Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

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	Social security number				
SRIRAM KODALI	848-58-6289				
Spouse's name	Spouse's social security number				
Part I Tax Return Information – Tax Year Ending December 31, (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 67,218.				
2 Total tax	2 7,852.				
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 10,510.				
4 Amount you want refunded to you	. 4 4,458.				
5 Amount you owe	5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and A	keep a copy of your return)				

Under penalties of periury. 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

X	I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN

8	6	2	8	9	
Ent	er fiv	ve di	gits,	but	as my
dor	n't er	nter a	all ze	ros	

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

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

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

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 signat	ature 🕨 🛛 Da	ate 🕨								
	Practitioner PIN Method Returns Only—continue below									
Part III Ce	ertification and Authentication – Practitioner PIN Method Only									
ERO's EFIN/PI	IN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8	7		 8 nter a	 	9	8	9

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						
For Denember 1/2 Deduction Act Nation and			Earm 8879 (Boy, 01 2021)			

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/15/21 PRO

E 104(artment of the Treasury—Internal Revenue Servi S. Individual Income Ta >		(99) urn	202	20	OMB No. 154	5-0074	IRS Use Only	r−Do not w	vrite or staple	in this space.
Filing Statu Check only one box.	lf yc	Single Married filing jointly ou checked the MFS box, enter the n son is a child but not your dependent	ame of	-	separately ouse. If you				ehold (HOH) box, enter th		, ,	. , . ,
Your first name	e and m	iddle initial	Last na	ime						Your so	cial securit	ty number
SRIRAM			KODA	ALI						848-	58-628	9
If joint return, s	spouse's	s first name and middle initial	Last na	ime						Spouse	's social sec	curity number
Home address 1550 KA		er and street). If you have a P.O. box, see AP RD ,	instructi	ons.					Apt. no. 1401	Check I	here if you,	
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete s	paces be	low.	Sta	te	ZIP c	ode			ntly, want \$3 Checking a
KATY						T2	X	77	494	Ŭ	ow will not	0
Foreign countr	ry name		1	Foreign p	rovince/stat	e/coun	ty	Forei	gn postal code	your tax	k or refund.	
											You	Spouse
At any time du	uring 20	020, did you receive, sell, send, exch	nange, d	or otherv	vise acquir	e any	financial inter	est in	any virtual cu	irrency?	Yes	🗙 No
Standard Deduction	_	eone can claim:	•		•		a dependent					
Age/Blindnes	s You	: 🗌 Were born before January 2, 1	956	Are b	lind S	pouse	: 🗌 Was bo	orn bef	ore January	2, 1956	🗌 ls bl	ind
Dependent	s (see	instructions):		(2) 5	Social secur	ity	(3) Relations	hip	(4) 🗸 if q	ualifies fo	r (see instru	ictions):
If more		irst name Last name			number	to you			Child tax c	credit Credit for other depende		
than four											[
dependents, see instruction											[
and check	15										[
here 🕨 🗌] [
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2 .						. 1	-	76,440.
Attach	2a	Tax-exempt interest	2a			bТ	axable intere	st.		. 2b	,	
Sch. B if required.	3a	Qualified dividends	3a			bC	Ordinary divid	ends .		. 3b)	
required.	- 4a	IRA distributions	4a			bТ	axable amou	nt		. 4b	,	
	5a	Pensions and annuities	5a			bΤ	axable amou	nt		. 5b)	
Standard	6a	Social security benefits	6a			bТ	axable amou	nt		. 6b)	
Deduction for-	7	Capital gain or (loss). Attach Sche	dule D i	f require	d. If not re	quired	, check here		🕨 [7		-92.
 Single or Married filing 	8	Other income from Schedule 1, lin	e9.							. 8	-	-6,830.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	This is yo	our total in	come				▶ 9	(69,518.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22	From Schedule 1, line 22							0.		
widow(er), \$24,800	b	Charitable contributions if you take	the star	ndard de	duction. Se	e inst	ructions 10)b	30	0.		
Head of	с	Add lines 10a and 10b. These are	your to f	tal adjus	stments to	inco	me			► 100	5	2,300.
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted	d gross in	come				▶ 11	f	67,218.
 If you checked 	12	Standard deduction or itemized	deduct	ions (fro	m Schedu	le A)				. 12	:	12,400.
any box under Standard	13	Qualified business income deduction	ion. Atta	ach Form	n 8995 or F	orm 8	995-A			. 13		
Deduction, see instructions.	14	Add lines 12 and 13	and 13							. 14		12,400.
	15	Taxable income. Subtract line 14	from lin	ne 11. lf z	zero or les	s, ente	er-0	<u> </u>		. 15	,	54,818.
												1040 (

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

Form **1040** (2020)

Form 1040 (2020))										Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2	4972	3			16	7,852.
	17	Amount from Schedule 2, lir	ne3						· 	17	0.
	18	Add lines 16 and 17								18	7,852.
	19	Child tax credit or credit for	other dependen	ts						19	
	20	Amount from Schedule 3, lir	ne7							20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0						22	7,852.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line ⁻	10.				23	0.
	24	Add lines 22 and 23. This is	your total tax						. 🕨	24	7,852.
	25	Federal income tax withheld	from:								
	а	Form(s) W-2					25a	10	,510		
	b	Form(s) 1099					25b				
	с	Other forms (see instruction	s)				25c	:			
	d	Add lines 25a through 25c								25d	10,510.
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20	19 retur	n				26	
qualifying child,	27	Earned income credit (EIC)			¹	Nọ .	27				
attach Sch. EIC.	28	Additional child tax credit. A	ttach Schedule	8812			28				
nontaxable combat pay,	29	American opportunity credit	from Form 8863	8, line 8			29				
see instructions.	30	Recovery rebate credit. See	instructions .				30	1	,800		
	31	Amount from Schedule 3, lir	ne 13				31				
	32	Add lines 27 through 31. The	ese are your tot a	al other paym	ents and	d refund	able c	redits	. 🕨	32	1,800.
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					. 🕨	33	12,310.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is t	he amou	int you	overpaid		34	4,458.
neiuliu	35a	Amount of line 34 you want	refunded to you	. If Form 8888	is attac	hed, che	eck her	e] 35a	4,458.
Direct deposit?	►b	Routing number 1 1 1			► c Ty		Chec		Saving	s	
See instructions.	►d	Account number 4 8 8	0 7 5 5	3 4 1 2	1				-		
	36	Amount of line 34 you want	applied to your	2021 estimate	d tax .	. 🕨	36				
Amount	37	Subtract line 33 from line 24	. This is the am	ount vou owe	now .				. 🕨	. 37	
You Owe		Note: Schedule H and Sch								or	
For details on		2020. See Schedule 3, line 1		,	•		01 110		0.10		
how to pay, see instructions.	38	Estimated tax penalty (see in	nstructions) .			. 🕨	38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with	the IRS?	? See				
Designee	ins	tructions	· · · · ·				. 🕨	🗌 Yes. C	omplet	e below.	X No
		signee's		Phone						ntification	
		ne 🕨		no. 🕨					ber (PIN	,	
Sign		der penalties of perjury, I declare t ef, they are true, correct, and com									
Here		ur signature		Date		cupation	4004 01	i un informati			nt you an Identity
	10			Dale	rouroc	cupation					IN, enter it here
Joint return?		ring		02/24/2021	SOFT	WARE	ENGI	NEER	(se	ee inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse	's occupa	tion				nt your spouse an
Keep a copy for your records.	,									entity Prot ee inst.) 🕨	ection PIN, enter it here
,									(50		
		one no.	Dueneueutt	Email address			D-/		DTIN		Chaoli ifi
Paid		parer's name	Preparer's signat		a		Date		PTIN	00000	Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUP'I'A	TALLAM	1 02/	23/2021		82703	Self-employed
Use Only		n's name ► GLOBAL TA		'	~-	20041					(678)965-9522
		n's address ► 2530 Pebb		n Cummin	-				Fii	rm's EIN 🕨	
Go to www.irs.go	ov/Forn	1040 for instructions and the late	st information.		B	AA	RE	V 02/15/21 PR	C		Form 1040 (2020)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

OMB No. 1545-0074

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

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soc	ial security number
	Attachment Sequence No. 01

....

Part I Additional Income	•
SRIRAM KODALI	848-58-6289
Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security numbe

Pa	Additional income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	0.
2 a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions)		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-6,830.
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	-6,830.
Par	t II Adjustments to Income		0,000.
10		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		
с	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	2,000.
22	Add lines 10 through 21. These are your adjustments to income. Enter here and		
Ear D-	on Form 1040, 1040-SR, or 1040-NR, line 10a	22	2,000.
LOL LA	perwork Reduction Act Notice, see your tax return instructions. BAA REV 02/15/21 PRO	schedule	e 1 (Form 1040) 2020

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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.

2020 Attachment Sequence No. 12

Name(s) shown on return SRIRAM KODALI

Department of the Treasury

Internal Revenue Service (99)

Your social security number

848-58-6289

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X 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)

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.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, I line 2, column	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 Box A checked	2,322.	2,560.	1	56.	-82.
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					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	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 Worksheet in the instructions	-	6	()		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	· / ·		7	-82.

Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions)

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	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949,	from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
who	e dollars.		, ,	line 2, column (g)		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	7.	17.			-10.
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 from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	-	14	()		
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•	.,		15	-10.

Pari	III Summary	
16	Combine lines 7 and 15 and enter the result	16 -92.
	 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?	
	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.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 (92.)
	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?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.	
	X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	
	REV 02/15/21 PRO	Schedule D (Form 1040) 2020

Form	8949
Form	8949

Name(s) shown on return

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

Attachment

20

Department of the Treasury

► 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.

 1b, 2, 3, 8b, 9, and 10 of Schedule D.
 Addition for Sequence No. 12A

 Social security number or taxpayer identification number

144110(5) 5110	Win off fotuni		
SRIRAM	KODALI		

848-58-6289

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 Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	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	12/18/20	12/23/20	2,285.	2,525.	W	156.	-84.
ROBINHOOD CRYPTO LLC	01/28/20	06/29/20	37.	35.			2.
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 C	al here and inc is checked), lir	lude on your 1e 2 (if Box B	2,322.	2,560.		156.	-82.

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 8949 (2020)	Attachment Sequence No. 12A	Page 2
Name(s) shown on return. Name and SSN or taxoaver identification no. not required if shown on other side	Social security number or taxpayer identification num	ber

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SRIRAM KODALI

848-58-6289

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	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	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 CRYPTO LLC	08/17/18	06/29/20	7.	17.			-10.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your 1e 9 (if Box E	7.	17.			-10.

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.

	ent of the Treasury Revenue Service (99)	Go to www.irs.gov/ScheduleE fe							At	tachment equence N	o. 13
	shown on return							You	Ir social sec		
SRIR	AM KODALI							84	18-58-6	289	
Part	Income or Loss	From Rental Real Estate and Ro	yaltie	s Note	: If you	are in th	ne business o	f renti	ng persona	al propert	y, use
		instructions. If you are an individual, rep	ort farr	n rental i	ncome	or loss f	rom Form 48	35 on	page 2, lir	ne 40.	
A Dic		nts in 2020 that would require you to									X No
		ou file required Form(s) 1099?								_	No
 1a		each property (street, city, state, ZIF						-			
A		IYDERABAD TELANAGANA IN 5		-							
В											
C											
1b	Type of Property	2 For each rental real estate prop	nertv l	isted		Faiı	r Rental	Per	sonal Us	e	
	(from list below)	above, report the number of fa	ir rent	al and			Days		Days		QJV
Α	3	personal use days. Check the	QJV b	ox only	Α		185		0		\Box
В		if you meet the requirements to qualified joint venture. See inst	tructio	ns.	B		200				$\overline{\square}$
C				F	C						$\overline{\square}$
	of Property:				•						<u> </u>
	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd		7 Self-	Rental				
-	ti-Family Residence	4 Commercial		valties			er (describe)				
Incom		Properties:			Α	0 0 0 0 0	E			С	
3	Rents received	· · · · · · · · · · ·	3			420.					
4			4								
Expen											
5			5								
6		nstructions)	6								
7	-	nance	7			750.					
8			8								
9			9								
10		essional fees	10								
11			11			950.					
12		d to banks, etc. (see instructions)	12								
13			13								
14			14		2,	000.					
15			15			650.					
16			16								
17			17		1,	900.					
18		e or depletion	18								
19	Other (list)	·	19								
20		lines 5 through 19	20		7,	250.					
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If									
		instructions to find out if you must									
			21		-б,	830.					
22	Deductible rental real	l estate loss after limitation, if any,									
		structions)	22	(-6,8	330.)	()()
23a	Total of all amounts r	eported on line 3 for all rental prope	rties			23a		4	20.		
b	Total of all amounts r	eported on line 4 for all royalty prop	erties			23b					
с	Total of all amounts r	eported on line 12 for all properties				23c					
d	Total of all amounts r	eported on line 18 for all properties				23d					
е	Total of all amounts r	eported on line 20 for all properties				23e		7,2	50.		
24	Income. Add positiv	e amounts shown on line 21. Do no	t inclu	ide any l	losses				24		
25	Losses. Add royalty lo	sses from line 21 and rental real estate	losse	s from lin	ie 22. E	inter tot	al losses her	e. [25 (6,	,830.)
26	Total rental real est	ate and royalty income or (loss).	Comb	ine lines	24 an	d 25. E	Enter the rea	sult			
	here. If Parts II, III, I	V, and line 40 on page 2 do not	apply	to you,	also (enter tl	his amount	on			
	Schedule 1 (Form 104	40), line 5. Otherwise, include this ar	mount	in the to	otal on	line 41	on page 2	.	26	-6	5,830.

Supplemental Income and Loss

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

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

For Paperwork Reduction Act Notice, see the separate instructions.

SCHEDULE E

(Form 1040)

Schedule E (Form 1040) 2020

OMB No. 1545-0074

SRIRAM KODALI

Tuition and Fees Deduction

OMB No. 1545-0074

Attach to Form 1040 or 1040-SR.

Attachment Sequence No. 60

▶ Go to www.irs.gov/Form8917 for the latest information.



Use this form for qualified tuition and fees paid in 2018, 2019, or 2020, and later years if legislation extends the deduction (see instructions). File a separate Form 8917 for each year after 2017 for which you qualify to take the deduction.

You **can't** take both an education credit from Form 8863 and the tuition and fees deduction from this form for the **same student** for the same tax year.

Before you begin:

✔ To see if you qualify for this deduction, see *Who Can Take the Deduction* in the instructions below.

- If you file Form 1040 or 1040-SR, figure any write-in adjustments.
 - For 2018: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040), line 36.
 - For 2019: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22.
 - For 2020 and later years: Figure any write-in adjustments for Schedule 1 (Form 1040 or 1040-SR); see the Instructions for Forms 1040 and 1040-SR.

1		's name (as shown on page 1 of your tax return)	(b) Student's social secu number (as shown on pa	,	(c) Adjusted qualified expenses (see
	First name	Last name	1 of your tax return)		instructions)
	SRIRAM	KODALI	848-58-6289		7,200.
2	Add the amounts on	line 1, column (c), and enter the total		2	7,200.
3		om your "total income" line of Form 1040 or	3 69,518.		
4	(Form 1040), lines 23	e total of the amounts on your 2018 Schedule 1 3 through 33, plus any write-in adjustments you d line next to Schedule 1 (Form 1040), line 36.			
	Schedule 1 (Form 10 write-in adjustments	1: Enter the total of the amounts on your 2019 140 or 1040-SR), lines 10 through 20, plus any you entered on the dotted line next to 140 or 1040-SR), line 22.			
		e www.irs.gov/Form8917 to find out if the line 2019 have changed	4	-	
5		line 3.* If the result is more than \$80,000 (\$160,00 the deduction for tuition and fees	•••••	5	69,518.
		2555, 2555-EZ, or 4563, or you're excluding incor t of Your Income on the Amount of Your Deduction ine 5.			
6	Tuition and fees de filing jointly)?	eduction. Is the amount on line 5 more than \$65,	000 (\$130,000 if married		
	X Yes. Enter the sr	naller of line 2, or \$2,000.		-	
	No. Enter the sr	$\left.\begin{array}{cccccccccccccccccccccccccccccccccccc$		6	2,000.

Also enter this amount on line 21 of the 2019 and 2020 Schedule 1 (Form 1040 or 1040-SR), or line 34 of the 2018 Schedule 1 (Form 1040). See *www.irs.gov/Form*8917 to find out if the line references above for 2019 have changed.

	DO NOT MA	AIL THIS	FORM TO THE FTB
TAXABLE YEAR			FORM
2020	California e-file Signature Authorization for Indivi	duals	8879
Your name		Your SSN	or ITIN
SRIRAM KOI		848-58	
Spouse's/RDP's nat	ne	Spouse's/F	IDP's SSN or ITIN
Part I Tax Ret	urn Information (whole dollars only)		
1 California Adju	sted Gross Income (AGI). See instructions		1 28,560.
2 Amount You O	we. See instructions		2
3 Refund or No	Amount Due. See instructions		3 393
	er Declaration and Signature Authorization (Be sure you obtain and keep a copy of your return.) perjury, I declare that I have examined a copy of my individual income tax return and accompanying sche		
and on form FTB 8 agrees with the di agent to authorize return to the Franc provider, and/or t does not receive fi read and consent	If applicable, I authorize an electronic funds withdrawal of the amount on line 2 and/or the estimated tax 6455, California e-file Payment Record for Individuals, or a comparable form. If applicable, I declare that d rect deposit authorization stated on my return. If I have filed a joint return, this is an irrevocable appointm an electronic funds withdrawal or direct deposit. I authorize my ERO, transmitter, or intermediate service thise Tax Board (FTB). If the processing of my return or refund is delayed, I authorize the FTB to disclose transmitter the reason(s) for the delay or the date when the refund was sent. If I am filing a balance due all and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and p to the Electronic Funds Withdrawal Consent included on the copy of my electronic income tax return. I ha my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Cons	irect deposi ent of the of provider to se to my ER return, I ur penalties. I a ve selected	it refund amount on line 3 ther spouse/RDP as an transmit my complete 0, intermediate service iderstand that if the FTB acknowledge that I have
· · ·	ny signature for my electronic income tax return and, ir applicable, my electronic runus withdrawar cons	UIIL.	
I authorize G	LOBAL TAXES LLC to ent	er my PIN	8 6 2 8 9
	ERO firm name		Do not enter all zeros
as my signat	ure on my 2020 e-filed California individual income tax return.		
	y PIN as my signature on my 2020 e-filed California individual income tax return. Check this box only if you I using the Practitioner PIN method. The ERO must complete Part III below.	ou are enter	ing your own PIN and you
Your signature	Date		
Spouse's/RDP's P	IN: check one box only		
I authorize _	to ent	er my PIN	
	ERO firm name ure on my 2020 e-filed California individual income tax return.		Do not enter all zeros
I will enter r	ny PIN as my signature on my 2020 e-filed California individual income tax return. Check this box o Irn is filed using the Practitioner PIN method. The ERO must complete Part III below.	nly if you a	re entering your own PIN
Spouse's/RDP's si	gnature Date		
	Practitioner PIN Method Returns Only continue below		
	cation and Authentication — Practitioner PIN Method Only		
Part III Certif			
	Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8 7 2 7 8 Do not enter all	6 1	9 8 9
ERO's EFIN/PIN . I I certify that the a	Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8 7 2 7 8	zeros 1 for the tax	payer(s) indicated above.
ERO's EFIN/PIN . E I certify that the a confirm that I am e-file Providers.	Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8 7 2 7 8 Do not enter all bove numeric entry is my PIN, which is my signature for the 2020 California individual income tax return	zeros 1 for the tax 1345, 2020	payer(s) indicated above.

2020 Resident Income Tax Return S40NR APE ATTACH FEDERAL RETURN 848-58-6289 KODA 20 SRIRAM KODALI 20 1550 KATY GAP RD APT 1401 KATY TX 77494 01-09-1993 1 Single 4 Head of housahold (with qualifying person). See instructions. 1 2 Married/RDP filing pointly. See inst. 5 Qualifying widow(er). Enter year spouse/RDP did. See instructions. 3 Married/RDP filing separately. Enter spouse/RDP's SSN or TIN above and full name here 6 See instructions. 6 • For Ine 7, Ine 8, Ine 8, and line 10: Multiply the number you enter in the box by the pre-printed dolar amount for that line. Whole dolars are instructions. • 7 Personal: How how how here 7. • 6 • 7 • For Ine 7, Ine 8, Ine 8, and line 10: Multiply the number you enter in the box by the pre-printed dolar amount for that line. • 6 12.4 9 12.4 9 12.4 9 12.4 • Ine 10: NUL 9, Our spouse/RDP are 6 or older, enter 1: • 6 1.5 12.4 • 6 12.4 12.4 10 • 10 <th>TAX</th> <th>ABLE Y</th> <th>'EAR</th> <th>Cal</th> <th>ifor</th> <th>nia </th> <th>Non</th> <th>resi</th> <th>dent</th> <th>t or</th> <th>Par</th> <th>t-Ye</th> <th>ear</th> <th></th> <th></th> <th></th> <th></th> <th>_</th> <th>CALIFOR</th> <th>NIA FORM</th>	TAX	ABLE Y	'EAR	Cal	ifor	nia	Non	resi	dent	t or	Par	t-Ye	ear					_	CALIFOR	NIA FORM
888-58-6289 KODALI 20 1550 KATY GAP RD APT 1401 KATY TX 77494 01-09-1993 01-09-1993 Image: Comparison of the status is different from your federal filing status, check the box here		2020	-																54(ONR
SRIRAM KODALI 1550 KATY GAP RD TX 77494 01-09-1993 TX 77494 01-09-1993 It your California filing status is different from your federal filing status, check the box here									A	PE				ATTZ	ACH	FEDE	RAL	RET	URN	
KATY TX 77494 01-09-1993 If your California filing status is different from your federal filing status, check the box here				9			IJ							20						
If your California filling status is different from your federal filling status, check the box here Image: Single Image: Sin			XATY	GAP	RD	TZ	x 7	7494	1		AI	ΡT	140	1						
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if both are visually impaired, enter 2		c	hecked b	ox 2 c	r 5, ente	er 2. If y	you che	cked th	e box on	line 6	, see ins		ons. 💽 7	1	X \$1	24 = •	\$		124	
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relationship O				5. O						•						•				
Total dependent exemptions			relationshi							•										
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You	ır na	ame: KODALI	Your SSN or ITIN:	848-58-6289		
	11	Exemption amount: Add line 7 through lin	e 10		• 11 \$	124
	12	Total California wages from your federal Form(s) W-2, box 16	● 12	28560	.00	
come	13 14	California adjustments – subtractions. Entr Part II, line 23, column B	er the amount from Sch	nedule CA (540NR),		67218 .00 .00
Total Taxable Income	15 16	See instructions			. 15	67218 .00
Total Ta	17	line 23, column C				2300 .00 69518 .00
	18	Enter the larger of: Your California itemize Part III, line 30; OR Your California standa	ed deductions from Sch rd deduction. See instr	nedule CA (540NR), ructions		4601 .00
	19	Subtract line 18 from line 17. This is your enter -0-		,	• 19	64917 .00
	31			Rate Schedule		3164
	32	• FTB 3 CA adjusted gross income from Schedule (540NR), Part IV, line 1	CA	28560	. • 31	3164 .00
	35	CA Taxable Income from Schedule CA (54)	ONR), Part IV, line 5		. • 35	26670 .00
CA Taxable Income	36	CA Tax Rate. Divide line 31 by line 19		. • 36 0.0487		
able li	37	1 13			. (•) 37	1299 .00
CA Tax	38	If more than 1, enter 1.0000		. • 38 0.4108]	
	39	CA Prorated Exemption Credits. Multiply li If the amount on line 13 is more than \$203			. • 39	51 .00
	40					.00
	41	Tax. See instructions. Check the box if from				00
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dits	51	Attach form FTB 3506	· · · · · · · · · · · · · · · · · · · ·		. • 50	. 00
Special Credits	52 53	Credit for senior head of household. See instructions	• 53		• 00 • 00	
S	54	Credit percentage. Enter the amount from I If more than 1, enter 1.0000. See instruction		. • 54]	
	55	Credit amount. See instructions			. ● 55	- 00
		Side 2 Form 540NR 2020	175 313	2204 REV 02/1	16/21 PRO	

You	ir nar	ne:	KODALI			Your SSN o	or ITIN:	848-	58-6289				
	58	Enter	r credit name				code		and amount	• 58			.00
inued	59	Enter	r credit name				code		and amount	• 59			.00
s cont	60	To cl	laim more tha	an two cred	lits. See instr	uctions				• 60			.00
credits	61	Nonr	refundable Re	enter's Crec	lit. See instru	ictions				• 61			. 00
Special Credits continued	62	Add	line 50 and li	ne 55 throi	ugh 61. Thes	e are your tota	l credits .			62			. 00
Spe	63	Subt	tract line 62 f	rom line 42	. If less than	63	12	248	.00				
	71												.00
Other Taxes	72	Men	tal Health Ser	vices Tax.	See instruction	ons				• 72			• 00
ther 7	73	Othe	er taxes and c	redit recap	ture. See inst	ructions				• 73			.00
Ð	74	Exce	ess Advance F	Premium As	ssistance Sul	osidy (APAS) r	epayment	. See ins	tructions	• 74			. 00
	75	Add	line 63, line 7	71, line 72,	line 73, and	line 74. This is	your tota	l tax		• 75	12	248	.00
	81	Calif	ornia income	tax withhe	ld. See instru	ictions				• 81	16	541	. 00
	82												. 00
	83	With	holdina (Forr	n 592-B an	id/or 593). Se	e instructions				• 83			. 00
ents	84				·								. 00
Payments	85												. 00
Δ.													. 00
			-										
	87									_	1 /	- 4 1	• 00
	88	Add	line 81 throu	gh line 87.	These are yo	ur total payme	ents. See i	nstructio	ns	• 88	Τ¢	541	. 00
enalty	91	Indiv	vidual Shared	Responsit	oility (ISR) Pe	enalty. See inst	ructions .		• 91		.00		
ISR Penalty		•	× Full-ye	ar health ca	are coverage.								
	92	-				sibility Penalty				<u> </u>			
Overpaid Tax/Tax Due	93	Indiv	vidual Shared	Responsib	ility Penalty	Balance. If line	91 is mo	re than li		-	16	541	. 00
i Tax/										0 11			.00
erpaic	101	Over	rpaid tax. If lir	ne 92 is mo	ore than line 7	75, subtract lin	ie 75 from	ı line 92.		● 101		393	. 00
9 Vē	102	Amo	ount of line 10)1 you wan	t applied to y	our 2021 estir	nated tax			• 102		0	.00

175	
1/5	

Your na	me:	KODALI	Your SSN or ITIN:	848-58-6289			
103	B Ove	erpaid tax available this year. Subtract li	ne 102 from line 101		. • 103	393	. 00
104	l Tax	due. If line 92 is less than line 75, subt	ract line 92 from line 7	5			. 00
					<u>Code</u>	Amount	
	Cali	fornia Seniors Special Fund. See instru	ctions		• 400		. 00
	Alzł	neimer's Disease and Related Dementia	Voluntary Tax Contribu	ition Fund	• 401		. 00
	Rar	e and Endangered Species Preservation	n Voluntary Tax Contrib	ution Program	• 403		.00
	Cali	fornia Breast Cancer Research Volunta	ry Tax Contribution Fun	d	• 405		. 00
	Cali	fornia Firefighters' Memorial Voluntary	Tax Contribution Fund		• 406		. 00
	Em	ergency Food for Families Voluntary Ta	• 407		. 00		
	Cali	fornia Peace Officer Memorial Foundat	on Voluntary Tax Contr	ibution Fund	• 408		. 00
	Cali	fornia Sea Otter Voluntary Tax Contribu	• 410		. 00		
ions	Cali	fornia Cancer Research Voluntary Tax (Contribution Fund		• 413		. 00
Contributions	Sch	ool Supplies for Homeless Children Fu	nd		• 422		. 00
Con	Stat	te Parks Protection Fund/Parks Pass Pu	ırchase		• 423		. 00
	Pro	tect Our Coast and Oceans Voluntary Ta	ax Contribution Fund		• 424		. 00
	Kee	p Arts in Schools Voluntary Tax Contril	oution Fund		• 425		. 00
	Pre	vention of Animal Homelessness and C	ruelty Voluntary Tax Co	ntribution Fund	• 431		. 00
	Cali	fornia Senior Citizen Advocacy Volunta	ry Tax Contribution Fun	d	• 438		. 00
	Nat	ive California Wildlife Rehabilitation Vol	untary Tax Contribution	1 Fund	• 439		. 00
	Rap	e Kit Backlog Voluntary Tax Contributio	on Fund		• 440		. 00
	Sch	ools Not Prisons Voluntary Tax Contrib	ution Fund		• 443		. 00
	Sui	cide Prevention Voluntary Tax Contribu	tion Fund		• 444		. 00
12	D Add	l code 400 through code 444. This is yo	our total contribution .		• 120		. 00

You	r nan	ne:	KODALI		Your SSN o	r ITIN:	848-58-6	5289				
Amount You Owe	121	Mail	UNT YOU OWE. Add to: FRANCHISE TA) Online – Go to ftb.ca	(BOARD, PO BOX	(942867, SA	CRAMENT			121			00
Interest and Penalties		Und	rest, late return pena erpayment of estima	ted tax.					122			00
Inter		Cheo	ck the box:	FTB 5805 attach	ed ● 📖 F	TB 5805	Fattached		● 123 └		•	00
	124	Tota	l amount due. See in	structions. Enclos	e, but do not	staple, an	y payment		124			00
	125		UND OR NO AMOUN								393	
			to: FRANCHISE TAX						125			00
Deposit		See	n the information to a instructions. Have y r the following amou	ou verified the rou int of my refund (li	iting and acc	ount num	bers? Use wh	ole dollars onl	у.		k or a deposit slip.	
rect			Routing number	• Type	Account nu	mber				126 Direct of	deposit amount	_
and Di			111000025	Ľ	88075534	11					393	00
Refund and Direct Deposit		The	remaining amount o	f my refund (line 1	25) is author	ized for di	irect deposit in	ito the accoun	t shown be	low:		
			Routing number	Type Checking Savings	Account nu	mber				127 Direct of	deposit amount	00
			Attach a copy of your									
ftb.c	a.gov	v/forr	your privacy rights, h ns and search for 11	31. To request this	notice by ma	uil, call 800	0.852.5711.		•			
Und knov	er per vledge	naltie e anc	s of perjury, I declare I belief, it is true, corr	e that I have exami rect, and complete	ned this tax ro.	eturn, incl	uding accomp	anying schedu	iles and sta	tements, and	to the best of my	
Your	signat	ure			[Date		Spouse's/RDP	's signature	(if a joint tax ret	urn, both must sign)	
			Your email addre	ess. Enter only one er	mail address.						rred phone number	
	gn										884038	
He	ere	ļ	Paid preparer's signa				information of	which preparer	has any kn	owledge)		
	unlaw rge a	rful		RAM SAGAR	GUPTA TA	АЦЦАМ					•	
spou	ise's/		Firm's name (or your								PTIN P02082703	
	ature.		GLOBAL TAXES LLC								_	
Joint retur			Firm's address 2530 PEBBLE CREEK LN CUMMING GA 30041								 Firm's FEIN 301017196 	
(See		າຣ)	Do you want to all					ee instructions		Yes	× No	
			Print Third Party Des								le Number	

TAXABLE YEARCalifornia Adjustments —2020Nonresidents or Part-Year Residents

Important: Attach this schedule behind Form 540NR, Side 5 as a supporting California schedule

Name(s) as shown on tax return		is a supporting Oa		SSN or IT	111
SRIRAM KODALI Part I Residency Information. Complete all line	es that annly to you a	nd your snouse/BND	for taxahla yaar 2020	84858	0289
During 2020:	es illai apply to you a	iiu youi spouse/ndr	iui laxabie yeai 2020	•	
1 My California (CA) Residency (Check one)					
a Myself: • X Nonresident • Part-Year F	Posidant 🕥 – Rosida	nt h Spour	se: 🕥 Nonresiden	t 🕥 🛛 Part-Voar Roo	ridant 🕢 Recident
a Wysen.		int u Spous			
					Spouse/RDP
2 a I was domiciled in (enter two letter code, see i	nstructions)		$ \bigcirc $	<u>TX</u>	
b I was in the military and stationed in (enter two	o letter code)			•	— —
 b I was in the military and stationed in (enter two 3 I became a CA resident (enter state of prior resident 4 I became a CA nonresident (enter new state of resident) 	lence and date (mm/do	d/yyyy) of move)	•//	′ ●	//
		.,, , , , , , , , ,	<u> </u>		//
5 I was a CA nonresident the entire year (enter sta				<u>TX</u>	
6 The number of days I spent in CA for any purpos				•	
7 I owned a home/property in CA (enter Y for Yes,	N TOT NO)			<u>N</u> ()	
8 Before 2020: I was a CA resident for the period of	OT				/
			•//		/
Part II Income Adjustment Schedule	A	В	C	D	E
Section A — Income	Federal Amounts (taxable amounts from	Subtractions See instructions	Additions See instructions	Total Amounts Using CA Law	CA Amounts (income earned or
from federal Form 1040 or 1040-SR	your federal tax return)	(difference between	(difference between	As If You Were a	received as a CA
		CA & federal law)	CA & federal law)	CA Resident (subtract col. B from	resident and income earned or received
				col. A; add col. C	from CA sources
				to the result)	as a nonresident)
1 Wages, salaries, tips, etc. See instructions	76,440.	\odot		76,440.	28,560.
before making an entry in col. B or C 1	0,110.	•		•	• 20,500.
 2 Taxable interest. a <a>[e] 3 Ordinary dividends. See instructions. 					
a • 3b		\odot			
4 IRA distributions. See instructions.					
a () 4b		\odot			
5 Pensions and annuities. See					
instructions. a • 5b		\odot			\odot
6 Social security benefits.					<u> </u>
a • 6b					
7 Capital gain or (loss). See instructions 7	• -92.			 -92. 	• 0.
Section B — Additional Income	52.			92.	0.
from federal Schedule 1 (Form 1040)					
1 Taxable refunds, credits, or offsets of state and local income taxes	 0. 	 0. 			
2a Alimony received. See instructions 2a			ullet		
3 Business income or (loss). See instructions. 3	$\overline{\bullet}$	•	$\overline{\bullet}$	•	$\overline{\bullet}$
4 Other gains or (losses)		\bigcirc			•
5 Rental real estate, royalties, partnerships,					
	6.830			6.830	

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CA (540NR)



	A	В	C	D	E
Section B — Additional Income Continued	Federal Amounts (taxable amounts from your federal tax return)	Subtractions See instructions (difference between CA & federal law)	Additions See instructions (difference between CA & federal law)	Total Amounts Using CA Law As If You Were a CA Resident (subtract col. B from col. A; add col. C to the result)	CA Amounts (income earned or received as a CA resident and income earned or received from CA sources as a nonresident)
6 Farm income or (loss) 6	\odot	\odot		\bullet	\odot
7 Unemployment compensation 7	$\overline{\bullet}$	ullet			
8 Other income.					
a California lottery winnings	(a 💽	а		
b Disaster loss deduction from FTB 3805V		b 💽	b		
c Federal NOL (Schedule 1 (Form 1040), line 8)		C	C 🔘		
d NOL deduction from FTB 3805V 8		d 💽	d	8 🖲	8 🔘
e NOL from FTB 3805Z, FTB 3807, or FTB 3809	<u> </u>	e 🖲	e		
f Other (describe): •		f 🖲	f 🖲		
g Student loan discharged due to closure of a for-profit school		g 🖲	g		
9 Total. Combine Section A, line 1 through line 7, and Section B, line 1 through line 8, in each column. Go to Section C	69,518.	• 0.	•	69,518.	28,560.

	A	В	C	D	E
Section C — Adjustments to Income from federal Schedule 1 (Form 1040)	Federal Amounts (taxable amounts from your federal tax return)		Additions See instructions (difference between CA & federal law)	Total Amounts Using CA Law As If You Were a CA Resident (subtract col. B from col. A; add col. C to the result)	CA Amounts (income earned or received as a CA resident and income earned or received from CA sources as a nonresident)
10 Educator expenses10	\odot				
11 Certain business expenses of reservists, performing artists, and fee-basis					
government officials11			•	\odot	•
12 Health savings account deduction 12	•	ullet	-		
13 Moving expenses. Attach federal Form 3903. See instructions 13	۲		•	۲	۲
14 Deductible part of self-employment tax. See instructions. 14	۲	\odot			
15 Self-employed SEP, SIMPLE, and qualified plans15	•			۲	۲
16 Self-employed health insurance deduction. See instructions. 16	۲			۲	
17 Penalty on early withdrawal of savings1718a Alimony paid. b Enter recipient's:					•
SSN ()					ullet
19 IRA deduction 19	\bullet			ullet	ullet
20 Student loan interest deduction 20	lacksquare		۲	۲	
21 Tuition and fees	2,000.	2,000.			
A through E	2,300.	2,300.		• 0.	◉
column, A through E. See instructions 23	67,218.	• -2,300.	۲	 69,518. 	28,560.

	sk the box if you did NOT itemize for federal but will itemize for California		 (from federal Schedule (Form 1040)) 		See instructions		ee instructions
leo	lical and Dental Expenses See instructions.						
1	Medical and dental expenses	1					
2	Enter amount from federal Form 1040 or 1040-SR, line 11 (0 67 , 218	2					
3	Multiply line 2 by 7.5% (0.075)	3					
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter 0	4				$oldsymbol{O}$	
ax	es You Paid						
5a	State and local income tax or general sales taxes	a 🛛	1,927		1,927.		
5b							
5c	State and local personal property taxes	c (
5d	Add line 5a through line 5c	d	1,927				
5e	Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately) in column A	Γ					
	Enter the amount from line 5a, column B in line 5e, column B						
	Enter the difference from line 5d and line 5e, column A in line 5e, column C 5e	el	1,927	- <u> </u>	1,927.	lacksquare	
6	Other taxes. List type •			\bigcirc		lacksquare	
7	Add line 5e and line 6	7	1,927		1,927.	$oldsymbol{igstar}$	
nte	rest You Paid						
la	Home mortgage interest and points reported to you on federal Form 1098	a 🖸	$\overline{\bullet}$			$oldsymbol{O}$	
b	Home mortgage interest not reported to you on federal Form 1098	b				\odot	
C	Points not reported to you on federal Form 1098	c ($oldsymbol{O}$	
d	Mortgage insurance premiums	d	•	\bigcirc			
e	Add line 8a through line 8d	e		\mathbf{O}		$oldsymbol{O}$	
)	Investment interest.	9 (\odot		$oldsymbol{eta}$	
0	Add line 8e and line 9	0				lacksquare	
ìift	s to Charity						
1	Gifts by cash or check	1 (300			\bullet	
2	Other than by cash or check	2	•			lacksquare	
3	Carryover from prior year	3	•			\bullet	
4	Add line 11 through line 13 14	4	300			٢	
as	ualty and Theft Losses		-				
5	Casualty or theft loss(es) (other than net qualified disaster losses).						
	Attach federal Form 4684. See instructions 1	5	$\overline{\bullet}$				
)th	er Itemized Deductions	~ `	~	10			
6	Other—from list in federal instructions	6	$\overline{\bullet}$				
7	Add lines 4, 7, 10, 14, 15, and 16 in columns A, B, and C	_	-	_	1,927.		

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Job Expenses and Certain Miscellaneous Deductions

19	Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach federal Form 2106 if required. See instructions		
20	Tax preparation fees		
21	Other expenses- investment, safe deposit box, etc. List type 🖲 💿 21 0 .		
22	Add line 19 through line 21		
23	Enter amount from federal Form 1040 or 1040-SR, line 11 💿 67 , 218		
24	Multiply line 23 by 2% (0.02). If less than zero, enter 0		
25	Subtract line 24 from line 22. If line 24 is more than line 22, enter 0.	• • 25	0.
26	Total Itemized Deductions. Add line 18 and line 25.	• • 26	300.
27	Other adjustments. See instructions. Specify. •	• 27	
28	Combine line 26 and line 27	• • 28	300.
29	Is your federal AGI (Form 540NR, line 13) more than the amount shown below for your filing status? Single or married/RDP filing separately	_	
	Yes. Complete the Itemized Deductions Worksheet in the instructions for Schedule CA (540NR), line 29	2 9	300.
30	Enter the larger of the amount on line 29 or your standard deduction listed below Single or married/RDP filing separately. See instructions. Married/RDP filing jointly, head of household, or qualifying widow(er) \$9,202	● 30	4,601.

Part IV California Taxable Income 1 California AGI. Enter your California AGI from Part II, line 23, column E 2 Enter your deductions from line 30 3 Deduction Percentage. Divide Part II, line 23, column E by Part II, line 23, column D. Carry the decimal to four places. If the result is greater than 1.0000, enter 1.0000. If less than zero, enter -0 4 California Itemized/Standard Deductions. Multiply line 2 by the percentage on line 3 5 California Taxable Income. Subtract line 4 from line 1. Transfer this amount to Form 540NR, line 35. If less than zero, enter -0

E 104(artment of the Treasury—Internal Revenue Servi S. Individual Income Ta >		(99) urn	202	20	OMB No. 154	5-0074	IRS Use Only	r−Do not w	vrite or staple	in this space.
Filing Statu Check only one box.	lf yc	Single Married filing jointly ou checked the MFS box, enter the n son is a child but not your dependent	ame of	-	separately ouse. If you				ehold (HOH) box, enter th		, ,	. , . ,
Your first name	e and m	iddle initial	Last na	ime						Your so	cial securit	ty number
SRIRAM			KODA	ALI						848-	58-628	9
If joint return, s	spouse's	s first name and middle initial	Last na	ime						Spouse	's social sec	curity number
Home address 1550 KA		er and street). If you have a P.O. box, see AP RD ,	instructi	ons.					Apt. no. 1401	Check I	here if you,	
City, town, or p	post offi	ce. If you have a foreign address, also co	mplete s	paces be	low.	Sta	te	ZIP c	ode			ntly, want \$3 Checking a
KATY						T2	X	77	494	Ŭ	ow will not	0
Foreign countr	ry name		1	Foreign p	rovince/stat	e/state/county					k or refund.	
											You	Spouse
At any time du	uring 20	020, did you receive, sell, send, exch	nange, d	or otherv	vise acquir	e any	financial inter	est in	any virtual cu	irrency?	Yes	🗙 No
Standard Deduction	_	eone can claim: You as a de Spouse itemizes on a separate retur	•		•		a dependent					
Age/Blindnes	s You	: 🗌 Were born before January 2, 1	956	Are b	lind S	pouse	: 🗌 Was bo	orn bef	ore January	2, 1956	🗌 ls bl	ind
Dependent	s (see	instructions):		(2) 5	Social secur	ity	(3) Relations	hip	(4) 🗸 if q	ualifies fo	r (see instru	ictions):
If more		irst name Last name			number	-	to you		Child tax c			her dependents
than four											[
dependents, see instruction											[
and check	15										[
here 🕨 🗌] [
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2 .						. 1	-	76,440.
Attach	2a	Tax-exempt interest	2a			bТ	axable intere	st.		. 2b	,	
Sch. B if required.	3a	Qualified dividends	3a			bC	Ordinary divid	ends .		. 3b)	
required.	4a	IRA distributions	4a			bТ	axable amou	nt		. 4b	,	
	5a	Pensions and annuities	5a			bΤ	axable amou	nt		. 5b)	
Standard	6a	Social security benefits	6a			bТ	axable amou	nt		. 6b)	
Deduction for-	7	Capital gain or (loss). Attach Sche	dule D i	f require	d. If not re	quired	, check here		🕨 [7		-92.
 Single or Married filing 	8	Other income from Schedule 1, lin	e9.							. 8	-	-6,830.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	This is yo	our total in	come				▶ 9	(69,518.
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22					10)a	2,00	0.		
widow(er), \$24,800	b	Charitable contributions if you take	the star	ndard de	duction. Se	e inst	ructions 10)b	30	0.		
Head of	с	Add lines 10a and 10b. These are	your to f	tal adjus	stments to	inco	me			► 100	5	2,300.
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted	d gross in	come				▶ 11	f	67,218.
 If you checked 	12	Standard deduction or itemized	deduct	ions (fro	m Schedu	le A)				. 12	:	12,400.
any box under Standard	13	Qualified business income deduction	ion. Atta	ach Form	n 8995 or F	orm 8	995-A			. 13		
Deduction, see instructions.	14	Add lines 12 and 13	lines 12 and 13							. 14		12,400.
	15	Taxable income. Subtract line 14	from lin	ne 11. lf z	zero or les	s, ente	er-0	<u> </u>		. 15	,	54,818.
												1040 (

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

Form **1040** (2020)

Form 1040 (2020))										Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2	4972	3			16	7,852.
	17	Amount from Schedule 2, lir	ie3							17	0.
	18	Add lines 16 and 17								18	7,852.
	19	Child tax credit or credit for	other dependen	ts						19	
	20	Amount from Schedule 3, lir	ie7							20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0						22	7,852.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 1	10.				23	0.
	24	Add lines 22 and 23. This is	your total tax						. 🕨	24	7,852.
	25	Federal income tax withheld	from:								
	а	Form(s) W-2					25a	10	,510		
	b	Form(s) 1099					25b				
	с	Other forms (see instructions	s)				25c				
	d	Add lines 25a through 25c								25d	10,510.
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20	19 returi	n				26	
qualifying child,	27	Earned income credit (EIC)			¹	No .	27				
attach Sch. EIC.	28	Additional child tax credit. A	ttach Schedule	8812			28				
nontaxable	29	American opportunity credit	from Form 8863	8, line 8			29				
combat pay, see instructions.	30	Recovery rebate credit. See	instructions .				30	1	,800		
	31	Amount from Schedule 3, lir	ie 13				31				
	32	Add lines 27 through 31. The	ese are your tot a	al other paym	ents and	d refunda	ble cr	edits	. 🕨	32	1,800.
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					. 🕨	33	12,310.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is t	he amour	nt you	overpaid		34	4,458.
neiuliu	35a	Amount of line 34 you want	refunded to you	. If Form 8888	3 is attac	hed, cheo	ck here			35a	4,458.
Direct deposit?	►b	Routing number 1 1 1			► c Ty		Checl		Savings	;	
See instructions.	►d	Account number 4 8 8	0 7 5 5	3 4 1 2	1	· –			-		
	36	Amount of line 34 you want a	applied to your	2021 estimate	ed tax .	. 🕨	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount vou owe	now .				. 🕨	37	
You Owe		Note: Schedule H and Sch								-	
For details on		2020. See Schedule 3, line 1			•				0110 101		
how to pay, see instructions.	38	Estimated tax penalty (see ir				. 🕨	38				
Third Party	Do	you want to allow another					See				
Designee		structions						🗌 Yes. Co	omplete	below.	X No
		signee's		Phone						tification	
		me 🕨		no. 🕨					oer (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com									
Here			piete. Deciaration			, ,	1360 011	an informatio			nt you an Identity
	YO	ur signature		Date	Your oc	cupation					IN, enter it here
Joint return?					SOFT	WARE E	ENGII	NEER	(se	e inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse'	s occupati	ion				nt your spouse an
Keep a copy for your records.	·									ntity Prot e inst.) >	ection PIN, enter it here
your rocordo.									(se	e mst.) 🕨	
		one no.	Dura and 1	Email address							Ob a shaife
Paid		eparer's name	Preparer's signat		a		Date		PTIN	0000	Check if:
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA	'I'ALLAM	02/2	23/2021	P0208		Self-employed
Use Only		m's name ► GLOBAL TA									678)965-9522
	Firr	m's address ► 2530 Pebb	le Creek L	n Cummin	g GA :	30041			Firi	m's EIN 🕨	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		B	AA	REV	02/15/21 PRC)		Form 1040 (2020)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

OMB No. 1545-0074

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

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soc	ial security number
	Attachment Sequence No. 01

....

Part I Additional Income	•
SRIRAM KODALI	848-58-6289
Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security numbe

Pa	Additional income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	0.
2 a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions)		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-6,830.
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	-6,830.
Par	t II Adjustments to Income		0,000.
10		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		
с	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	2,000.
22	Add lines 10 through 21. These are your adjustments to income. Enter here and		
Ear D-	on Form 1040, 1040-SR, or 1040-NR, line 10a	22	2,000.
LOL LA	perwork Reduction Act Notice, see your tax return instructions. BAA REV 02/15/21 PRO	schedule	e 1 (Form 1040) 2020

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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.

2020 Attachment Sequence No. 12

Name(s) shown on return SRIRAM KODALI

Department of the Treasury

Internal Revenue Service (99)

Your social security number

848-58-6289

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X 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)

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.	(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	2,322.	2,560.	1	56.	-82.
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					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	5				
6	6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions					()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	· / ·		7	-82.

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		(d) Proceeds (sales price)	Proceeds Cost to gain or		from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
who	e dollars.		, ,	line 2, colum	n (g)	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	7.	17.			-10.
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	ain or (loss)	11				
12	Net long-term gain or (loss) from partnerships, S corporat	dule(s) K-1	12			
13	Capital gain distributions. See the instructions	13				
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•	.,		15	-10.

Pari	III Summary	
16	Combine lines 7 and 15 and enter the result	16 -92.
	 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?	
	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.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 (92.)
	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?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.	
	X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	
	REV 02/15/21 PRO	Schedule D (Form 1040) 2020

Form	8949
Form	8949

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

Attachment

20

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.

 Sequence No. 12A

 Social security number or taxpayer identification number

Name(s) shown on retain	Social Security numb
SRIRAM KODALI	848-58-6289

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 Form 1099-B

1 (a) Description of property	(b) Date acquired (Mo., day, yr.) (Mo., day, yr.)	Date sold or	Proceeds	(e) Cost or other basis. See the Note below	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)
(Example: 100 sh. XYZ Co.)				and see <i>Column (e)</i> 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	12/18/20	12/23/20	2,285.	2,525.	W	156.	-84.
ROBINHOOD CRYPTO LLC	01/28/20	06/29/20	37.	35.			2.
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) ▶		2,322.	2,560.		156.	-82.	

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.

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

Form 8949 (2020)	Attachment Sequence No. 12A	Page 2
Name(s) shown on return. Name and SSN or taxoaver identification no. not required if shown on other side	Social security number or taxpayer identification num	ber

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SRIRAM KODALI

848-58-6289

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	(b) Date acquired	(c) Date sold or	(d) Proceeds	(d) Cost or other basis. Proceeds See the Note below If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(d) Cost or other basis. ceeds See the Note below See the separate instructions. Subtract col	If you enter an amount in column (g), enter a code in column (f).		Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see <i>Column (e)</i> in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)		
ROBINHOOD CRYPTO LLC	08/17/18	06/29/20	7.	17.			-10.		
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your 1e 9 (if Box E	7.	17.			-10.		

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.

Department of the Treasury Attach to Form 1040, 1040-SR,							chment			
	shown on return							r social securi		
SRIR	AM KODALI							84	8-58-628	39
Part		s From Rental Real Estate and Ro	yaltie	s Note	: If you	are in th	ne business c	of rentir	ng personal p	oroperty, use
		instructions. If you are an individual, rep	ort farı	m rental i	ncome	or loss f	rom Form 48	335 on	page 2, line 4	40.
A Dic	you make any payme	nts in 2020 that would require you to	o file F	orm(s) 1	099? 5	See inst	ructions .		🗆	Yes 🔀 No
									_	
1a	Physical address of	each property (street, city, state, ZIF	code	e)						
Α	GANDHI NAGAR HYDERABAD TELANAGANA IN 500046									
В										
С										
1b	Type of Property	2 For each rental real estate prop	perty listed			Fair Rental Days 185		Personal Use Days		QJV
	(from list below)	above, report the number of fa personal use days. Check the	ir rental and							
Α	3	if you meet the requirements to	CUDV box only o file as a A tructions. B							
В	1	if you meet the requirements to qualified joint venture. See inst								
С					С					
	of Property:			I						
1 Sing	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd		7 Self-	Rental			
2 Mul	ti-Family Residence	4 Commercial	6 Ro	yalties		8 Othe	er (describe))		
Incom		Properties:		Í	Α		E			С
3	Rents received		3			420.				
4			4							
Expen										
5	Advertising		5							
6		nstructions)	6							
7		nance	7			750.				
8			8							
9			9							
10		essional fees	10							
11	Management fees .		11			950.				
12	Mortgage interest pai	d to banks, etc. (see instructions)	12							
13	Other interest		13							
14	Repairs		14		2,	000.				
15			15		1,	650.				
16	Taxes		16							
17			17		1,	900.				
18	Depreciation expense	e or depletion	18							
19	Other (list)		19							
20		lines 5 through 19	20		7,	250.				
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		-б,	830.				
22	Deductible rental real	l estate loss after limitation, if any,								
		structions)	22	(-6,8	330.)	()()
23a		eported on line 3 for all rental prope				23a		42	20.	
b		eported on line 4 for all royalty prop	erties			23b				
С		eported on line 12 for all properties				23c				
d		eported on line 18 for all properties								
е		eported on line 20 for all properties								
24		Income. Add positive amounts shown on line 21. Do not include any losses								
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . 25 (6,830.)									
26		ate and royalty income or (loss).								
	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 -6,830.									
	Schedule I (FORM 104	+0), The S. Otherwise, include this al	nouni	. пт ше т	utai on	me 4 l	on page 2		26	-0,030.

Supplemental Income and Loss

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

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

For Paperwork Reduction Act Notice, see the separate instructions.

SCHEDULE E

(Form 1040)

Schedule E (Form 1040) 2020

OMB No. 1545-0074

SRIRAM KODALI

Tuition and Fees Deduction

OMB No. 1545-0074

Attach to Form 1040 or 1040-SR.

Attachment Sequence No. 60

▶ Go to www.irs.gov/Form8917 for the latest information.



Use this form for qualified tuition and fees paid in 2018, 2019, or 2020, and later years if legislation extends the deduction (see instructions). File a separate Form 8917 for each year after 2017 for which you qualify to take the deduction.

You **can't** take both an education credit from Form 8863 and the tuition and fees deduction from this form for the **same student** for the same tax year.

Before you begin:

AUTIO

✔ To see if you qualify for this deduction, see *Who Can Take the Deduction* in the instructions below.

- If you file Form 1040 or 1040-SR, figure any write-in adjustments.
- For 2018: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040), line 36.
- For 2019: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22.
- For 2020 and later years: Figure any write-in adjustments for Schedule 1 (Form 1040 or 1040-SR); see the Instructions for Forms 1040 and 1040-SR.

1	(a) Student's name (as shown on page 1 of your tax return) First name Last name	(b) Student's social security number (as shown on page 1 of your tax return) (c) Adjusted qualified expenses (see instructions)
	SRIRAM KODALI	848-58-6289 7,200.
2	Add the amounts on line 1, column (c), and enter the total	2 7,200.
3	Enter the amount from your "total income" line of Form 1040 or 1040-SR	3 69,518.
4	• For 2018: Enter the total of the amounts on your 2018 Schedule 1 (Form 1040), lines 23 through 33, plus any write-in adjustments you entered on the dotted line next to Schedule 1 (Form 1040), line 36.	
	• For 2019 and 2020: Enter the total of the amounts on your 2019 Schedule 1 (Form 1040 or 1040-SR), lines 10 through 20, plus any write-in adjustments you entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22.	
	• For later years: See <i>www.irs.gov/Form8917</i> to find out if the line references above for 2019 have changed	4
5	Subtract line 4 from line 3.* If the result is more than \$80,000 (\$160,0 stop; you can't take the deduction for tuition and fees	
	* If you're filing Form 2555, 2555-EZ, or 4563, or you're excluding inco Effect of the Amount of Your Income on the Amount of Your Deduction amount to enter on line 5.	
6	Tuition and fees deduction. Is the amount on line 5 more than \$65 filing jointly)?	5,000 (\$130,000 if married
	X Yes. Enter the smaller of line 2, or \$2,000.	
	No. Enter the smaller of line 2, or \$4,000.	. 6 2,000.

Also enter this amount on line 21 of the 2019 and 2020 Schedule 1 (Form 1040 or 1040-SR), or line 34 of the 2018 Schedule 1 (Form 1040). See *www.irs.gov/Form*8917 to find out if the line references above for 2019 have changed.