itemized deductions (from Sched	-	-				India et	andar		37	,0,1.
	-	deduction. See instructions					uents of US/In				1 2	,400.
	13a	Qualified business income deducti				1	13a			12		., 100.
	b	Exemptions for estates and trusts				ı	13b					
		Add lines 13a and 13b	•							13c	1	

Taxable income. Subtract line 14 from line 11. If zero or less, enter -0- .

14

BAA

14

15

12,400.

45,494.

Form 1040-NR (2	2020)										Page 2
	16	Tax (see instructions). Check if any from	Form(s):	1 🗌 8	814 2	497	2 3			16	5,795.
	17	Amount from Schedule 2 (Form 1040),	line 3.							17	0.
	18	Add lines 16 and 17								18	5,795.
	19	Child tax credit or credit for other depe	endents							19	
	20	Amount from Schedule 3 (Form 1040),	line 7.							20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18. If zero or	less, ente	er -0						22	5,795.
	23a	Tax on income not effectively conne from Schedule NEC (Form 1040-NR), I					23a				
	b	Other taxes, including self-employmer line 10	,		`	,,	23b				
	С	Transportation tax (see instructions)					23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is your total	ıl tax .						. ▶	24	5,795.
	25	Federal income tax withheld from:									
	а	Form(s) W-2					25a	6	387.		
	b	Form(s) 1099					25b				
	С	Other forms (see instructions)					25c				
	d	Add lines 25a through 25c								25d	6,387.
	е	Form(s) 8805								25e	
	f	Form(s) 8288-A								25f	
	g	Form(s) 1042-S								25g	
	26	2020 estimated tax payments and amo								26	
	27	Reserved for future use					27				
	28	Additional child tax credit. Attach Sche					28				
	29	Credit for amount paid with Form 1040					29				
	30	Reserved for future use					30			_	
	31	Amount from Schedule 3 (Form 1040),					31				
	32	Add lines 28 through 31. These are you								32	
D. (33	Add lines 25d, 25e, 25f, 25g, 26, and 3								33	6,387.
Refund	34	If line 33 is more than line 24, subtract					•	-		34	592.
5	35a	Amount of line 34 you want refunded								35a	592.
Direct deposit? See instructions.	▶b	Routing number 1 1 1 9 0			▶ c Typ	e: 🔼	Checkin	g _. L	Savings		
	► d	Account number 8 7 0 1 4									
	► e	If you want your refund check mailed the enter it here.								_	
	36	Amount of line 34 you want applied to	your 202	i estimat	ed tax	. 🟲	36				
Amount	37	Amount you owe. Subtract line 33 fro				o pay, s	1 1	ictions .	. ▶	37	
You Owe	38	Estimated tax penalty (see instructions	,			<u>.</u>	38				
Third Party Designee	•	ou want to allow another person (other with the IRS? See instructions	tnan you 	ur paid pr	eparer) to		tnis ▶ [Yes.	Complete	below.	⊠ No
(Other than paid preparer)	Desig name			Phone no. ▶					nal identifi er (PIN)	cation ▶ [
Sign Here		penalties of perjury, I declare that I have exa they are true, correct, and complete. Declarat							n of which	preparer	has any knowledge.
Tiere	Your signature			ate	Your occ		NOTNE	ED.	Prote	ection P	nt you an Identity PIN, enter it here
	Dh -				SOFTW	AKE E	истир	ĽК	(See	inst.) ▶	
	Phone		En er's signat	nail addres	58		Date		PTIN	1	Check if:
Paid		· .	Ü		מווטייה יי	M ג ד ד גי	04/05	/2021	P0208	2702	Self-employed
Preparer	Firm's name ▶ CIODAI TAVEC IIC					ויואעעעה.	U=/U3	/ ZUZI			
Use Only									78)965-9522 0-1017196		
			~1Z TTT	~ u	~ UA)	-			, U L		

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

Name shown on Form 1040-NR

▶ Go to www.irs.gov/Form1040NR for instructions and the latest information. ► Attach to Form 1040-NR.

2020
Attachment Sequence No. 7B

Your identifying number

MOHINDER NIDIGUNTAPALEM 675-97-7109 Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) (a) 10% (c) 30% **Nature of Income (b)** 15% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 3 4 Motion picture or TV copyright royalties Other royalties (copyrights, recording, publishing, etc.) . . . 5 Real property income and natural resources royalties 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Gambling winnings—Residents of countries other than Canada. 11 12 Other (specify) ▶ 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 15 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a ▶ 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and 16 (a) Kind of property and description (f) LOSS (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business 17 Add columns (f) and (g) of line 16 on Schedule D (Form 1040). 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-. • 18 Form 4797, or both.

SCHEDULE OI (Form 1040-NR)

Other Information

► Go to www.irs.gov/Form1040NR for instructions and the latest information.

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040-NR. ► Answer all questions.

Attachment Sequence No. **7C**

OMB No. 1545-0074

Name sl	e shown on Form 1040-NR Your identifying number									
MOHI	HINDER NIDIGUNTAPALEM					675-97-7109				
Α	Of what country or countries were you a citizen or national during the tax year? INDIA									
В	In what country did you claim residence for tax purposes during the tax year? United States									
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?									
D	Were you ever:									
1.	-		Yes	⊠ No						
2.	A green card holder (lawful per						⊠ No			
	If you answer "Yes" to (1) or (2	,								
E	If you had a visa on the last day of the tax year, enter your visa type. If you did not have a visa, enter your U.S.									
F	Immigration status on the last day of the tax year. F1 Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?									
G	List all dates you entered and									
•	Note: If you are a resident of (•		ient intervals					
	check the box for Canada or				☐ Mexico					
	Date entered United States	Date departed United State		Date entered United State		rted Unite	d States			
	mm/dd/yy	mm/dd/yy		mm/dd/yy		nm/dd/yy	a otatoo			
Н	Give number of days (including	vacation, nonworkdays, and	 d partial days) you	were present in the United	States during:					
	2018 365				_					
ı	Did you file a U.S. income tax					X Yes	□No			
	If "Yes," give the latest year ar	nd form number you filed		1040NR						
J	Are you filing a return for a trus	st?				☐ Yes	⊠ No			
	If "Yes," did the trust have a U.S. person, or receive a contr	J.S. or foreign owner unde	r the grantor trus	st rules, make a distribution	n or loan to a	☐ Yes	☐ No			
K	Did you receive total compens	·				Yes	⊠ No			
	If "Yes," did you use an alterna					Yes	□ No			
L	Income Exempt From Tax—If complete (1) through (3) below	you are claiming exempti	ion from income	tax under a U.S. income		a foreigr	country,			
1	Enter the name of the country,				claimed the tre	atv henefi	it and the			
	amount of exempt income in the				- Clairiou tro tro					
	(a) Cou	ntry	(b) Tax treaty ar			ount of ex				
				claimed in prior tax ye	ears income i	n current to	ax year			
	(a) T-1-1 F-1-1 :	- F 4040 ND !! . 4 . 5	<u> </u>	Bandana Bandi						
_	(e) Total. Enter this amount of				>					
	Were you subject to tax in a fo					∐ Yes	∐ No			
3.	Are you claiming treaty benefit		-			Yes	⊠ No			
	If "Yes," attach a copy of the C	competent Authority detern	nination letter to	your return.						
М	Check the applicable box if:	aldian an alestica () ()		wasaning la sets at 1 10 10 10 10	ad Otataa (fa akti in t				
	This is the first year you are may with a U.S. trade or business u	ınder section 871(d). See ir	nstructions				. ▶ 🗌			
2.	You have made an election in States as effectively connected									

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

MOHINDER NIDIGUNTAPALEM

Your social security number 675-97-7109

Par	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	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, line 8	9	
Par	t II Adjustments to Income	J	
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government	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		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	2,500.
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	2,500.

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

2020

Your social security number

OMB No. 1545-0074

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

Attachment Sequence No. 12

675-97-7109 MOHINDER NIDIGUNTAPALEM 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) Form(s) 8949, Part I, combine the result (or other basis) whole dollars. with column (g) line 2, column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with **Box A** checked 4,313. 3,874. 439. 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 965. 932. 33. 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 7 472. 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 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 16 472. • 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. 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.

OMB No. 1545-0074

2020
Attachment
Sequence No. 12A

Department of the Treasury Internal Revenue Service

Part I

Social security number or taxpayer identification number

675-97-7109

MOHINDER NIDIGUNTAPALEM

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 disposed of (sales price) from column (d) and 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 03/02/20 08/04/20 4,227. 3,774. 453. ROBINHOOD CRYPTO LLC 06/20/20 07/08/20 86. 100. -14. 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.

4,313.

439.

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) ▶

3,874.

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

675-97-7109

MOHINDER NIDIGUNTAPALEM

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.

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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.

965.

33.

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) ▶

932.