# Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

## IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

- Internal ne	levelide Selvice					
Submis	ssion Identification Number (SID)					
Taxpayer	r's name	Social s	ecurity n	umber		
DINE	SH KUMAR KESA	789	-45-4	598		
Spouse's			's social		number	
Part l	Tax Return Information — Tax Year Ending December 31,	 Enter year y	OIL OFO	outhou	rizina \	
		criter year y	ou are	autilo	rizirig.)	<u> </u>
	whole dollars only on lines 1 through 5.  Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
	Adjusted gross income		1	1	94	,874.
	Total tax			2		,935.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3		,617.
	Amount you want refunded to you			4		,617. ,682.
	Amount you owe		_	5		,002.
Part I		and keep a	copy o		r retur	n)
Under pomy known return (of to send for any of Agent to payment authorizate payment business taxes to personal Electron	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amweldge and belief, it is true, correct, and complete. I further declare that the amounts in Part original or amended) I am now authorizing. I consent to allow my intermediate service provider, the my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reasonableay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accounts of my federal taxes owed on this return and/or a payment of estimated tax, and the financial ination is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to tert, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellations days prior to the payment (settlement) date. I also authorize the financial institutions involved to receive confidential information necessary to answer inquiries and resolve issues related to all identification number (PIN) below is my signature for the income tax return (original or amendatic Funds Withdrawal Consent.  I authorize GLOBAL TAXES LLC to enter or general signature on the income tax return (original or amendation of the income tax return on the income tax return or general taxes.	ended) I am nor I above are the ransmitter, or efor rejection of the U.S. Treas int indicated in stitution to deb minate the auton requests muin the processing the payment.	w author e amour e amour e amour e amour e the trans ury and the tax p it the en horizatio est be reng of the I further uthorizin	rizing, and strain from the return smission its design from the return try to the received electric acknown, it is and, i	nd to the the incorriginate, (b) the gnated I tion soft itis according to the control to the con	e best of ome tax or (ERO) e reason inancial ware for unt. This cancel) a r than 2 yment of that the
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.					
Your si	gnature ► Date	e▶				
Spouse	e's PIN: check one box only					
	I authorize to enter or gene	erate my PIN				as my
Ш	ERO firm name	orato my r m	Enter	five digit	s, but	ao my
	signature on the income tax return (original or amended) I am now authorizing.		don't	enter all	zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.					
Spouse	e's signature ▶ Date	e <b>▶</b>				
	Practitioner PIN Method Returns Only—continue b	elow				
Part II	Certification and Authentication — Practitioner PIN Method Only					
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5 8 7 2	7 8	6 1	9 8	9
		Don	't enter a	III zeros		
authorize	that the above numeric entry is my PIN, which is my signature for the electronic individual incred to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I amount of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Provide	submitting this	s return	in acco	rdance	
ERO's	signature ► Date	e <b>▶</b>				
	ERO Must Retain This Form — See Instructio	ns				
	Don't Submit This Form to the IRS Unless Requested					

## **£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 u checked the MFS box, enter the son is a child but not your dependent	name of y	ed filing separately ( your spouse. If you	,	_		, ,	_		•	, , ,
Your first name	and m	iddle initial	Last na	me					Yours	social sec	urity nu	mber
DINESH KUMAR KESA				<u>.</u>					789	789-45-4598		
If joint return, spouse's first name and middle initial Last na				me					Spous	Spouse's social security number		
Home address	,	er and street). If you have a P.O. box, se	e instruction	ons.				Apt. no. 13203	Check	dential Elec	ou, or yo	our
City, town, or p	ost offi	ce. If you have a foreign address, also o	complete s	paces below.	Sta	te	ZIP	code		e if filing j to this fun		
FARMERS	BRA	NCH		TX 7!			75	7 - 7 - 7 - 1		box below will not change		
Foreign country	y name		F	Foreign province/state	/coun	ty	Fore	ign postal cod	e your ta	ax or refur	_	Spouse
At any time du	ring 20	020, did you receive, sell, send, ex	change, c	or otherwise acquire	any	financial intere	st in	any virtual	currency	? <b>Ye</b>	s X	No
Standard Deduction	_	eone can claim:	•			•						
Age/Blindness	You:	Were born before January 2,	1956	Are blind Sp	ouse	: Was bo	rn be	fore Januar	y 2, 1956	☐ Is	blind	
Dependents	s (see	instructions):		(2) Social securit	V	(3) Relationsh	nip	(4) 🗸 if	qualifies 1	jualifies for (see instructions):		ıs):
If more	•	irst name Last name		number to you		.	Child tax cred					
than four												
dependents, see instruction												
and check	5 —											
here ▶ □												
	1	Wages, salaries, tips, etc. Attach	Form(s) \	N-2						1	93,	540.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		. 2	2b		
Sch. B if required.	3a	Qualified dividends	3a	19.	<b>b</b> (	Ordinary divide	nds		. 3	Bb		19.
	4a	IRA distributions	4a		<b>b</b> T	axable amoun	t.		. 4	lb		
	5a	Pensions and annuities	5a		<b>b</b> T	axable amoun	t.		. 5	ib		
Standard	6a	Social security benefits	6a		<b>b</b> T	axable amoun	t.		. 6	3b		
Deduction for—	7	Capital gain or (loss). Attach Scho	edule D if	required. If not req	uired	, check here		🕨		7	1,	315.
Single or Married filing	8	Other income from Schedule 1, li	Other income from Schedule 1, line 9							8		
separately, \$12,400	9							9	94,	874.		
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22				10	a					
widow(er),	b	Charitable contributions if you take the standard deduction. See instructions 10b										
\$24,800 • Head of	С	Add lines 10a and 10b. These are your <b>total adjustments to income</b>							<b>&gt;</b> 10	0с		
household,	11	Subtract line 10c from line 9. This	s is your a	adjusted gross inc	ome				▶ 1	11	94,	874.
\$18,650 If you checked	12	Standard deduction or itemized	•	•						12		400.
any box under Standard	13	Qualified business income deduc		•	,	8995-A			. 1	13		
Deduction,	14	Add lines 12 and 13							. 1	12,400.		400.
see instructions.	15	Taxable income. Subtract line 1	4 from lin	e 11. If zero or less	, ente	er-0				15		474.

Form 1040 (2020	))									Page 2	
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌 _			16	13,935.	
	17	Amount from Schedule 2, lin	ne 3						17		
	18	Add lines 16 and 17							18	13,935.	
	19	Child tax credit or credit for	other dependen	ts					19		
	20	Amount from Schedule 3, lin	ne 7						20		
	21	Add lines 19 and 20							21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	13,935.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 10 .				23	0.	
	24	Add lines 22 and 23. This is	your <b>total tax</b>					. ▶	24	13,935.	
	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a	15	617.			
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c							25d	15,617.	
If you have a	26	2020 estimated tax payment	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	from Form 8863	3, line 8		29					
combat pay, see instructions.	30	Recovery rebate credit. See	instructions .			30			1		
	31	Amount from Schedule 3, lin				31			1		
	32	Add lines 27 through 31. The					its	. ▶	32		
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>								15,617.	
Defined	34	If line 33 is more than line 24							33 34	1,682.	
Refund	35a	Amount of line 34 you want				-	-		35a	1,682.	
Direct deposit?	▶b	Routing number 1 0 7 0 0 0 3 2 7 ▶ c Type: X Checking Savings								,	
See instructions.	►d	Account number 4 3 9					о 🗀 -	3			
	36	Amount of line 34 you want									
Amount	37							. •	37		
You Owe		Subtract line 33 from line 24. This is the <b>amount you owe now</b>									
For details on		2020. See Schedule 3, line 12e, and its instructions for details.									
how to pay, see instructions.	38	Estimated tax penalty (see in				38					
Third Party	Do	you want to allow another									
Designee		structions					Yes. Co	mplete k	elow.	<b>⋉</b> No	
		signee's		Phone				nal identi			
	naı	me ►		no. ►			numb	er (PIN)	<b>*</b>		
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which										
Here						aseu on an					
	YO	ur signature		Date	Your occupation					nt you an Identity IN, enter it here	
Joint return?					SOFTWARE	ENGINE	ER	- 1	inst.) 🕨		
See instructions.	Sp	Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupation		If the	IRS ser	nt your spouse an		
Keep a copy for your records.	or V								•	ection PIN, enter it her	
your records.								(see	inst.) 🕨		
		one no.									
Paid		eparer's name	Preparer's signat			Date		PTIN		Check if:	
Preparer	RV	SSMANIKUMARAPPANA	RVSSMANIK	UMARAPPAN	IA .	03/09	/2021	P0209		Self-employed	
Use Only		m's name ► GLOBAL TA						Phor	ie no. (	646)727-7157	
	Fir	m's address ► 2530 Pebb	le Creek L	n Cumming	g GA 30041			Firm	's EIN ▶	30-1017196	
Go to www.irs.go	ov/Form	n1040 for instructions and the late	st information.		BAA	REV 03	/01/21 PRO			Form <b>1040</b> (202	

#### SCHEDULE D (Form 1040)

Department of the Treasury

## **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.

OMB No. 1545-0074

2020

Attachment Sequence No. **12** 

Internal Revenue Service (99) ► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Name(s) shown on return

DINESH KUMAR KESA

Pid your diamage of any investment(s) in a qualified a prostruit fund during the topy your Service (99)

Name(s) Sequence No. 1

Your social security number 789-45-4598

	ou dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona			_		
Pa	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	<b>(d)</b> Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part I,	(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 <b>Box A</b> checked	20,414.	19,099.			1,315.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (l	oss) from Forms 4		B24	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	-			5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	Carryover	6	( )		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise			e any long-	7	1,315.
Par	tII Long-Term Capital Gains and Losses—Ge			One Year	1	
See instructions for how to figure the amounts to enter on the lines below.  (d) (e) Adjustments to gain or loss fr						(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colum	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 <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat		12			
	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions		•	-	14	( )
15	Net long-term capital gain or (loss). Combine lines 8a	through 14 in co	lumn (h). Then, go	to Part III	_	

BAA

Schedule D (Form 1040) 2020 Page 2

### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 1,315. • 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.

## Form **8949**

### **Sales and Other Dispositions of Capital Assets**

► Go to www.irs.gov/Form8949 for instructions and the latest information.

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

OMB No. 1545-0074

2020
Attachment
Sequence No. 12A

Name(s) shown on return

DINESH KUMAR KESA

Department of the Treasury

Internal Revenue Service

Social security number or taxpayer identification number

789-45-4598

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.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions	not reported	to you on F	orm 1099-B	·			
(a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis. See the <b>Note</b> below	If you enter an enter a co	enter a code in column (f).  See the separate instructions.  Gain of Subtract of	(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	instructions   Code(s) from   Amo	in the separate instructions	Code(s) from Amount of	from column (d) and combine the result with column (g)
Robinhood Securities LLC	09/24/20	10/01/20	20,414.	19,099.			1,315.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	20.414.	19.099.			1.315.

**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.