Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

ERO must obtain and retain completed Form 8879.

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

Submission Identification Number (SID)

Taxpay	ver's name	Social security number				
SUD	HEER REDDY GUNDALA	820-40-3	3584			
Spouse	's name	Spouse's social security number				
Par	t I Tax Return Information – Tax Year Ending December 31, (Enter	er year you are	e 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 79,735.			
2	Total tax	[2 10,602.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	[3 14,234.			
4	Amount you want refunded to you	[4 3,632.			
5	Amount you owe		5			
Dan	Townships Deployed in and Connetions Andhewingtion (Deployment and	I	- f			

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

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	
				ERO firm name		

0	3	5	8	4	
Ent don	er fiv n't er	ve di Iter 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 signature E	ate					 		
Practitioner PIN Method Returns Only—continue	e bel	ow						
Part III Certification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8			6 all zei	 9	89)

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 Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/01/21 PRO	Form 8879 (Rev. 01-2021)			

E 104(artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		⁽⁹⁹⁾ 20	20	OMB No. 1545	5-0074	IRS Use C	Dnly–	–Do not w	rite or staple i	in this space.
Filing Statu Check only one box.	lf yc	Single Married filing jointly Course of the MFS box, enter the n son is a child but not your dependent	ame of y	ed filing separate your spouse. If yo					· -		, ,	
Your first name	e and m	iddle initial	Last na	me						Your so	cial securit	y number
SUDHEER	RED	DY	GUNE	ALA						820-4	40-358	4
If joint return, s	spouse's	s first name and middle initial	Last na	me						Spouse'	s social sec	curity number
713 SE	12TH							Apt. no.		Check h	ere if you,	on Campaign or your tly, want \$3
City, town, or p	post offi	ce. If you have a foreign address, also co	mplete s	paces below.		ate	ZIP co					Checking a
GRIMES					I	A	501	.11			ow will not	change
Foreign countr	ry name		F	Foreign province/st	ate/cour	nty	Foreig	n postal coo	de	your tax	or refund.	_
											You	Spouse
At any time du	uring 20	020, did you receive, sell, send, exch			uire any	financial intere	est in a	iny virtual	cur	rency?	Ves	X No
Standard Deduction	_	eone can claim: U You as a de Spouse itemizes on a separate retur	•	— ·		s a dependent n						
Age/Blindnes	s You	: 🗌 Were born before January 2, 1	956	Are blind	Spous	e: 🗌 Was bo	rn befo	ore Januar	ry 2,	, 1956	Is bl	ind
Dependent	s (see	instructions):		(2) Social sec	urity	(3) Relationsh	nip	(4) 🖌 i	if qu	alifies for	r (see instru	ctions):
If more		irst name Last name		number		to you		Child ta:	x cre	ədit	Credit for oth	her dependents
than four											[
dependents,											[
see instruction and check	IS —										[
here 🕨 🗌											[
	1	Wages, salaries, tips, etc. Attach F	orm(s) \	N-2						1	5	39,013.
Attach	2a		2a 🎽		<u>ь</u>	Taxable interes	t.			2b		
Sch. B if	3a	· · -	3a			Ordinary divide				3b		2.
required.	4a	IRA distributions	4a			Taxable amoun				4b		
	5a	Pensions and annuities	5a		b ⁻	Taxable amoun	ıt			5b		
Standard	6a		6a		b -	Taxable amoun	ıt			6b		
Deduction for -	7	Capital gain or (loss). Attach Sched	dule D if	required. If not r	reauirea	d. check here		•	• [7	-	-3,000.
 Single or Married filing 	8	Other income from Schedule 1, lin			•	,				8		-6,280.
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,								• 9		79,735.
\$12,400Married filing	10	Adjustments to income:		,,								- ,
jointly or	a	,				10	a					
Qualifying widow(er),	b	Charitable contributions if you take								_		
\$24,800 • Head of	c	Add lines 10a and 10b. These are your total adjustments to income							► 10c			
household,	11	Subtract line 10c from line 9. This	-	-						► <u>11</u>	-	79,735.
\$18,650 If you checked	12	Standard deduction or itemized				· · · · · ·						12,400.
any box under	13			,	,						-	100.
Standard Deduction,	14	Qualified business income deduction. Attach Form 8995 or Form 8995-A . . . Add lines 12 and 13 									-	12,400.
see instructions.	15	Taxable income. Subtract line 14										57,335.
	15	razable moorne. Subtract ille 14							•	15		1040 (1040)

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

Form **1040** (2020)

Form 1040 (2020))										Page
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 🗌	4972	3			16	10,602.
	17	Amount from Schedule 2, lir	ne3							17	
	18	Add lines 16 and 17								18	10,602.
	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	10,602.
	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	10,602.
	25	Federal income tax withheld	from:								
	а	Form(s) W-2					25a	14	,234		
	b	Form(s) 1099					25b				
	с	Other forms (see instruction	s)				25c				
	d	Add lines 25a through 25c								25d	14,234.
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20)19 return					26	
qualifying child,	27	Earned income credit (EIC)			N	<u>.</u>	27				
attach Sch. EIC.	28	Additional child tax credit. A					28				
nontaxable	29	American opportunity credit	from Form 8863	3, line 8			29				
combat pay, see instructions.	30	Recovery rebate credit. See	instructions .				30				
	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	refunda	ble cr	edits	. 🕨	32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					. 🕨	33	14,234.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is th	e amour	nt you	overpaid		34	3,632.
neiuliu	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attach	ed, cheo	ck here	э] 35a	3,632.
Direct deposit?	►b	Routing number 0 5 3			► c Typ		Chec		Saving	s	
See instructions.	►d	Account number 2 3 7	0 3 8 7	1 5 2 4	4 0				-		
	36	Amount of line 34 you want	applied to your	2021 estimate	ed tax .	. 🕨	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount vou owe	now .				. 🕨	37	
You Owe		Note: Schedule H and Sch		-						r	
For details on		2020. See Schedule 3, line 1						taxoo you	0110 10		
how to pay, see instructions.	38	Estimated tax penalty (see in				. 🕨	38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with th	ne IRS?	See	•			1
Designee		structions						Yes. C	omplete	e below.	🗙 No
		signee's		Phone						ntification	
		me 🕨		no. 🕨					ber (PIN	,	
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com									
Here						•	1300 011	an informatio			nt you an Identity
	, TO	ur signature		Date	Your occu	upation					IN, enter it here
Joint return?					SOFTW	ARE E	ENGI	NEER	(se	ee inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's	occupati	on				nt your spouse an
Keep a copy for your records.	,										ection PIN, enter it he
your rocordo.									(56	ee inst.) 🕨	
		one no.	Duran and 1	Email address					יאידס		Ob a she ife
Paid		eparer's name	Preparer's signat		a		Date		PTIN	00505	Check if:
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA T	'ALLAM	03/	10/2021		82703	Self-employed
Use Only		m's name GLOBAL TA									678)965-9522
	Firi	m's address ► 2530 Pebb	le Creek L	n Cummin	g GA 3	0041			Fi	rm's EIN 🕨	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BA	Α	REV	/ 03/01/21 PRO)		Form 1040 (202

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074
2020
Attachment Sequence No. 01

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security						
SUDHEER REDDY GUNDALA	820-40-3584					
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	-6,280.
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	-6,280.
Par	line 8	5	-0,200.
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	
22	Add lines 10 through 21. These are your adjustments to income. Enter here and		
For Pa	on Form 1040, 1040-SR, or 1040-NR, line 10a	22	e 1 (Form 1040) 2020
		Joneuul	5 . (i 5iiii 10 4 0/ 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

Internal Revenue Service (99) Name(s) shown on return

Department of the Treasury

SUDHEER REDDY GUNDALA

Your social security number

820-40-3584

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 le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F line 2, columr	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	159,302.	189,946.	13,4	25.	-17,219.
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 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	-17,219.

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

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to (sales price) (or other basis) Form				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 Box D checked					
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 corporations, estates, and trusts from Schedule(s) K-1						
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	

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	-17,219.
	• 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?		
	 Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. 		
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18	
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19	
20	 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. 		
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
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	(3,000.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?		
	☐ 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 03/01/21 PRO

Schedule D (Form 1040) 2020

Form 8949	
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Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

20

(0)

Attachment

7

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.

Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number
SUDHEER REDDY GUNDALA	820-40-3584

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

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I 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	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.		g), (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	05/08/20	12/12/20	135,367.	166,940.	W	13,425.	-18,148.	
Robinhood Crypto LLC	09/23/20	12/23/20	23,935.	23,006.			929.	
•								
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	159,302.	189,946.		13,425.	-17,219.	

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

SCHEDULE E	
(Form 1040)	

Department of the Treasury

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, R	EMICs, etc.)
---	--------------

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

s, REMICs, etc.)	20
nation.	Attachme

	ent of the Treasury Revenue Service (99)	► Go to www.irs.gov/Sched	uleE for ins	tructions a	nd the	latest i	nformation		Attac Sequ	chment ience No. 13	
	shown on return							Your soci		ity number	-
SUDH	EER REDDY GUNDA	ALA						820-4	0-358	34	
Part	Income or Loss	s From Rental Real Estate an	nd Royaltie	S Note:	lf you a	re in th	e business o	of renting per	rsonal p	property, use	-
		instructions. If you are an individu	al, report fai	m rental ind	come o	r loss fr	om Form 4	B35 on page	2, line 4	40.	
A Dic	d you make any payme	nts in 2020 that would require	you to file l	Form(s) 10	99? Se	e instr	uctions .		. 🗆	Yes 🛛 No	_
		ou file required Form(s) 1099?		• • •						Yes 🗌 No	
1a		each property (street, city, stat									
Α		AM NAGAR 3RD PRAKASA			DESH	IN 5	23001				_
В											
С											
1b	Type of Property	2 For each rental real estat	e property	listed		Fair	Rental	Persona	Use	QJV	
	(from list below)	above, report the numbe personal use days. Chec	r of fair ren	tal and		D	ays	Days	6	GOV	
Α	3	if you meet the requireme	ents to file a	as a	Α		365		0		
В		qualified joint venture. Se	e instructio	ons.	В						
С					С						
Туре о	of Property:										
1 Sing	gle Family Residence	3 Vacation/Short-Term Re	ental 5 La	and	7	Self-	Rental				
	ti-Family Residence	4 Commercial		oyalties	8	Othe	r (describe)			
Incom	-	Proper			Α		E	3		С	
3					5	50.					
4			. 4								
Expen											
5											
6		nstructions)									
7		nance			1,2	00.					
8											
9											
10		essional fees									
11	-				1,5	640.					
12		id to banks, etc. (see instructio									
13											
14						.20.					
15					Ι,Ζ	70.					
16					1 -						
17					Ι,Ί	00.					
18		e or depletion									
19	Other (list)		19		<u> </u>	20					
20		lines 5 through 19			0,8	30.					
21		line 3 (rents) and/or 4 (royaltie	,								
		instructions to find out if you			-6,2	80					
00		l estate loss after limitation, if			0,2	.00.					-
22	on Form 8582 (see in			(-6,28	30)	()	(
23a		eported on line 3 for all rental				23a	(550.	(
b		eported on line 4 for all royalty				23b		550.			
c		eported on line 12 for all prope		· · · ·		23c					
d		eported on line 18 for all prope				23d					
		eported on line 20 for all prope				23u		6,830.			
е 24		e amounts shown on line 21.				208		. 24			
24 25		e amounts shown on line 21.		-		· ·			(6,280.	_
									(0,200.	
26		ate and royalty income or (lo V, and line 40 on page 2 do									
		40), line 5. Otherwise, include 1								-6,280	

Iowa Department of

2020 IA 8453-IND e-File Return

Spouse's first name, middle Spouse's Social Security nu <u>GRIMES IA 5</u> 	mber	1A 2A 3A 4. 5. appointme thdrawal (contraction in stirition) ancial instirition involved in the serie at the serie at the serie at the series related a payment series to to to 574. If you by this AC	A. You or Joint 79,735.00 3,534.00 4,334.00 840.00 .00 ent of the other spous direct debit) entry to the tution to debit the entre n the processing of the to the payment. The is payment/settlement is currently have a debit to currently have a debit
GRIMES IA 5	50111 B. Spouse (filing status 3) .00 .00 .00 .00 .00 .00 .00 .00 .00 .0	1A 2A 3A 4. 5. appointme thdrawal (c ancial institi involved in es related a payment s prior to t 574. If you by this AC	A. You or Joint 79,735.00 3,534.00 4,334.00 840.00 .00 .00 ent of the other spous direct debit) entry to th tution to debit the entry n the processing of th to the payment. Th he payment. Th he payment. Th a currently have a debit
below. If I have filed a joint return aggnated financial agent to initiate y individual lowa taxes owed on t ettlement date). I also authorize t tion necessary to answer inquir IDR to terminate the authorization guests must be received no later t it will be identified with the ACH the est that they allow a withdrawal fr	B. Spouse (filing status 3) .00 .00 .00 .00 .00 .00 .00 .00 .00 .0	2A 3A 5 appointme thdrawal (c ancial institi involved ir es related a payment s prior to t 574. If you by this AC	79,735.00 3,534.00 4,334.00 840.00 .00 ent of the other spous direct debit) entry to th tution to debit the ent n the processing of th to the payment. Th to the payment IDR the payment/settleme is currently have a debit
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2B	.00 .00 .00 	2A 3A 5 appointme thdrawal (c ancial institi involved ir es related a payment s prior to t 574. If you by this AC	3,534.00 4,334.00 840.00 .00 .00 ent of the other spous direct debit) entry to th tution to debit the ent n the processing of th to the payment. Th the payment. Th he payment/settleme i currently have a def
below. If I have filed a joint return ignated financial agent to initiate y individual lowa taxes owed on t titlement date). I also authorize t tion necessary to answer inqui IDR to terminate the authorization juests must be received no later i tit will be identified with the ACH est that they allow a withdrawal fr	.00 n, this is an irrevocable an electronic funds wi this return, and the fin- the financial institution ries and resolve issu n. To revoke (cancel) than five business day Company ID 4426004 rom your bank account	3A 4 5 appointme thdrawal (c ancial instit involved ir es related a payment s prior to t 574. If you by this AC	4,334.00 840.00 .00 ent of the other spous direct debit) entry to th tution to debit the ent n the processing of th to the payment. Th to the payment. Th the payment/settleme i currently have a debit
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ignated financial agent to initiate y individual lowa taxes owed on t ettlement date). I also authorize t tion necessary to answer inquir IDR to terminate the authorization juests must be received no later i tt will be identified with the ACH est that they allow a withdrawal fr	an electronic funds wi this return, and the fin- the financial institution ries and resolve issu n. To revoke (cancel) than five business day Company ID 4426004 rom your bank account	thdrawal (c ancial instit involved ir es related a payment s prior to t 574. If you by this AC	direct debit) entry to th tution to debit the enti n the processing of th to the payment. Th t, I must contact IDR a the payment/settlemen u currently have a deb
4 0	gh 12 or 21 through	32.	
ited States? Yes 🗆 No 🛛			
est of my knowledge and belief, i tronic income tax return. I consen (IDR) through the Internal Reven electronically, I consent to the d O and/or transmitter when my ele e return can be corrected and re ability I will remain liable for the t leclare that the information show O and/or transmitter the reason(s	it is true, correct and o that that my return, includ ue Service (IRS) by m isclosure to IDR of al ectronic return has bee e-transmitted. If I have ax liability and all app n in Part II is correct.	complete. I ling accom y Electron I information accepted if filed a basicable pen fi the procession	further declare that apanying schedules, ic Return Originator on pertaining to the d. In the event that it alance due return, I alties and interest. I essing of my return,
Spouse Signature. If a join	nt return, both must si	gn.	Date
	best of my knowledge and belief, ctronic income tax return. I conser (IDR) through the Internal Reven electronically, I consent to the d RO and/or transmitter when my ele be return can be corrected and re- iability I will remain liable for the t declare that the information show O and/or transmitter the reason(ed upon request to IDR. Spouse Signature. If a joint reparer is on form IA 8453-IND are compli- declare that this form accurately	on my electronic individual income tax return, including best of my knowledge and belief, it is true, correct and of tronic income tax return. I consent that my return, includ (IDR) through the Internal Revenue Service (IRS) by m electronically, I consent to the disclosure to IDR of all RO and/or transmitter when my electronic return has bee he return can be corrected and re-transmitted. If I have iability I will remain liable for the tax liability and all appl declare that the information shown in Part II is correct. O and/or transmitter the reason(s) for the delay or the ed upon request to IDR. Spouse Signature. If a joint return, both must sign reparer s on form IA 8453-IND are complete and correct to the	on my electronic individual income tax return, including any sche best of my knowledge and belief, it is true, correct and complete. I stronic income tax return. I consent that my return, including accon (IDR) through the Internal Revenue Service (IRS) by my Electron electronically, I consent to the disclosure to IDR of all informatic RO and/or transmitter when my electronic return has been accepted the return can be corrected and re-transmitted. If I have filed a be iability I will remain liable for the tax liability and all applicable pen declare that the information shown in Part II is correct. If the proc O and/or transmitter the reason(s) for the delay or the date the ed upon request to IDR. Spouse Signature. If a joint return, both must sign. reparer s on form IA 8453-IND are complete and correct to the best of my declare that this form accurately reflects the data on the return.

ny knowledge. If I am I have obtained the ed with IDR and have followed all other requirements described in the Iowa Modernized e-File (MeF) Information for e-File Providers publication. I understand that the original form IA 8453-IND should not be sent to IDR, but must be retained by the ERO for a period of three years from the due date of the return or the filing date, whichever is later, to which the IA 8453-IND relates was filed. I will make a copy available to IDR upon request. If I am a paid preparer, under penalties of perjury, I declare that I have examined the above taxpayer's return and accompanying schedules, attachments, and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I have based this declaration on all information available to me.

ERO Signature	Date	Check if also paid preparer □	Check if self- employed □	ERO PTIN
Firm's name (or yours if _{GI} self-employed) Address, City, State, ZIP ₂₅	LOBAL TAXES LLC 530 PEBBLE CREEK LN CUM		FEIN 30-1017196 Phone Number (678)965-9522	
Paid Preparer	RIYA RAM SAGAR GUPTA TALLAM		Check if self- employed	Preparer PTIN P02082703
Firm's name (or yours if	GLOBAL TAXES LLC			FEIN 30-1017196
self-employed) Address, City, State, ZIP	2530 PEBBLE CREEK LN C	UMMING GA 30041	Phone Number (678)965-9522	

	-	peginning and ending spaces. You must fill in your Social Security number (SSN).	-	<u>н м</u> .г	NUL EN SPA	de Hut e d'Alt)ESPER		an in the second second		uno en un	
Your last n		Your first name/middle initial:	- III IN IN THE REAL REALING AND									
GUNDALA SUDHEER REDDY												
Spouse's la	ast nan	ne: Spouse's first name/middle initial:			e de la fe	alon kons	KV.	CSPELS-D	SEC BRIN	P (V ()	XAX IIII	
713 S	SE 1	ldress (number and street, apartment, lot, or suite number) or PO Box: 2TH STREET	_									
City, State,		A 50111										
Spouse S		Your SSN: 820-40-3584	_									
•												
<u> </u>	-	us: Mark one box only	-									
1 X Si	ngle: V	/ere you claimed as a dependent on another person's lowa return? Yes No	Email Ad	dress:								
2 M	arried f	ling a joint return. (Two-income families may benefit by using status 3 or 4.)	Check th	is box	if you or yo	ur spouse were	e 65 or	older as of 12	/31/20.			
3 M	arried f	ling separately on this combined return. Spouse use column B.	Residence	ce on 1	12/31/20: C	ounty No. 77		School	District No.	576		
4 Ma	arried f	ling separate returns. Spouse's name: ▲SSI	N:					Net Income:	\$			
5 He	ead of I	nousehold with qualifying person. If qualifying person is not claimed as a dependent on this return, ϵ	enter the per	son's i	name and S	SSN below.						
6 QI	ualifyin	g widow(er) with dependent child. Name:			SSN:							
Step 3 Exe	emptio	ns B. Sp	ouse (Filing	Status	3 ONLY)			A. You or Joi	nt			
a. Perso	onal Cr	edit: Col. A: Enter 1 (enter 2 if filing status 2 or 5); Col. B: Enter 1 if filing status 3		X \$	40 = \$			1	X \$ 40	= \$	40	
b. Enter	1 for e	ach taxpayer who is 65 or older and/or 1 for each taxpayer who is blind		X \$	20 = \$				X \$ 20	= \$		
		Enter 1 for each dependent			40 = \$		_ ▲		X \$ 40	<u> </u>	10	
d. Enter	first na	imes of dependents here		(e. Total \$	7			e. To	otal \$	40	
Step 4 Re	portab	e Social Security benefits as calculated on line 13 of Iowa Social Security Worksheet	B. Spou	se/Sta	atus 3 🔺			A. You	or Joint 🔺			
Ston F		B. Spouse/				or Joint	B. S	oouse/Status	3	A. Yo	u or Joint	
Step 5 Gross		Wages, salaries, tips, etc1.	.00		8	<u>9,013</u> .00						
Income		Taxable interest income. If more than \$1,500, complete Sch. B2.				.00						
	3.	Ordinary dividend income. If more than \$1,500, complete Sch. B3.	.00			2.00						
	4.	Taxable alimony received4.	.00	-		.00		г				
	5.	Business income/(loss). See instructions	.00	-		.00			NOTE: Us blue or bla	,		
	6.	Capital gain/(loss). See instructions6.	.00	-	-	<u>3,000</u> .00			ink, no per			
	7.	Other gains/(losses). See instructions7.				.00		L	or red ink.			
	8.	Taxable IRA distributions8.				.00						
	9.	Taxable pensions and annuities9.		-		.00						
	10.	Rents, royalties, partnerships, estates, etc. See instructions10.	.00	-	-	б <u>,280</u> .00						
	11.	Farm income/(loss). See instructions11.	.00			.00						
		Unemployment compensation. See instructions	.00			.00						
	13.	Gambling winnings	.00			.00						
	14.	Other income, bonus depreciation, and section 179 adjustment14.				.00			00 A	70	735.00	
Step 6		Gross Income. Add lines 1-14 Payments to an IRA, Keogh, or SEP				15		······································	00 🔺	19,	135.00	
Adjust- ments to	16. 17	Deductible part of self-employment tax	.00	-		.00						
ncome	17.	Health insurance premium	.00			.00						
	10.		.00	-		<u> </u>						
	20.			-		.00						
	20. 21.	Pension/retirement income exclusion	.00 .00	•		.00						
	22.	Moving expense deduction from federal form 3903				.00						
	23.	Iowa capital gain deduction; Include corresponding IA 100	.00			.00						
		schedule	.00	.		.00						
	24.	Other adjustments				.00						
	25.	Total adjustments. Add lines 16-24						·	00 🔺		0.00	
Stop 7		Net Income. Subtract line 25 from line 15				26.			00 🔺	79,	735 _{.00}	
Step 7 Federal	27.	Federal income tax refund/overpayment received in 202027.				.00						
Taxes and	28.	Self-employment/household employment/other federal taxes				.00					~	
Qualified Deduc-	29.	Addition for federal taxes. Add lines 27 and 28							00		00. <u>00</u>	
ions	30. 31	Total. Add lines 26 and 29 Federal tax withheld in 2020, federal estimated tax payments made 31.							00	79	<u>735</u> .00	
		in 2020, and federal taxes paid in 2020 for 2019 and prior years	.00	۸	1	<u>4,234</u> .00						

.00

.00 🔺

.00

.00

32. Qualified business income deduction. 25.0% (.25) of federal 32. amount. See instructions 34. 35. REV 02/15/21 PRO

.00 🔺 65,501.00 INT 41-001 (08/27/2020)

.00

14,234.00

		1040, page 2		A. You or Joint			A. You or Joint			
Step 8 Taxable	36.		andard 🗙		00	-	<u>65,501.</u> 00			
Income	37.					0 🔺 _	2,110.00			
Step 9	38.				.00)	63, <u>391₀₀</u>			
Tax, Credits,	39.	-	.00 🔺		<u>l</u> .00					
and	40.	Iowa lump-sum tax. See instructions40.	.00 🔺		00					
Check- off	41.				00					
Contributions	42.				.0	0 -	3,534.00			
	43.		.00	40	<u>) .</u> 00					
	44.	' -	.00 🔺		.00					
	45.		.00 🔺		.00					
	46.				.00	-	<u>40</u> .00			
	47.	,			.00	▲ _	<u>3,494</u> .00			
	48.	Credit for nonresident or part-year resident. Must include IA 126 and fede	ral return	48.	.00	▲ _	.00			
	49.				.00	▲ _	3,494.00			
	50.	Out-of-state tax credit. Must include IA 130		50.	.00	A	.00			
	51.				.00	A	3,494 _{.00}			
	52.	Other nonrefundable Iowa credits. Must include IA 148 Tax Credits Sched	lule	52.	.00	A	.00			
	53.	BALANCE. SUBTRACT line 52 from line 51. If less than zero, enter zero.		53.	.00		<u>3,494</u> .00			
	54.	School district surtax or EMS surtax. Take percentage from table; multiply	y by line 53	54.	.00	▲ _	0.00			
	55.	Total state and local tax. ADD lines 53 and 54		55.	00	▲ _	3,494.00			
	56.	TOTAL state and local tax before contributions. Combine columns A and	B on line 55 and enter here			-	<u>3,494</u> .00			
	57.	Contributions will reduce your refund or add to the amount you owe. Amount	unts must be in whole dolla	ars.						
			Child Abuse Preve				.00			
	58.	TOTAL STATE AND LOCAL TAX, AND CONTRIBUTIONS. Add line 56 and	nd line 57 and enter here				3,494 _{.00}			
Step 10 Credits	59.	lowa fuel tax credit. Include IA 413659.	.00 🔺		.00					
	60.									
		▲ Early childhood development credit 60.	.00 🔺		.00		-			
	61.		00 🔺		.00					
	62.	02.	.00 🔺		.00					
	63.		.00 🔺	4,334	<u>.</u> .00					
	64.				00					
	65.		.00 🔺		-		4 224			
Step 11	66.						4,334.00			
Refund	67.		, ,			▲ _	840.00			
	68.	Amount of line 67 to be REFUNDED				▲ _	<u>840</u> .00			
	6	S8a. Routing number: 0 5 3 0 0 1		Type Checki	ng 🗙 S	Savings				
	6	38c. Account number: 2 3 7 0 3 8 7	7 1 5 2	4 0						
	69.	Income I ferrenza i ferrenza i ferrenza i ferrenza i ferrenza i ferrenza i		Lana Laine La						
Step 12	70.		00 ▲00 ▲00 ▲00		00	•	.00			
Pay	71.						.00			
	72.	Penalty and interest	72b. Interest	.00 ADD.	Enter total 72.		.00			
	73.						.00			
Step 13		e undersigned, declare under penalties of perjury or false certificate, that I h				belief,				
	0011	- · ·								
SIGN HERE		GSRessy 🔺 🗆		SYAM PRI	IYA RAM SAGAR GUPTA	TALLA	₩03/10/2021			
	You	r signature Date Check if decea	ased Date of death	Preparei	's signature		Date			
SIGN HERE				P020	82703	30	-1017196			
	Spor	use's signature Date Check if decea	ased Date of death	Preparer	's PTIN		Firm's FEIN			
			04-3411 (678)965-9522 e telephone number Daytime telephone number							
			This return is due April 30, 2021. Sign, enclose W-2s, and verify SSNs. MAILING ADDRESS: lowa Income Tax Document Processing, PO BOX 9187, Des Moines IA 50306-9187 Make check payable to lowa Department of Revenue							



REV 02/15/21 PRO