

IRS e-file Signature Authorization

▶ **ERO must obtain and retain completed Form 8879.**
▶ **Go to www.irs.gov/Form8879 for the latest information.**

Submission Identification Number (SID) ▶

Taxpayer's name SATHISH KUMAR GANGADHARA	Social security number 098-95-4631
Spouse's name SHALINI GUDETI	Spouse's social security number 030-15-5145

Part I Tax Return Information – Tax Year Ending December 31, 2020 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1 Adjusted gross income	1	130,750.
2 Total tax	2	14,889.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	10,088.
4 Amount you want refunded to you	4	
5 Amount you owe	5	4,859.

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

I authorize GLOBAL TAXES LLC to enter or generate my PIN

5	4	6	3	1
---	---	---	---	---

 as my signature on the income tax return (original or amended) I am now authorizing.

Enter five digits, but don't enter all zeros

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ _____ Date ▶ _____

Spouse's PIN: check one box only

I authorize GLOBAL TAXES LLC to enter or generate my PIN

5	5	1	4	5
---	---	---	---	---

 as my signature on the income tax return (original or amended) I am now authorizing.

Enter five digits, but don't enter all zeros

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ _____ Date ▶ _____

Practitioner PIN Method Returns Only—continue below

Part III Certification and Authentication – Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

5	8	7	2	7	8	6	1	9	8	9
---	---	---	---	---	---	---	---	---	---	---

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ _____ Date ▶ _____

**ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So**

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

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

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury
Internal Revenue Service (99)

2020

Form 1040-V Payment Voucher

- ▶ Use this voucher when making a payment with Form 1040.
- ▶ Do not staple this voucher or your payment to Form 1040.
- ▶ Make your check or money order payable to the 'United States Treasury.'
- ▶ Write your social security number (SSN) on your check or money order.

Enter the amount of your payment ▶	4,859.
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REV 04/20/21 PRO 1555

SATHISH KUMAR GANGADHARA
 SHALINI GUDDETI
 7939 SILVER LAKE LN 101
 MEMPHIS TN 38119

INTERNAL REVENUE SERVICE
 P.O. BOX 1214
 CHARLOTTE, NC 28201-1214

098954631 DL GANG 30 0 202012 610

Filing Status [] Single [X] Married filing jointly [] Married filing separately (MFS) [] Head of household (HOH) [] Qualifying widow(er) (QW)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent

Personal information section including names (SATHISH KUMAR, SHALINI, GANGADHARA, GUDDETI), social security numbers (098-95-4631, 030-15-5145), address (7939 SILVER LAKE LN, MEMPHIS, TN, 38119), and marital status options.

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? [] Yes [X] No

Standard Deduction Someone can claim: [] You as a dependent [] Your spouse as a dependent [] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [] Were born before January 2, 1956 [] Are blind Spouse: [] Was born before January 2, 1956 [] Is blind

Table for Dependents with columns for (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, and Credit for other dependents.

Main tax calculation table with rows 1-15. Includes sections for Attach Sch. B if required, Standard Deduction for (with bullet points for filing status), and Taxable income calculation.

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

Table with 2 columns: Description and Amount. Rows include Tax (14,889), Amount from Schedule 2 (14,889), Child tax credit, Amount from Schedule 3, Other taxes, Federal income tax withheld (10,088), and 2020 estimated tax payments (10,088).

• If you have a qualifying child, attach Sch. EIC.
• If you have nontaxable combat pay, see instructions.

Refund

Direct deposit? See instructions.

Table with 2 columns: Description and Amount. Rows include Refund (0), Amount of line 34 you want refunded to you (0), Routing number, Account number, and Amount of line 34 you want applied to your 2021 estimated tax (0).

Amount You Owe

For details on how to pay, see instructions.

Table with 2 columns: Description and Amount. Rows include Subtract line 33 from line 24 (4,859) and Estimated tax penalty (58).

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions. [] Yes. Complete below. [X] No. Designee's name, Phone no., Personal identification number (PIN).

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. Your signature, Date, Your occupation (SOFTWARE ENGINEER), Spouse's signature, Date, Spouse's occupation (SOFTWARE ENGINEER).

Paid Preparer Use Only

Preparer's name (SYAM PRIYA RAM SAGAR GUPTA TALLAM), Preparer's signature, Date (05/14/2021), PTIN (P02082703), Firm's name (GLOBAL TAXES LLC), Firm's address (2530 Pebble Creek Ln Cumming GA 30041), Phone no. (678)965-9522, Firm's EIN (30-1017196).

**SCHEDULE 1
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

▶ **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. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
SATHISH KUMAR GANGADHARA & SHALINI GUDDETI

Your social security number
098-95-4631

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶ _____		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-7,800.
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	-7,800.

Part II Adjustments to Income

10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN ▶ _____		
c	Date of original divorce or separation agreement (see instructions) ▶ _____		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

SCHEDULE D
(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

2020

Attachment
Sequence No. **12**

Department of the Treasury
Internal Revenue Service (99)

▶ **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.**

Name(s) shown on return

SATHISH KUMAR GANGADHARA & SHALINI GUDDETI

Your social security number

098-95-4631

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? **Yes** **No**

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 lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
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	68,050.	81,145.	8,933.	-4,162.
2 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	8.	19.		-11.
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back				7 -4,173.

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 lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
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 Box D checked	9.	6.		3.
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 Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13 Capital gain distributions. See the instructions				13
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 ()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on the back				15 3.

Part III Summary

16	Combine lines 7 and 15 and enter the result	16	-4,170.
	<ul style="list-style-type: none"> • 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 line 22. • 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? <input type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> 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? <input type="checkbox"/> 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. <input type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: <ul style="list-style-type: none"> • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) } 	21	(3,000.)
	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? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. <input checked="" type="checkbox"/> No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

Sales and Other Dispositions of Capital Assets

Department of the Treasury
Internal Revenue Service

▶ 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.

Name(s) shown on return

Social security number or taxpayer identification number

SATHISH KUMAR GANGADHARA & SHALINI GUDDETI

098-95-4631

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (A)** Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B)** Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (C)** Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)	
						(f) Code(s) from instructions	(g) Amount of adjustment		
	ROBINHOOD SECURITES LLC	03/11/20	11/02/20	67,061.	80,224.	W	8,933.	-4,230.	
	ROBINHOOD SECURITES LLC	02/16/20	11/15/20	989.	921.			68.	
2 Totals.	Add the amounts in columns (d), (e), (g), and (h) (subtract 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) ▶				68,050.	81,145.		8,933.	-4,162.

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.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side
SATHISH KUMAR GANGADHARA & SHALINI GUDDETI

Social security number or taxpayer identification number
098-95-4631

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	ROBINHOOD SECURITES LLC	11/20/20	01/20/19	9.	6.			3.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶				9.	6.			3.

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

Sales and Other Dispositions of Capital Assets

Department of the Treasury
Internal Revenue Service

▶ 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.

Name(s) shown on return

Social security number or taxpayer identification number

SATHISH KUMAR GANGADHARA & SHALINI GUDDATI

098-95-4631

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I **Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	ROBINHOOD SECURITES LLC	04/20/20	12/20/20	6.	17.			-11.
	ROBINHOOD SECURITES LLC	01/20/20	10/20/20	2.	2.			0.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract 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.	19.			-11.

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.

SCHEDULE E
(Form 1040)

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

2020

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Attachment
Sequence No. **13**

▶ Go to www.irs.gov/ScheduleE for instructions and the latest information.

Name(s) shown on return

Your social security number

SATHISH KUMAR GANGADHARA & SHALINI GUDDETI

098-95-4631

Part I **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

A Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions Yes No

B If "Yes," did you or will you file required Form(s) 1099? Yes No

1a	Physical address of each property (street, city, state, ZIP code)				
A	HYD HYD IN				
B					
C					
1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	3		A 325	0	<input type="checkbox"/>
B			B		<input type="checkbox"/>
C			C		<input type="checkbox"/>

Type of Property:

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
- 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income:		Properties:	A	B	C
3	Rents received	3	600.		
4	Royalties received	4			

Expenses:

5	Advertising	5			
6	Auto and travel (see instructions)	6			
7	Cleaning and maintenance	7	600.		
8	Commissions.	8			
9	Insurance	9			
10	Legal and other professional fees	10			
11	Management fees	11	800.		
12	Mortgage interest paid to banks, etc. (see instructions)	12			
13	Other interest.	13	6,000.		
14	Repairs.	14	200.		
15	Supplies	15	800.		
16	Taxes	16			
17	Utilities.	17			
18	Depreciation expense or depletion	18			
19	Other (list) ▶	19			
20	Total expenses. Add lines 5 through 19	20	8,400.		

21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file **Form 6198** **21** -7,800.

22 Deductible rental real estate loss after limitation, if any, on **Form 8582** (see instructions) **22** (-7,800.)

23a	Total of all amounts reported on line 3 for all rental properties	23a	600.	
b	Total of all amounts reported on line 4 for all royalty properties	23b		
c	Total of all amounts reported on line 12 for all properties	23c		
d	Total of all amounts reported on line 18 for all properties	23d		
e	Total of all amounts reported on line 20 for all properties	23e	8,400.	

24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses **24**

25 **Losses.** Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here **25** (7,800.)

26 **Total rental real estate and royalty income or (loss).** Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 **26** -7,800.

2020 IA 1040 Iowa Individual Income Tax Return

For fiscal year beginning _____ and ending _____

Step 1: Fill in all spaces. You must fill in your Social Security number (SSN).

Your last name: GANGADHARA Your first name/middle initial: SATHISH KUMAR
 Spouse's last name: GUDDETI Spouse's first name/middle initial: SHALINI
 Current mailing address (number and street, apartment, lot, or suite number) or PO Box: 7939 SILVER LAKE LN, 101
 City, State, ZIP: MEMPHIS TN 38119
 Spouse SSN: 030-15-5145 Your SSN: 098-95-4631



Step 2 Filing Status: Mark one box only

1	Single: Were you claimed as a dependent on another person's Iowa return? Yes <input type="checkbox"/> No <input type="checkbox"/>	Email Address: _____
2	Married filing a joint return. (Two-income families may benefit by using status 3 or 4.)	Check this box if you or your spouse were 65 or older as of 12/31/20. <input type="checkbox"/>
3	<input checked="" type="checkbox"/> Married filing separately on this combined return. Spouse use column B.	Residence on 12/31/20: County No. <u>00</u> School District No. <u>0000</u>
4	Married filing separate returns. Spouse's name: _____ SSN: _____ Net Income: \$ _____	
5	Head of household with qualifying person. If qualifying person is not claimed as a dependent on this return, enter the person's name and SSN below.	
6	Qualifying widow(er) with dependent child. Name: _____ SSN: _____	

Step 3 Exemptions

	B. Spouse (Filing Status 3 ONLY)	A. You or Joint
a. Personal Credit: Col. A: Enter 1 (enter 2 if filing status 2 or 5); Col. B: Enter 1 if filing status 3	<u>1</u> X \$ 40 = \$ <u>40</u>	<u>1</u> X \$ 40 = \$ <u>40</u>
b. Enter 1 for each taxpayer who is 65 or older and/or 1 for each taxpayer who is blind	X \$ 20 = \$ _____	X \$ 20 = \$ _____
c. Dependents: Enter 1 for each dependent	X \$ 40 = \$ _____	X \$ 40 = \$ _____
d. Enter first names of dependents here _____	e. Total \$ <u>40</u>	e. Total \$ <u>40</u>

Step 4 Reportable Social Security benefits as calculated on line 13 of Iowa Social Security Worksheet

B. Spouse/Status 3	<u> </u>	A. You or Joint	<u> </u>
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Step 5 Gross Income

	B. Spouse/Status 3	A. You or Joint	B. Spouse/Status 3	A. You or Joint
1. Wages, salaries, tips, etc	<u>52,566.00</u>	<u>89,198.00</u>		
2. Taxable interest income. If more than \$1,500, complete Sch. B	<u> .00</u>	<u>56.00</u>		
3. Ordinary dividend income. If more than \$1,500, complete Sch. B	<u> .00</u>	<u> .00</u>		
4. Taxable alimony received	<u> .00</u>	<u> .00</u>		
5. Business income/(loss). See instructions	<u> .00</u>	<u> .00</u>		
6. Capital gain/(loss). See instructions	<u>68.00</u>	<u>-3,068.00</u>		
7. Other gains/(losses). See instructions	<u> .00</u>	<u> .00</u>		
8. Taxable IRA distributions	<u> .00</u>	<u> .00</u>		
9. Taxable pensions and annuities	<u> .00</u>	<u> .00</u>		
10. Rents, royalties, partnerships, estates, etc. See instructions	<u> .00</u>	<u>-7,800.00</u>		
11. Farm income/(loss). See instructions	<u> .00</u>	<u> .00</u>		
12. Unemployment compensation. See instructions	<u> .00</u>	<u> .00</u>		
13. Gambling winnings	<u> .00</u>	<u> .00</u>		
14. Other income, bonus depreciation, and section 179 adjustment	<u> .00</u>	<u> .00</u>		
15. Gross Income. Add lines 1-14			<u>52,634.00</u>	<u>78,386.00</u>

NOTE: Use only blue or black ink, no pencils or red ink.

Step 6 Adjustments to Income

16. Payments to an IRA, Keogh, or SEP	<u> .00</u>	<u> .00</u>		
17. Deductible part of self-employment tax	<u> .00</u>	<u> .00</u>		
18. Health insurance premium	<u> .00</u>	<u> .00</u>		
19. Penalty on early withdrawal of savings	<u> .00</u>	<u> .00</u>		
20. Alimony paid	<u> .00</u>	<u> .00</u>		
21. Pension/retirement income exclusion	<u> .00</u>	<u> .00</u>		
22. Moving expense deduction from federal form 3903	<u> .00</u>	<u> .00</u>		
23. Iowa capital gain deduction; Include corresponding IA 100 schedule	<u> .00</u>	<u> .00</u>		
24. Other adjustments <u>STMT ADJ</u>	<u> .00</u>	<u>270.00</u>		
25. Total adjustments. Add lines 16-24			<u> .00</u>	<u>270.00</u>
26. Net Income. Subtract line 25 from line 15			<u>52,634.00</u>	<u>78,116.00</u>

Step 7 Federal Taxes and Qualified Deductions

27. Federal income tax refund/overpayment received in 2020	<u> .00</u>	<u> .00</u>		
28. Self-employment/household employment/other federal taxes	<u> .00</u>	<u> .00</u>		
29. Addition for federal taxes. Add lines 27 and 28			<u>0.00</u>	<u>0.00</u>
30. Total. Add lines 26 and 29			<u>52,634.00</u>	<u>78,116.00</u>
31. Federal tax withheld in 2020, federal estimated tax payments made in 2020, and federal taxes paid in 2020 for 2019 and prior years	<u>2,896.00</u>	<u>7,192.00</u>		
32. Qualified business income deduction. 25.0% (.25) of federal amount. See instructions	<u> .00</u>	<u> .00</u>		
33. DPAD 199A(g) deduction. 25.0% (.25) of federal amount	<u> .00</u>	<u> .00</u>		
34. Total federal tax and other qualified deductions. Add lines 31, 32, and 33			<u>2,896.00</u>	<u>7,192.00</u>
35. Balance. Subtract line 34 from line 30. Enter here and on line 36, page 2			<u>49,738.00</u>	<u>70,924.00</u>



2020 IA 1040, page 2

	B. Spouse/Status 3	A. You or Joint	B. Spouse/Status 3	A. You or Joint
Step 8 Taxable Income				
36. BALANCE. From side 1, line 35.....		36.	49,738.00	70,924.00
37. Deduction. Check one box <input checked="" type="checkbox"/> Itemized.(Include IA Schedule A) <input type="checkbox"/> Standard <input checked="" type="checkbox"/>		37.	2,110.00	2,110.00
38. TAXABLE INCOME. SUBTRACT line 37 from line 36.....		38.	47,628.00	68,814.00
Step 9 Tax, Credits, and Check-off Contributions				
39. Tax from tables or alternate tax.....	2,390.00	39.	3,939.00	
40. Iowa lump-sum tax. See instructions.....	.00	40.	.00	
41. Iowa alternative minimum tax. Include IA 6251.....	.00	41.	.00	
42. Total tax. ADD lines 39, 40, and 41.....		42.	2,390.00	3,939.00
43. Total exemption credit amount(s) from Step 3, side 1.....	40.00	43.	40.00	
44. Tuition and textbook credit for dependents K-12.....	.00	44.	.00	
45. Volunteer firefighter/EMS/reserve peace officer credit.....	.00	45.	.00	
46. Total credits. ADD lines 43, 44, and 45.....	40.00	46.	40.00	
47. BALANCE. SUBTRACT line 46 from line 42. If less than zero, enter zero.....	2,350.00	47.	3,899.00	
48. Credit for nonresident or part-year resident. Must include IA 126 and federal return.....	1,398.00	48.	3,899.00	
49. BALANCE. SUBTRACT line 48 from line 47. If less than zero, enter zero.....	952.00	49.	0.00	
50. Out-of-state tax credit. Must include IA 130.....	.00	50.	.00	
51. BALANCE. SUBTRACT line 50 from line 49. If less than zero, enter zero.....	952.00	51.	0.00	
52. Other nonrefundable Iowa credits. Must include IA 148 Tax Credits Schedule.....	.00	52.	.00	
53. BALANCE. SUBTRACT line 52 from line 51. If less than zero, enter zero.....	952.00	53.	0.00	
54. School district surtax or EMS surtax. Take percentage from table; multiply by line 53.....	0.00	54.	0.00	
55. Total state and local tax. ADD lines 53 and 54.....	952.00	55.	0.00	
56. TOTAL state and local tax before contributions. Combine columns A and B on line 55 and enter here.....		56.	952.00	
57. Contributions will reduce your refund or add to the amount you owe. Amounts must be in whole dollars.				
Fish/Wildlife 57a: <input checked="" type="checkbox"/> State Fair 57b: <input type="checkbox"/> Firefighters/Veterans 57c: <input type="checkbox"/> Child Abuse Prevention 57d: <input type="checkbox"/> Enter here.....		57.		.00
58. TOTAL STATE AND LOCAL TAX, AND CONTRIBUTIONS. Add line 56 and line 57 and enter here.....		58.	952.00	
Step 10 Credits				
59. Iowa fuel tax credit. Include IA 4136.....	.00	59.	.00	
60. Check One: Child and dependent care credit <input type="checkbox"/> OR <input checked="" type="checkbox"/> Early childhood development credit <input type="checkbox"/>		60.	.00	.00
61. Iowa earned income tax credit. 15.0% (.15) of federal credit.....	.00	61.	0.00	
62. Other refundable credits. Include IA 148 Tax Credits Schedule.....	.00	62.	.00	
63. Iowa income tax withheld.....	1,084.00	63.	0.00	
64. Estimated and voucher payments made for tax year 2020.....	.00	64.	.00	
65. TOTAL. ADD lines 59 through 64 and enter here.....	1,084.00	65.	0.00	
66. TOTAL CREDITS. ADD columns A and B on line 65 and enter here.....		66.	1,084.00	
Step 11 Refund				
67. If line 66 is more than line 58, subtract line 58 from line 66. This is the amount you overpaid.....		67.	132.00	
68. Amount of line 67 to be REFUNDED.....		68.	132.00	
68a. Routing number: <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="2"/>		68b. Type	Checking <input checked="" type="checkbox"/>	Savings <input type="checkbox"/>
68c. Account number: <input type="text" value="3"/> <input type="text" value="5"/> <input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="2"/> <input type="text" value="3"/> <input type="text" value="6"/> <input type="text" value="8"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>				
69. Amount of line 67 to be applied to your 2021 estimated tax.....	.00	69.	.00	
Step 12 Pay				
70. If line 66 is less than line 58, subtract line 66 from line 58. This is the AMOUNT OF TAX YOU OWE.....		70.	.00	
71. Penalty for underpayment of estimated tax from IA 2210, IA 2210S, or IA 2210F. Check if annualized income method is used. <input type="checkbox"/>		71.	.00	
72. Penalty and interest <input checked="" type="checkbox"/> 72a. Penalty <input type="text" value="0"/> <input checked="" type="checkbox"/> 72b. Interest <input type="text" value="0"/> ADD. Enter total.....		72.	.00	
73. TOTAL AMOUNT DUE. ADD lines 70, 71, and 72. Enter here.....		73.	.00	

Step 13 I, the undersigned, declare under penalties of perjury or false certificate, that I have examined this return, and, to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	<input type="checkbox"/>				
Your signature	Date	Check if deceased	Date of death	SYAM PRIYA RAM SAGAR GUPTA TALLAM 05/14/2021	Preparer's signature Date
SIGN HERE	<input type="checkbox"/>				
Spouse's signature	Date	Check if deceased	Date of death	P02082703 30-1017196	Preparer's PTIN Firm's FEIN
		(217) 862-4501		(678) 965-9522	Daytime telephone number Daytime telephone number

This return is due April 30, 2021. Sign, enclose W-2s, and verify SSNs.
MAILING ADDRESS: Iowa Income Tax Document Processing,
PO BOX 9187, Des Moines IA 50306-9187
Make check payable to Iowa Department of Revenue



Name(s): S GANGADHARA & S GUDETI Social Security number: 098-95-4631

Mark the appropriate box for you and your spouse

	B. Spouse	A. You or Joint
A nonresident of Iowa for all of 2020	<input checked="" type="checkbox"/> ▲	<input checked="" type="checkbox"/> ▲
A part-year resident of Iowa during 2020	<input type="checkbox"/> ▲	<input type="checkbox"/> ▲
	Date moved into Iowa: _____	_____
	Date moved out of Iowa: _____	_____
A full-year resident of Iowa during 2020	<input type="checkbox"/>	<input type="checkbox"/>

Iowa-Source Income

	B. Spouse	A. You or Joint
1. Wages, salaries, tips, etc.	1. <u>21,338.00</u>	_____
2. Taxable interest income	2. _____	_____
3. Ordinary dividend income.....	3. _____	_____
4. Taxable alimony received.....	4. _____	_____
5. Business income or (loss)	5. _____	_____
6. Capital gain or (loss)	6. _____	_____
7. Other gains or (losses)	7. _____	_____
8. Taxable IRA distributions	8. _____	_____
9. Taxable pensions and annuities.....	9. _____	_____
10. Rents, royalties, partnerships, estates, etc.....	10. _____	_____
11. Farm income or (loss)	11. _____	_____
12. Unemployment compensation.....	12. _____	_____
13. Gambling winnings.....	13. _____	_____
14. Other income, bonus depreciation, and section 179 adjustment.....	14. _____	_____
15. Iowa gross income. Add lines 1-14	15. <u>21,338.00</u>	▲ _____
16. Payments to an IRA, Keogh, or SEP.....	16. _____	_____
17. Deductible part of self-employment tax	17. _____	_____
18. Health insurance premium	18. _____	_____
19. Penalty on early withdrawal of savings	19. _____	_____
20. Alimony paid	20. _____	_____
21. Pension/retirement income exclusion.....	21. _____	_____
22. Moving expense deduction into Iowa only	22. _____	_____
23. Iowa capital gain deduction	23. _____	_____
24. Other adjustments.....	24. _____	_____
25. Total adjustments. Add lines 16-24	25. _____	▲ _____
26. Iowa net income. Subtract line 25 from line 15	26. <u>21,338.00</u>	_____
27. All-source net income from IA 1040, line 26.....	27. <u>52,634.00</u>	<u>78,116.00</u>
28. Iowa income percentage: Divide line 26 by line 27 and enter percentage rounded to nearest tenth of a percent. This can be no more than 100.0% and no less than 0.0%	28. <u>40.5</u> %	_____ %
29. Nonresident/part-year resident credit percentage: Subtract the percentage on line 28 from 100.0%	29. <u>59.5</u> %	<u>100.0</u> %
30. Iowa tax on total income from IA 1040, line 39	30. <u>2,390.00</u>	<u>3,939.00</u>
31. Total credits from IA 1040, line 46.....	31. <u>40.00</u>	<u>40.00</u>
32. Tax after credits. Subtract line 31 from line 30.....	32. <u>2,350.00</u>	<u>3,899.00</u>
33. Nonresident/part-year resident credit. Multiply line 32 by the percentage on line 29. Enter this amount on IA 1040, line 48.....	33. <u>1,398.00</u>	<u>3,899.00</u>



Name
S GANGADHARA & S GUDDETI

Social Security No.
098-95-4631

	Spouse/Status 3	You or Joint
a Accrual method		
b Active duty military pay included in line 15 Gross Income (see detailed IA 1040 instructions online)		
c Alternative motor vehicle deduction		
d Capital gains from installment sales reported on the 2001 Iowa return using the accrual method		
e Capital or ordinary gain from involuntary conversion related to eminent domain		
f Claim of right deduction may be taken on line 24, or you can calculate the tax reduction as a credit claimed on line 62, but not both		
g College Savings Iowa or Iowa Advisor 529 Plan contributions, up to \$3,439 per beneficiary		
h Disability income exclusion - Include Form IA 2440		
i RESERVED FOR FUTURE USE		
j First-time homebuyer savings account qualifying contributions up to \$2,137 per account holder. For joint account holders filing married filing jointly you may claim up to \$4,274		
k Employer social security credit from federal return		
l Federal alcohol and cellulosic biofuel fuels credit from federal return		
m Foreign-earned income exclusion and/or foreign housing deduction from federal return		
n Gains or losses from distressed sale transactions		
o Health savings account deduction from federal form 1040, Schedule 1		
p Injured veterans program, contributions to (do not put on IA Sch. A)		
q Injured veterans program, (only grants from)		
r In-home health care		
s Iowa Veterans Trust Fund.		
t Military exemptions, not already excluded (see detailed IA 1040 instructions online)		
u Net operating loss, Iowa.		
v Organ transplant expenses		
w Partnership income and/or S corporation income: Modifications that decreased the income		
x Segal Americorps Education Award Payments		
y Speculative shell buildings		
z Student loan interest deduction from federal 1040, Schedule 1, line 20		
aa Victim compensation awards		
bb Wages paid certain individuals		
cc Work Opportunity Credit from federal return.		
dd Other federal adjustments prior to calculation of federal 1040 line 8b (federal adjusted gross income) not already taken on IA 1040: 1 Jury duty pay given to employer 2 Other: _____ _____ _____		
ee Educator expenses		
ff Tuition and Fees Deduction.		
gg Nonresident Electric Utility Worker Training and Emergency Response Work Reciprocity (see detailed IA 1040 instructions online)		
hh Rapid Response to State Disasters		
ii Iowa ABLE savings plan trust, up to \$3,439 per beneficiary		
jj Charitable contribution for non-itemizers from Form 1040 In 10b		270 .
kk Federal, state or local grant to communications service provider		
ll Economic Development Authority Grant provided under the Iowa Small Business Grant Program (if included in Sch C, In 1)		
Totals		270 .