## Department of the Treasury 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)

Taxpay	ver's name	Social security number					
NEERAJA KARETI 680-89							2
Spouse	's name		Spouse's social security number				
Par	t I Tax Return Information – Tax Year Ending December 31, (En	ter	yea	ar yo	ou a	re aut	horizing.)
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	62,777.
2	Total tax					2	6,873.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099					3	10,652.
4	Amount you want refunded to you					4	3,779.
5	Amount you owe					5	
Par	Taxpayer Declaration and Signature Authorization (Be sure you get an	d ko	eep	a	cop	y of y	our 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		to enter or generate my PIN	E
				ERO firm name		

9	8	9	9	2	
Ent don	er fiv i't er	/e di nter a	gits, all ze	but ros	as my

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 sign	ature 🕨 🛛 Da	ate 🕨					 		
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III C	ertification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/P	PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8	7		6 all ze	 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 >			
ERO Must Retain Don't Submit This Form to			
For Paperwork Reduction Act Notice, see your tax return instruct	tions. BAA	REV 03/01/21 PRO	Form <b>8879</b> (Rev. 01-2021)

<b>1040</b>	-NR Department of the Treasury- U.S. Nonresident	Internal Revenue Service Alien Income Tax	(99) <b>Return</b>	2020	OMB No. 154	45-0074 IF	RS Use Only—Do not write or staple in this space.
Filing Status Check only one box.	Single Married filing separation of the the QW box, enter the qualifying person is a child but not years.		ried)	Qualifying wido	w(er) (QW)		
Your first name a	and middle initial	Last name	Last name				
NEERAJA		KARETI	KARETI				
· · · · · · · · · · · · · · · · · · ·	number and street or rural route). If you	u have a P.O. box, see inst	ave a P.O. box, see instructions. Apt. r			Check if	
15110 OLD	CORN LANE						Estate or Trust
<i>, , , ,</i>	st office. If you have a foreign address, al	so complete spaces below.	State	ZIP code	Ð		
CHARLOTTE	NC 28262						
Foreign country	name	Foreign province/state/co	ounty	Foreign	postal code		
At any time durir	ng 2020, did you receive, sell, send, ex	change, or otherwise acqu	ire any fina	ncial interest in a	any virtual cu	rrency?	Yes No

Dependents							(4) 🗸 i	f quali <sup>.</sup>	fies for (see instr.):
(see instructions):		(1) First name	Last name	(2) Dependent's identifying number		Dependent's onship to you	Child tax	c credi	t Credit for other dependents
16 11 6								]	
If more than four dependents, see								]	
instructions and								]	
check here ►								]	
Income	1a	Wages, salaries, tips,	etc. Attach Form(s) W	-2				1a	65,362.
Effectively	b	Scholarship and fello	wship grants. Attach F	orm(s) 1042-S or required	d stateme	ent. See instruc	tions .	1b	
Connected	с	Total income exempt	by a treaty from Sche	edule OI (Form 1040-NR	), Item				
With U.S.		L, line 1(e)			[	1c			
Trade or	2a	Tax-exempt interest	2a	<b>b</b> Ta>	able inte	rest		2b	
Business	3a	Qualified dividends	За	<b>3a b</b> Ordinary dividends			3b		
	4a	IRA distributions .	4a	<b>b</b> Ta>	able amo	ount		4b	
	5a	Pensions and annuitie	es <b>5a</b>	<b>b</b> Tax	able amo	ount		5b	
	6	Reserved for future us	se					6	
	7	Capital gain or (loss).	Attach Schedule D (Fo	orm 1040) if required. If n	ot require	ed, check here	. 🕨 🗌	7	-85.
	8	Other income from So	chedule 1 (Form 1040),	Form 1040), line 9					
	9	Add lines 1a, 1b, 2b,	lines 1a, 1b, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income 🕨 🗌						65,277.
	10	Adjustments to incom	ne:						
	а	From Schedule 1 (For	m 1040), line 22..		[	10a	2,500.		
	b	Charitable contributio	ns for certain residents	s of India. See instructior	ns.	10b			
	с	Scholarship and fellow	wship grants excluded		[	10c			
	d	Add lines 10a through	n 10c. These are your <b>t</b>	otal adjustments to inc	ome .		🕨	10d	2,500.
	11	Subtract line 10d from	n line 9. This is your <b>ac</b>	ljusted gross income			🕨	11	62,777.
	12		· · · · · · · · · · · · · · · · · · ·	orm 1040-NR)) or, for cer		,			
		deduction. See instru	ctions		d Dedn	US/India	Treaty	12	12,400.
	13a	Qualified business inc	come deduction. Attac	h Form 8995 or Form 899	95-A	13a			
	b	Exemptions for estate	es and trusts only. See	instructions	[	13b			
	с	Add lines 13a and 13	b					13c	
	14	Add lines 12 and 13c							12,400.
	15	Taxable income. Sub	axable income.         Subtract line 14 from line 11. If zero or less, enter -0						
For Disclosure,	Priva	cy Act, and Paperwork	<b>Reduction Act Notice</b> ,	see separate instruction	ıs.	BAA REV	03/01/21 PRO	F	orm <b>1040-NR</b> (2020)

Form 1040-NR (	2020)							Page <b>2</b>
	16	Tax (see instructions). Check if any from Forr	n(s): <b>1</b> 🗌 8814	<b>2</b> 4972	2 3 🗌		16	6,873.
	17	Amount from Schedule 2 (Form 1040), line	3				17	0.
	18	Add lines 16 and 17					18	6,873.
	19	Child tax credit or credit for other dependent	nts				19	
	20	Amount from Schedule 3 (Form 1040), line	7				20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero or less	enter -0				22	6,873.
	23a	Tax on income not effectively connected from Schedule NEC (Form 1040-NR), line 1			23a			
	b	Other taxes, including self-employment tax line 10			23b			
	с	Transportation tax (see instructions)			23c			
	d	Add lines 23a through 23c					23d	
	24	Add lines 22 and 23d. This is your total tax				. 🕨	24	6,873.
	25	Federal income tax withheld from:						
	а	Form(s) W-2			<b>25a</b> 10	,652.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	10,652.
	е	Form(s) 8805					25e	
	f	Form(s) 8288-A					25f	
	g	Form(s) 1042-S				+	25g	
	26	2020 estimated tax payments and amount		1			26	
	27	Reserved for future use			27			
	28	Additional child tax credit. Attach Schedule	8812 (Form 1040)	)	28			
	29	Credit for amount paid with Form 1040-C			29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3 (Form 1040), line			31			
	32	Add lines 28 through 31. These are your to	al other payment	ts and refundat	ole credits	. 🕨	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. Th					33	10,652.
Refund	34	If line 33 is more than line 24, subtract line			•	1	34	3,779.
	35a	Amount of line 34 you want refunded to yo				1	35a	3,779.
Direct deposit?	►b	Routing number         0         8         1         0         0         0			Checking	Savings		
See instructions.	►d	Account number 1 5 2 3 2 0	1 4 1 2 0	2				
	►e	If you want your refund check mailed to an enter it here.						
	36	Amount of line 34 you want applied to you	2021 estimated	tax . 🕨	36			
Amount	37	Amount you owe. Subtract line 33 from lin	e 24. For details o	n how to pay, se	e instructions .	. 🕨	37	
You Owe	38	Estimated tax penalty (see instructions) .		🕨	38			
Third Party Designee	-	w want to allow another person (other that with the IRS? See instructions	your paid prepa	rer) to discuss		Complete b	elow.	X No
(Other than paid preparer)	Desig name		Phone no. ►			nal identific er (PIN)	ation	
Sign Here		penalties of perjury, I declare that I have examined they are true, correct, and complete. Declaration o				n of which p	oreparer h	has any knowledge.
nere	Your	signature		our occupation	3 3 T 3 T 3 Z C C 1	Prote	ction PI	t you an Identity N, enter it here
	<b>/</b>			ECHNOLOGY	ANALYST	(see ir	isi.) ►	
	Phone		Email address		Data	PTIN		
Paid	•	rer's name Preparer's s	0		Date			Check if:
Preparer		RIYA RAM SAGAR GUPTA TALLAM SYAM PRIY	A RAM SAGAR G	JPTA TALLAM	03/15/2021	P02082		Self-employed
Use Only		name► GLOBAL TAXES LLC		~~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~				8)965-9522
		address ► 2530 Pebble Creek	<u>Ln Cumming</u>	GA 30041		Firm's Ell	<u>11 P 30</u>	-1017196

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

Form **1040-NR** (2020)

## SCHEDULE NEC (Form 1040-NR)

# Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

20

20

Department of the Treasury Internal Revenue Service (99) ► Go to www.irs.gov/Form1040NR for instructions and the latest information. ► Attach to Form 1040-NR.

Attachment Sequence No. 7B Your identifying number

680-89-8992

Name shown on Form 1040-NR NEERAJA KARETI

Enter a	amount of income unde	er the a	appropriate rate of tax. See instructions.							
			Nature of Income			<b>(a)</b> 10%	<b>(b)</b> 15%	(c) 30%	(d) Othe	er (specify)
						(4) 1070	(6) 1070	(6) 00 /0	%	%
1	Dividends and divide	nd eq	uivalents:							
а	Dividends paid by U.	S. cor	porations		<b>1</b> a					
b	Dividends paid by fo	reign c	corporations		1b					
с	Dividend equivalent p	aymen	ts received with respect to section 871(m) tra	ansactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corpo	oration	IS		2b					
с	Other				2c					
3	Industrial royalties (p	atents	, trademarks, etc.)		3					
4	Motion picture or TV	copyr	ight royalties		4					
5	Other royalties (copy	rights,	recording, publishing, etc.)		5					
6	Real property income	e and i	natural resources royalties		6					
7	Pensions and annuiti	es.			7					
8	Social security benef	its .			8					
9	Capital gain from line	e 18 be	elow		9					
10	Gambling-Resident	s of Ca r <b>-0</b>	anada only. Enter net income in column (c).							
а	Winnings									
b	Losses				10c					
11			lents of countries other than Canada.		11					
12	Other (specify) ►									
					12					
13	•		columns (a) through (d)		13					
14			tax at top of each column		14		Futou the state library			
15	Tax on income not ef	rective	ely connected with a U.S. trade or business. Capital Gains and						IR, line 23a ► 15	
Fortes a	whether any ital pairs and	10	-	L05565 I		Sales of Excita				
losses f exchan within t	nly the capital gains and from property sales or ges that are from sources he United States and not	16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acq mm/dd/yy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d) subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
busines	ely connected with a U.S. s. Do not include a gain									
	on disposing of a U.S. real y interest; report these									
	nd losses on Schedule D									
-	property sales or									
exchan	ges that are effectively ted with a U.S. business							<u> </u>		
on Sche	edule D (Form 1040),								N .	<u>)</u>
	797, or both.		Capital gain. Combine columns (f) and (g	g) of line 17	. Ente	-		ove. It a loss, ente		
For Pa	perwork Reduction A	ct Noti	ce, see the Instructions for Form 1040-NR.			REV (	03/01/21 PRO		Schedule NE	C (Form 1040-NR) 2020

SCHE	DULE	OI
(Form	1040-1	NR)

# **Other Information**

OMB No. 1545-0074 

	1040-111)	► Go	•	40NR for instructions and	d the latest information	ı.	202	20
	ent of the Treasury Revenue Service (99)			ttach to Form 1040-NR. Answer all questions.			Attachment Sequence N	 ₀ 7C
	hown on Form 1040					Your identifyir		0.10
NEEF	RAJA KARETI	:				680-89-	•	
Α	Of what countr	y or countries v	vere you a citizen or nat	ional during the tax year?	? INDIA			
в	In what country	y did you claim	residence for tax purpo	oses during the tax year?	· United States			
С	Have you ever	applied to be a	green card holder (lawf	ul permanent resident) of	the United States? .		<b>Yes</b>	🛛 No
D	Were you ever:							
1.	A U.S. citizen?						Yes	🛛 No
2.	A green card h	older (lawful pe	rmanent resident) of the	United States?			Yes	🗙 No
	-			r 4, for expatriation rules				
E	immigration sta	tus on the last o	day of the tax year		·			
F				status) or U.S. immigration f the change ►	on status?		Yes	X No
G	List all dates yo	ou entered and	left the United States du	uring 2020. See instructio	ons.			
				commute to work in the m H		ent intervals,		
		United States dd/yy	Date departed United S mm/dd/yy	States Da	ate entered United States mm/dd/yy	s Date de	oarted Unite mm/dd/yy	d States
н	2018		, 2019	and partial days) you were , and 20	20 365	··		_
I	Did you file a U If "Yes," give th	I.S. income tax ne latest year ar	return for any prior year nd form number you file	?				🛛 No
J	Are you filing a	return for a tru	st?				<b>Yes</b>	🗙 No
				nder the grantor trust rul				🗌 No
κ	-			ore during the tax year? . ne the source of this com				🛛 No
L	Income Exemp	t From Tax-I	f you are claiming exer	nption from income tax e information on tax treat	under a U.S. income t			
1.	Enter the name	of the country,	the applicable tax treaty	r article, the number of mo Form 8833 if required. Se	onths in prior years you	claimed the t	reaty benefi	t, and the
		<b>(a)</b> Cou	intry	(b) Tax treaty article	(c) Number of month		mount of ex	
					claimed in prior tax ye	ars income	e in current t	ax year
	(e) Total. Ente	r this amount o	n Form 1040-NR. line 10	c. Do not enter it on line <sup>-</sup>	1a or line 1b	▶		
2.				the income shown in 1(d			<b>Yes</b>	No
				tent Authority determinat			Yes	X No
	If "Yes," attach	a copy of the (	Competent Authority de	termination letter to your	return.			
Μ	Check the app	licable box if:						
1.	This is the first	year you are m	aking an election to trea	at income from real prope	erty located in the Unite	d States as e	effectively c	onnected

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions . . . . . . . . . . . . . . . . . .

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 03/01/21 PRO Schedule OI (Form 1040-NR) 2020

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

►

# Additional Income and Adjustments to Income

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

Go to	www.irs.gov	/ <i>Form1040</i> f	or instructions	and the late	est information.
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OMB No. 1545-0074
2020
Attachment Sequence No. <b>01</b>

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
NEERAJA KARETI	680-89-8992
Part I Additional Income	

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions)		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	
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	
Par	line 8	5	
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	2,500.
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your <b>adjustments to income.</b> Enter here and		
For Pa	on Form 1040, 1040-SR, or 1040-NR, line 10a	Schedule 1	2,500. (Form 1040) 2020

SCHEDULE	D
(Eorm 1040)	

## (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 NEERAJA KARETI

Department of the Treasury

Internal Revenue Service (99)

Your social security number

680-89-8992

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? × No **Yes** 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	nstructions 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)	<b>(e)</b> Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F line 2, column	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1</b> a	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	8.	93.			-85.
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 (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 <b>Worksheet</b> 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	through 6 in colu	mn (h). If you have	e any long-	7	-85.

#### 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.		<b>(d)</b> Proceeds	(e) Cost	<b>(g)</b> Adjustmen to gain or loss		(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, I line 2, colum	Part II,	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 13					12 13	
	<ul> <li>14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions</li> </ul>				14	( )
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•			15	

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

Part	III Summary			
16	Combine lines 7 and 15 and enter the result	16		-85.
	• If line 16 is a <b>gain</b> , 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is <b>zero</b> , 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 <b>both</b> gains? <b>Yes.</b> Go to line 18.			
	$\Box$ No. Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	<ul> <li>Are lines 18 and 19 both zero or blank and are you not filing Form 4952?</li> <li>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.</li> </ul>			
	□ 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	(	85.)
	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.			
	☑ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

REV 03/01/21 PRO

Schedule D (Form 1040) 2020

# **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.

Social security number or taxpayer identification number

varie(s) shown off return	Social security numb
NEERAJA KARETI	680-89-8992

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	(a) Description of property (Example: 100 sh. XYZ Co.) (b) Date acquired (Mo., day, yr.) (c) Date sold or disposed of (Mo., day, yr.)		Date sold or	<b>(d)</b> Proceeds	(d) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	(e)         If you enter an amount in column (g), enter a code in column (f).           (d)         Cost or other basis.         enter a code in column (f).         (g)           Proceeds         See the Note below         See the separate instructions.         Sul	enter a code in column (f).		(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)		(sales price) (see instructions)	and see <i>Column (e)</i> in the separate instructions	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)			
ROBINHOOD SECURITIES LLC	06/08/20	07/28/20	8.	93.			-85.		
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), <b>lir</b>	lude on your 1e 2 (if Box B	8.	93.			-85.		

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