£1040

Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return

2020

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly [ou checked the MFS box, enter the con is a child but not your dependent	name of									
Your first name	and m	iddle initial	Last na	me						Your social security number		
RAMAKRISHNA				BHU						680-63-2922		
If joint return, spouse's first name and middle initial				me						Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box, se	e instructi	ons.				Apt. no.		Preside	ential Flect	ion Campaign
1025 SAI	•								- 1		here if you	
		ce. If you have a foreign address, also c	omplete s	paces below.	Sta	ite	ZIF	code		spouse	if filing join	ntly, want \$3
LEANDER		, , , , , , , , , , , , , , , , , , , ,	TX				170611		to go to this fund. Checking a box below will not change			
Foreign country	v name			Foreign province/state		-				your tax or refund.		
	,									You Spouse		
At any time du	ıring 20	020, did you receive, sell, send, exc	change, c	or otherwise acquire	any	financial in	terest i	n any virtu	al curi	rency?	Yes	⊠ No
Standard Deduction		eone can claim: You as a despouse itemizes on a separate retu	•			•	ent					
Age/Blindness	s You:	Were born before January 2,	1956	Are blind Sp	ouse	: Was	born b	efore Janu	ary 2,	1956	☐ Is b	lind
Dependents			_	(2) Social securit		(3) Relati				qualifies for (see instructions):		
If more		irst name Last name	number		,	to you		Child tax credi			I	ther dependents
than four												
dependents,	_											
see instruction and check	s —											
here ▶ □												
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1	2	01,117.
Attach	2a	Tax-exempt interest	2a		b T	axable inte	erest			2b	,	
Sch. B if required.	3a	Qualified dividends	3a	116.	b (Ordinary div	/idends			3b	,	226.
required.	4a	IRA distributions	4a		b T	axable am	ount .			4b	,	
	5a	Pensions and annuities	5a		b T	axable am	ount .			5b	,	
Standard	6a	Social security benefits	6a		b T	axable am	ount .			6b	,	
• Single or	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □							7		2,684.	
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 total income									2	04,027.
 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	e the star	ndard deduction. Se	e inst	ructions	10b					
Head of	С	Add lines 10a and 10b. These are your total adjustments to income									С	
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted gross inc	ome				. •	- 11	2	04,027.
If you checked	12	Standard deduction or itemized deductions (from Schedule A)									2	12,400.
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		12,400.	
	15	Taxable income. Subtract line 14	4 from lin	e 11. If zero or less	, ente	er -0				15	1 ز	91,627.

Form 1040 (2020))									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	42,316.
	17	Amount from Schedule 2, lir	ne 3						17	
	18	Add lines 16 and 17							18	42,316.
	19	Child tax credit or credit for	other dependent	ts					19	
	20	Amount from Schedule 3, lir	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	42,316.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 10 .]	23	111.
	24	Add lines 22 and 23. This is	your total tax					. ▶	24	42,427.
	25	Federal income tax withheld	I from:							
	а	Form(s) W-2				25a	38,	811.		
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c							25d	38,811.
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)			No.	27				
attach Sch. EIC.	28	Additional child tax credit. A				28				
nontaxable	29	American opportunity credit								
combat pay, see instructions.	30	Recovery rebate credit. See								
	31	Amount from Schedule 3, lir								
	32	Amount from Schedule 3, line 13								
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				. ▶	33	38,811.
Refund	34	If line 33 is more than line 24							34	
neiulia	35a	Amount of line 34 you want				•	-	- □ ĺ	35a	
Direct deposit?	▶b									
See instructions.	►d	Account number X X X	X X X X	X X X X			<u>—</u>	Ü		
	36	Amount of line 34 you want	applied to your	2021 estimate	ed tax ►	36		·		
Amount	37	Subtract line 33 from line 24	. This is the am o	ount you owe	now			. ▶	37	3,616.
You Owe		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for								
For details on how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details.								
instructions.	38	Estimated tax penalty (see in	nstructions) .		🕨	38				
Third Party	Do	you want to allow another								_
Designee	ins	tructions				. ▶ 🔲	Yes. Com	plete b	elow.	X No
		signee's ne ▶		Phone no. ▶				al identifi (PIN)		
Ciana			that I have examine		Laccompanying	hodulos and				t of my knowledge and
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.									
Here	Yo	ur signature		Date	te Your occupation If th					nt you an Identity
						Protection PIN, enter it here				
Joint return?	L					SOFTWARE ENGINEER (S			nst.) 🕨	
See instructions. Keep a copy for	Sp	Spouse's signature. If a joint return, both must sign.		Date						nt your spouse an ection PIN, enter it here
your records.	,							1	ıy Frote ıst.) ▶ [ction Fils, enter it fiere
	———Ph	one no. (979)739-752	6	Email address	RK888PRAB	штасму т	T. COM		- / -	
		eparer's name	Preparer's signat		KKOOOPKAB	Date		PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM			בווסיים ייאו.דאו			02082	703	Self-employed
Preparer		m's name ► GLOBAL TA	AADAG PERI	COLIA IADUAN	1 0 2 / 2 3 /	2021 P			678)965-9522	
Use Only		m's address ► 2530 Pebb		n Cummin	7 CZ 200/1				eno. (s EIN ▶	
Co to ware fee				ar Cammiring		B=11-11	20/04 55 5	Timirs	LIIN	Form 1040 (2020)
GO TO WWW.Irs.go	v/r-orn	n1040 for instructions and the late	st information.		BAA	KEV 08/3	30/21 PRO			Form 1040 (2020)

SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Taxes

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

► Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2020
Attachment
Sequence No. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number 680-63-2922 RAMAKRISHNA PRABHU Part I Tax 1 Alternative minimum tax. Attach Form 6251 1 2 2 Excess advance premium tax credit repayment. Attach Form 8962 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17... 3 Part II **Other Taxes** 4 Self-employment tax. Attach Schedule SE 4 Unreported social security and Medicare tax from Form: a ☐ 4137 5 5 6 Additional tax on IRAs, other qualified retirement plans, and other tax-favored 6 7a Household employment taxes. Attach Schedule H 7a b Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required 7b Taxes from: **a** ☐ Form 8959 **b** × Form 8960 8 **c** ☐ Instructions; enter code(s) 8 111. Section 965 net tax liability installment from Form 965-A . . . 10 Add lines 4 through 8. These are your total other taxes. Enter here and on Form

For Paperwork Reduction Act Notice, see your tax return instructions.

1040 or 1040-SR, line 23, or Form 1040-NR, line 23b

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Schedule 2 (Form 1040) 2020

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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.

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return Your social security number 680-63-2922 RAMAKRISHNA PRABHU

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 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 101,863. 100,522. 1,343. 2,684. 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 2,684. 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

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Schedule D (Form 1040) 2020 Page 2

Part III **Summary** 2,684. 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 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. □ 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.

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

Internal Revenue Service Name(s) shown on return

Department of the Treasury

Social security number or taxpayer identification number

680-63-2922

RAMAKRISHNA PRABHU

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

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).

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

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. antad an Fama(a) 1000 D also

(A) Short-term transactions(B) Short-term transactions(C) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	•		`	?)
1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below	Adjustment, it If you enter an enter a co	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)			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	01/01/20	07/29/20	101,861.	100,079.	W	1,343.	3,125.
COIN BASE	07/11/20	07/11/20	0.	357.			-357.
COIN BASE	07/11/20	07/11/20	2.	86.			-84.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above should be proposed on the should be s	al here and inc is checked), lir	lude on your ne 2 (if Box B	101 863	100 522		1 2/12	2 684

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 **8889**

Department of the Treasury

Internal Revenue Service

Health Savings Accounts (HSAs)

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form8889 for instructions and the latest information.

OMB No. 1545-0074

2020
Attachment
Sequence No. 52

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

RAMAKRISHNA PRABHU

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions ▶ 680-63-2922

Befo	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, i	f required.	
Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for		
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2020. See instructions	X Self-only	Family
2	HSA contributions you made for 2020 (or those made on your behalf), including those made from January 1, 2021, through April 15, 2021, that were for 2020. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	0.
3	If you were under age 55 at the end of 2020 and, on the first day of every month during 2020, you were, or were considered, an eligible individual with the same coverage, enter \$3,550 (\$7,100 for family coverage). All others, see the instructions for the amount to enter	3	3,550.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2020 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2020, also include any amount contributed to your spouse's Archer MSAs	4	0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5	3,550.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2020, see the instructions for the amount to enter	6	3,550.
7	If you were age 55 or older at the end of 2020, married, and you or your spouse had family coverage under an HDHP at any time during 2020, enter your additional contribution amount. See instructions	7	0.
8	Add lines 6 and 7	8	3,550.
9	Employer contributions made to your HSAs for 2020		
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	2,600.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	950.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 12	13	0.
Part	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions. II HSA Distributions. If you are filing jointly and both you and your spouse each have separately and both you are filing jointly are filing jointly and both you are filing jointly are filing jointly are filing jointly and both you are filing jointly are filing jo	roto LICAo	aamalata
rait	a separate Part II for each spouse.	irate HSAS,	complete
14a	Total distributions you received in 2020 from all HSAs (see instructions)	14a	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b	
С	Subtract line 14b from line 14a	14c	
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8, and enter "HSA" and the amount on the dotted line	16	
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here	10	
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 8; check box c and enter "HSA" and the amount on the line next to the box	17b	
Part	Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instruct completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.		,
18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8, and enter "HSA" and the amount on the dotted line	20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 8; check box c and enter "HDHP" and the amount on the line next to the box	21	

Form **8960**

Department of the Treasury Internal Revenue Service (99)

Net Investment Income Tax— Individuals, Estates, and Trusts

► Attach to your tax return.

► Go to www.irs.gov/Form8960 for instructions and the latest information.

2020 Attachment Sequence No. 72

OMB No. 1545-2227

Name(s) shown on your tax return Your social security number or EIN RAMAKRISHNA PRABHU 680-63-2922 Part I Investment Income ☐ Section 6013(g) election (see instructions) ☐ Section 6013(h) election (see instructions) ☐ Regulations section 1.1411-10(g) election (see instructions) 1 2 2 226. 3 3 Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see 4a Adjustment for net income or loss derived in the ordinary course of a nonsection 1411 trade or business (see instructions) 4b 4c 5a Net gain or loss from disposition of property (see instructions) 5a 2,684. Net gain or loss from disposition of property that is not subject to net 5b Adjustment from disposition of partnership interest or S corporation stock (see 5d 2,684. 6 Adjustments to investment income for certain CFCs and PFICs (see instructions) 6 7 7 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7. 8 2,910. Part II Investment Expenses Allocable to Investment Income and Modifications 9a Investment interest expenses (see instructions) State, local, and foreign income tax (see instructions) 9b Miscellaneous investment expenses (see instructions) . . 9c 9d 10 10 Total deductions and modifications. Add lines 9d and 10 11 11 Part III Tax Computation Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. 2,910. 12 Individuals: Modified adjusted gross income (see instructions) 13 204,027. 14 200,000. 15 Subtract line 14 from line 13. If zero or less, enter -0- 15 4,027. 16 16 2,910. 17 Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include 17 111. **Estates and Trusts:** Deductions for distributions of net investment income and deductions under 18b Undistributed net investment income. Subtract line 18b from 18a (see instructions). 18c 19a Highest tax bracket for estates and trusts for the year (see instructions) . . . 19b 19c 20 20 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and 21 21