## 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				
Subm	ssion Identification Number (SID)				
Taxpaye	er's name	Social secur	ity num	per	
ANG	AD SINGH	346-29	-953	1	
Spouse		Spouse's so			r
Part	Tax Return Information — Tax Year Ending December 31, 2020 (Ent.	or vear vou	aro all	thorizina	1
	whole dollars only on lines 1 through 5.	er year you a	are au	unonzing	.)
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1 1	7	,211.
2	Total tax		2	,	0.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		307.
4	Amount you want refunded to you		4		307.
5	Amount you owe		5		307.
Part		keep a cor	y of y	our retu	ırn)
my knoreturn of to send for any Agent of payme authori payme busines taxes to person Electro	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I absorbed original or amended) I am now authorizing. I consent to allow my intermediate service provider, transist 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 to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the original form 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 terminant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resist days prior to the payment (settlement) date. I also authorize the financial institutions involved in the oreceive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) I nic Funds Withdrawal Consent.  I authorize  GLOBAL TAXES LLC  To enter or generate to enter or generate the content of the payment of the payment of the enter or generate the payment of the payment of the enter or generate the payment of the payment of the enter or generate the payment of the payment of the enter or generate the payment of the payment of the enter or generate the payment of the enter or generate the payment of the payment of the enter or generate the payment of the enter of the enter of generate the payment of the enter of generate the enter of the enter of the enter of generate the enter of th	ove are the ammitter, or electrejection of the tu.S. Treasury adicated in the stition to debit the authoriz quests must be processing of payment. I fur am now authorize my PIN	counts from the counts from the counts from the country f	trom the in turn original ssion, (b) the designated paration so to this according to the designation so the third sectronic packnowledgend, if applied the design of the d	come tax ator (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the
	signature on the income tax return (original or amended) I am now authorizing.			er 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 met below.				
Yours	ignature ▶ Date ▶	4/14/2021			
Snous	se's PIN: check one box only				
Г	I authorize to enter or generate	a my DIN			as my
_	ERO firm name		nter five	digits, but	asiny
	signature on the income tax return (original or amended) I am now authorizing.			er 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 med below.				
Spous	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	W			
Part	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.	3 7 2 7 Don't en	8 6 ter all ze	1 9 8 eros	9
authori	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	mitting this ret	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			

#### Department of the Treasury-Internal Revenue Service IRS Use Only-Do not write **U.S. Nonresident Alien Income Tax Return** or staple in this space. **Filing** X Single ☐ Married filing separately (MFS) (formerly Married) Qualifying widow(er) (QW) **Status** If you checked the QW box, enter the child's name if the Check only qualifying person is a child but not your dependent one box. Your identifying number Your first name and middle initial Last name (see instructions) ANGAD SINGH 346-29-9531 Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. Check if: X Individual

Foreign province/state/county

ZIP code

Foreign postal code

21 PATERSON STREET

Foreign country name

JERSEY CITY NJ 07307

City, town, or post office. If you have a foreign address, also complete spaces below. State

Estate or Trust

15

REV 04/02/21 PRO

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Form 1040-NR (2020)

At any time duri	ng 20	020, did you receive, sell, send, exchange, or	otherwise acquire	any fina	ancial in	terest in a	ny virtua	ıl currer	ıcy?	Yes	⊠ No
Dependents								(4) <b>V</b> i	f qualifie	es for (see	inetr ):
(see instructions):		(1) First name Last name	(2) Dependent identifying num		٠,	Dependent' onship to y		Child tax	•	Credit f	or other idents
									]		
If more than four dependents, see									]		
instructions and									]		
check here ►									]		
Income	1a	Wages, salaries, tips, etc. Attach Form(s) Wages							1a	7	,117.
Effectively	b	Scholarship and fellowship grants. Attach Fo			- 1	ent. See in	structio	ns .	1b		
Connected	С	Total income exempt by a treaty from Sche	edule OI (Form 104	40-NR),	Item						
With U.S.		L, line 1(e)			.	1c					_
Trade or	2a	Tax-exempt interest 2a				erest			2b		1.
Business	3a	Qualified dividends 3a			•	vidends .			3b		0.
	4a	IRA distributions 4a				ount			4b		
	5a	Pensions and annuities 5a		<b>b</b> Taxa	able am	ount			5b		
	6	Reserved for future use							6		
	7	Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here .							7		93.
	8	Other income from Schedule 1 (Form 1040), line 9							8		011
	9	Add lines 1a, 1b, 2b, 3b, 4b, 5b, 7, and 8. This is your <b>total effectively connected income</b>						9	/	,211.	
	10	Adjustments to income:									
	a	om Schedule 1 (Form 1040), line 22					-				
	b						-				
	c d							10d			
	11	Add lines 10a through 10c. These are your <b>total adjustments to income</b>							11	7	,211.
	12	•									, 411.
		Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction. See instructions							12	12	,400.
	13a	Qualified business income deduction. Attacl				13a		1			,
	b	Exemptions for estates and trusts only. See			-	13b					
	c	Add lines 13a and 13b							13c		
	4.4	Add lines 10 and 10s							4.4	1 2	400

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

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

16	Form 1040-NR (	2020)							Page <b>2</b>
17 Amount from Schedule 2 (Form 1040), line 3		16	Tax (see instructions). Check if any from Form(	s): <b>1</b> 88	14 <b>2</b> 49	72 <b>3</b> 🗌		16	0.
19 Child tax credit for cether dependents 20 Amount from Schedule 3 (Form 1040), line 7		17	Amount from Schedule 2 (Form 1040), line 3					17	0.
20 Add lines 21 and 20 . 21  21		18	Add lines 16 and 17					18	0.
21		19	Child tax credit or credit for other dependents	s				19	
22		20	Amount from Schedule 3 (Form 1040), line 7					20	
23a Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15 .  b Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 10 .  c Transportation tax (see instructions) . 23b		21	Add lines 19 and 20					21	
trom Schedule NEC (Form 1040-NR), line 15 . 23a		22	Subtract line 21 from line 18. If zero or less, e	enter -0				22	0.
Inie 10		23a	· · · · · · · · · · · · · · · · · · ·						
Add lines 23 at through 23c   23d   3d   3d   3d   3d   3d   3d   3		b			,	23b			
24 Add lines 22 and 23d. This is your total tax		С	Transportation tax (see instructions)			23c			
25 Federal income tax withheld from: a Form(s) W2 2 b Form(s) 1099 c Other forms (see instructions) d Add lines 25a through 25c Form(s) 8286-5 f Form(s) 8288-A Form(s) 8288-B Form(s) 82		d	Add lines 23a through 23c					23d	
a   Form(s) W-2   25a   307   25b		24	Add lines 22 and 23d. This is your total tax				🕨	24	0.
b Form(s) 1099		25	Federal income tax withheld from:						
c Other forms (see instructions) d Add lines 25a through 25c 25b 307.    Form(s) 8805   25e   5   5   5   5   5   5   5   5   5		а	Form(s) W-2			25a	307.		
d Add lines 25a through 25c		b	Form(s) 1099			25b			
Form(s) 8805   Form(s) 8288-A   256		С	Other forms (see instructions)			25c			
Form(s) 8288-A   256   259		d	Add lines 25a through 25c					25d	307.
g Form(s) 1042-S 262 02020 estimated tax payments and amount applied from 2019 return		е	Form(s) 8805					25e	
26 2020 estimated tax payments and amount applied from 2019 return		f	Form(s) 8288-A					25f	
27 Reserved for future use		g	Form(s) 1042-S					25g	
28 Additional child tax credit. Attach Schedule 8812 (Form 1040)		26	2020 estimated tax payments and amount ap	plied from 20	19 return	., <u></u>		26	
29 Credit for amount paid with Form 1040-C		27	Reserved for future use			27			
30 Reserved for future use		28	Additional child tax credit. Attach Schedule 8	812 (Form 10-	40)	28			
31 Amount from Schedule 3 (Form 1040), line 13		29	Credit for amount paid with Form 1040-C			29			
32 Add lines 28 through 31. These are your total other payments and refundable credits . ▶   32		30	Reserved for future use			30		4	
Refund 34  If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35  Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □ 35a 307.  Direct deposit?  ▶ b Routing number □ 2 1 2 0 2 3 3 7  ▶ c Type: ☑ Checking □ Savings  ▶ b Routing number □ 2 1 2 0 0 5 5 3 5 8 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □		31							
Refund   34   If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid   35a   Amount of line 34 you want refunded to you. If Form 8888 is attached, check here   ▶   35a   307.		32						32	
35a		33							
Direct deposit? See instructions.    b   Routing number   0   2   1   2   0   2   3   3   7   bc Type:   Checking   Savings	Refund	34				•			
See instructions.    A   Account number   5   2   0   0   5   5   3   5   8		35a		1 1 1				35a	307.
Paid Preparer  Paid Preparer  Preparer's name  Preparer's signature  Phone no.  Preparer's name  Preparer's signature  Phone no.  Preparer's name  Preparer's signature  Phone no.  Preparer's signature  Preparer's name  Preparer's signature  Phone no.		►b							
enter it here.  36 Amount of line 34 you want applied to your 2021 estimated tax	See instructions.	<b>▶</b> d							
Amount You Owe  37		<b>▶</b> e							
Amount You Owe  37			enter it here.					-	
Third Party Designee (Other than paid preparer)  Sign Here  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶  Paid Preparer  Paid Preparer  Use Only  Sign Here  Use Only  Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions  Phone personal identification number (PIN)  No  Your occupation  BUSINESS INTELLIGENCE ANALYST (see inst.) ▶  If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶  Phone no.  Preparer's name  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/13/2021 P02082703 Self-employed Firm's name ▶ GLOBAL TAXES LLC  Phone no. (678) 965-9522	_		Amount of line 34 you want applied to your 2	2021 estimate	ed tax . 🕨	36			
Third Party Designee (Other than paid preparer)  Designee's name ▶  Designee's name ▶  Designee's name ▶  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Phone no.  Phone no.  Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions			•			1 1	•	37	
Teturn with the IRS? See instructions  return with the IRS? See instructions  return with the IRS? See instructions  Personal identification number (PIN)  Personal identification number (PIN)  Index penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Your signature  Paid  Preparer's name  Preparer's signature  Preparer's signature  Preparer's signature  Date  Preparer's signature  Preparer's signature  Date  Preparer's signature  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/13/2021 P02082703 Self-employed Firm's name  GLOBAL TAXES LLC  Phone no. (678) 965-9522									
Paid preparer)         Sign       Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.         Your signature       Date       Your occupation       If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶         Phone no.       Email address         Preparer       Preparer's name       Preparer's signature       Date       PTIN       Check if:         SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       O4/13/2021       P02082703       Self-employed         Firm's name       GLOBAL TAXES LLC       Phone no. (678) 965-9522	•	,		your paid pre	parer) to discus		Complete	below.	⊠ No
Here  Your signature  Date  Your occupation  Phone no.  Freparer  Preparer  Preparer  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/13/2021 P02082703 ☐ Self-employed  Firm's name  GLOBAL TAXES LLC  Date  Your occupation  BUSINESS INTELLIGENCE ANALYST    If the IRS sent you an Identity   Protection PIN, enter it here (see inst.) ▶		Desig name	nee's ▶					cation •	
Phone no.  Preparer  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/13/2021 P02082703 ☐ Self-employed  Firm's name  GLOBAL TAXES LLC  SOURCE ANALYST (see inst.) Protection PIN, enter it here (see inst.) Protection P	•								
Phone no.  Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/13/2021 P02082703 ☐ Self-employed Firm's name ■ GLOBAL TAXES LLC  BUSINESS INTELLIGENCE ANALYST (see inst.) ▶  Date PTIN Check if: 902082703 ☐ Self-employed Phone no. (678)965-9522	11616								
Paid Preparer's name  Preparer's signature  Preparer's signature  Date PTIN Check if:  902082703  Self-employed Firm's name  GLOBAL TAXES LLC  Phone no. (678)965-9522							1	1	IN, enter it here
Paid Preparer's name  Preparer's signature  Preparer's signature  Date PTIN Check if:  902082703  Self-employed Firm's name  GLOBAL TAXES LLC  Phone no. (678)965-9522		Phone	e no.	Email addres			1.		
Preparer Use Only    SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   04/13/2021   P02082703   □ Self-employed	Daid					Date	PTIN		Check if:
Use Only  Firm's name ► GLOBAL TAXES LLC  Phone no. (678)965-9522		SYAM E	RIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	04/13/2021	P02082	2703	Self-employed
use Univ		e Only Firm's name ► GLOBAL TAXES LLC Phone no. (678)965						 78)965-9522	
	Use Uniy								

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

Attachment Sequence No. **7B** 

Name shown on Form 1040-NR Your identifying number ANGAD SINGH 346-29-9531 Enter **amount of income** under the appropriate rate of tax. See instructions.

N					(d) Other (specify)			
		Nature of Income		(a) 10%	<b>(b)</b> 15%	(c) 30%	%	%
1	Dividends and divide	nd equivalents:						
а	Dividends paid by U.	S. corporations	1a					
b	Dividends paid by fo	reign corporations	1b					
С	Dividend equivalent p	ayments received with respect to section 871(m) transactions	1c					
2	Interest:							
а	Mortgage		2a					
b		orations	2b					
С	Other		2c					
3	Industrial royalties (p	atents, trademarks, etc.)	3					
4	Motion picture or TV	copyright royalties	4					
5	Other royalties (copy	rights, recording, publishing, etc.)	5					
6		e and natural resources royalties	6					
7		es	7					
8		its	8					
9	-	e 18 below						
10		s of Canada only. Enter net income in column (c).						
		r -0						
a								
b	Losses	Desidents of acceptains attended Consider	10c					
11	Note: Losses not allo	Residents of countries other than Canada.	11					
12								
			12					
13		12 in columns (a) through (d)	13					
14	Multiply line 13 by r	ate of tax at top of each column	14					
15	Tax on income not ef	fectively connected with a U.S. trade or business. Add column	s (a) th	nrough (d) of line 14. I	Enter the total here a	ind on Form 1040-NF	R, line 23a ► <b>15</b>	
		Capital Gains and Losses F	rom	Sales or Excha	nges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) (b) Date acquimm/dd/yyy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
	ely connected with a U.S. ss. Do not include a gain							
or loss	on disposing of a U.S. real							
gains a	y interest; report these nd losses on Schedule D							
(Form 1	•							
	property sales or ges that are effectively							
connec	ted with a U.S. business edule D (Form 1040),						( )	
Form 4797, or both.		18 Capital gain. Combine columns (f) and (g) of line 17	. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r -0 ▶ <b>18</b>	

# SCHEDULE OI (Form 1040-NR)

**Other Information** 

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

2020 Attachment Sequence No. 7C

OMB No. 1545-0074

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

Name sl	nown on Form 1040-NR				Your identifying number					
ANGA	D SINGH				346-29-9531					
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.	A U.S. citizen?		🗌 Yes 🛛 No							
2.	A green card holder (lawful permanent resident) of the United States?									
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.									
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. immigration status on the last day of the tax yearF1									
F	Have you ever changed your v If you answered "Yes," indicat			on status?						
G	List all dates you entered and									
	Note: If you are a resident of 0	Canada or Mexico AND co	mmute to work in the	United States at frequ	ent intervals,					
	check the box for Canada or	Mexico and skip to item I	<u>1 .</u> <u></u>	$\square$ Canada	Mexico					
	Date entered United States	Date departed United Stat	es Da	te entered United State						
	mm/dd/yy	mm/dd/yy		mm/dd/yy	mm/dd/yy					
Н	Give number of days (including 2018120	, 20193	65 , and 202	20365						
I	Did you file a U.S. income tax	return for any prior year? .			🗌 Yes 🔀 No					
	If "Yes," give the latest year ar	nd form number you filed 🕨	104	lonr						
J	Are you filing a return for a trus									
	If "Yes," did the trust have a U.S. person, or receive a contr									
K	Did you receive total compens	ation of \$250,000 or more	during the tax year? .		🗌 Yes 🗵 No					
	If "Yes," did you use an alterna	ative method to determine	the source of this com	pensation?	🗌 Yes 🗌 No					
L	Income Exempt From Tax—If complete (1) through (3) below				tax treaty with a foreign country,					
1.	Enter the name of the country, amount of exempt income in the				claimed the treaty benefit, and the					
	(a) Cou	ntry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye	, , ,					
	(e) Total. Enter this amount of	n Form 1040-NR, line 1c. D	o not enter it on line 1	a or line 1b	<b>&gt;</b>					
	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 (	Competent Authority detern	nination letter to your	return.						
M	Check the applicable box if:									
	with a U.S. trade or business u	under section 871(d). See ir	nstructions	·	<del></del> -					
2.	You have made an election in States as effectively connected				eal property located in the United					

#### SCHEDULE D (Form 1040)

### **Capital Gains and Losses**

OMB No. 1545-0074

Attachment

Your social security number

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

► 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. Sequence No. 12

346-29-9531 ANGAD SINGH 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 Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked . . . . . . . . . . . . . . . . . . 33,971. 34,222. 344. 93. 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 93. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked . . . . . . . . . . . . . . . . . . 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15

BAA

Schedule D (Form 1040) 2020 Page 2

### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 93. • 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.

2020 Attachment Sequence No. 12A

OMB No. 1545-0074

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

ANGAD SINGH

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Social security number or taxpayer identification number

346-29-9531

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)

<ul><li>☐ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>				sis <b>wasn't</b> report	ed to the IF	RS	
1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column</i> (e)	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss). Subtract column (e) from column (d) and	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)			in the separate instructions	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	combine the result with column (g)
ROBINHOOD CRYPTO LLC	03/09/20	11/13/20	375.	171.			204.
ROBINHOOD SECURITIES LLC	05/04/20	05/08/20	33,596.	34,051.	W	344.	-111.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 0	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	33,971.	34,222.		344.	93.

**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.