E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single X Married filing jointly u checked the MFS box, enter the son is a child but not your depende	name of	ed filing separately your spouse. If you		_		, ,	_				
Your first name and middle initial Las				Last name						Your social security number			
MAHESH REDDY				NANDIGAMA						828-30-3809			
If joint return, spouse's first name and middle initial Las				me					Spor	Spouse's social security number			
SINDU MAI				MADIREDDI						APPLIED FOR			
Home address (number and street). If you have a P.O. box, see instruction				ructions.				Apt. no. Pres			residential Election Campaign		
6800 MC1	NEIL	DRIVE						1014			ere if you,	•	
City, town, or post office. If you have a foreign address, also complete				e spaces below. State			ZIP o	ode		spouse if filing jointly, want \$3 to go to this fund. Checking a			
AUSTIN				TX			170770 1			box below will not change			
Foreign country name				Foreign province/state/county F				oreign postal code your tax or r			or refund.	Spouse	
At any time du	ıring 20	020, did you receive, sell, send, ex	change, c	or otherwise acquire	any	financial intere	est in	any virtual	currenc	y?	Yes	⊠ No	
Standard Deduction		eone can claim:	•	-									
Age/Blindness	s You:	Were born before January 2,	1956	Are blind Sp	ouse	: Was bo	rn bet	fore Januar	y 2, 195	56	☐ Is blii	nd	
Dependents	s (see	instructions):		(2) Social securi	tv	(3) Relationsh	nip	(4) 🗸 i	f qualifie	qualifies for (see instructions):			
If more		irst name Last name		number to you			Child tax credi						
than four													
dependents, see instruction]	П			
and check	5 —]	П			
here ▶ □													
	1	Wages, salaries, tips, etc. Attach	Form(s) \	N-2						1	7	72,320.	
Attach Sch. B if required.	2a	Tax-exempt interest	2a		b T	axable interes	t .			2b			
	3a	Qualified dividends	3a		b (Ordinary divide	nds			3b			
	4a	IRA distributions	4a		b T	b Taxable amount				4b			
	5a	Pensions and annuities	5a		b T	axable amoun	nt.			5b			
Standard Deduction for— Single or Married filing separately, \$12,400	6a	Social security benefits	6a		b T	axable amoun	nt.		.	6b			
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □							· 🗆 📙	7		-19.	
	8	Other income from Schedule 1, line 9								8		0.	
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							•	9	7	72,301.	
Married filing jointly or Qualifying widow(er), \$24,800	10	Adjustments to income:											
	а	From Schedule 1, line 22											
	b	Charitable contributions if you take the standard deduction. See instructions 10b											
Head of	С	Add lines 10a and 10b. These are your total adjustments to income							•	10c			
household, \$18,650 • If you checked any box under Standard Deduction, see instructions.	11	Subtract line 10c from line 9. This is your adjusted gross income							•	11	7	2,301.	
	12	Standard deduction or itemized deductions (from Schedule A)								12	2	24,800.	
	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A								13			
	14	Add lines 12 and 13								14		24,800.	
	15	Taxable income. Subtract line 1	4 from lin	e 11. If zero or less	, ente	er -0				15	4	17,501.	

Form 1040 (2020))									Page 2	
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	5,308.	
	17	Amount from Schedule 2, lir	ne 3				 .	. [17		
	18	Add lines 16 and 17						. [18	5,308.	
	19	Child tax credit or credit for	other dependen	ts				. [19		
	20	Amount from Schedule 3, lir	ne 7					. [20		
	21	Add lines 19 and 20						. [21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. 1	22	5,308.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .			. [23	0.	
	24	Add lines 22 and 23. This is						Г	24	5,308.	
	25	Federal income tax withheld	from:					Ī		,	
	а	Form(s) W-2				25a	10,2	12.			
	b	Form(s) 1099				25b	,				
	С	Other forms (see instruction				25c					
	d	Add lines 25a through 25c	,						25d	10,212.	
	26	2020 estimated tax paymen						T T	26	,	
 If you have a L qualifying child, 	27	Earned income credit (EIC)				27		· I			
attach Sch. EIC.	28	Additional child tax credit. A				28					
If you have nontaxable	29	American opportunity credit				29					
combat pay, see instructions.	30	Recovery rebate credit. See		-		30	1 5	00.			
occ monuciono.	31	•				31					
	32	Amount from Schedule 3, line 13							32	1,500.	
	33	Add lines 25d, 26, and 32. These are your total payments						T T	33	11,712.	
-	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid							34	6,404.	
Refund	35a							. 🗀 🖡	35a	6,404.	
Direct deposit?	b b	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ ☐ Routing number 0 1 1 1 4 0 0 4 9 5 ▶ c Type: ★ Checking ☐ Savings							SSa	0,101.	
See instructions.	►d										
	36	Amount of line 34 you want				36					
Amarint		•							27		
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe now							37		
For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for									
how to pay, see	00	2020. See Schedule 3, line 12e, and its instructions for details. Estimated tax penalty (see instructions) ▶ 38									
instructions.	38					38					
Third Party		you want to allow another	•		rn with the IRS?		oo Comi	alata ba	olovy	X No	
Designee		signee's		Phone			Personal			ĭ NO	
		me ►		no.			number		Jalion		
Sign	Un	der penalties of perjury, I declare t	hat I have examine	ed this return and	d accompanying sch	edules and st	atements.	and to t	he bes	t of my knowledge and	
		lief, they are true, correct, and com									
Here	Yo	ur signature	Date Your occupation					If the IRS sent you an Identity			
	k							1	rotection PIN, enter it here		
Joint return?			SOFTWARE ENGINEER			<u> </u>	see inst.)				
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	Date Spouse's occupation					If the IRS sent your spouse an Identity Protection PIN, enter it here			
your records.			HOME MAKER				1	(see inst.) ▶			
	———Ph	one no.		Email address	-						
		eparer's name	Preparer's signat	l		Date	P	ΓIN		Check if:	
Paid		·		A RAM SAGAR GUPTA TALLAM 03/07/202			021 P	2082	703	Self-employed	
Preparer Use Only								e no. (678)965-9522			
		0500 - 111 - 1 - 2 - 1 - 2 - 00044						Firm's			
Go to want in a		m1040 for instructions and the late				DE)/ 00/01	24 DD 2	1 3		Form 1040 (2020)	
ao to www.iis.go	JV/1"U[[mroso for monuclions and the late	ocimorniduon.		BAA	REV 03/01/	ZIPKU			FOIIII 1040 (2020)	

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

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

OMB No. 1545-0074

Attachment Sequence No. 12

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

Name(s) shown on return Your social security number 828-30-3809 MAHESH REDDY NANDIGAMA & SINDU MADIREDDI Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2, column (a) 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 736. 755. -19. 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 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -19. 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 (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 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 Totals for all transactions reported on Form(s) 8949 with 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

Schedule D (Form 1040) 2020 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -19. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 19.) 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

Sales and Other Dispositions of Capital Assets

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

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

2020 Attachment Sequence No. 12A

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

Social security number or taxpayer identification number

828-30-3809

MAHESH REDDY NANDIGAMA & SINDU MADIREDDI

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 Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss). (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired (sales price) from column (d) and disposed of and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions Robinhood Securities LLC 03/19/20 03/23/20 736. 755. -19.2 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

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.

736.

-19.

above is checked), or line 3 (if Box C above is checked) ▶

755.



Application for IRS Individual Taxpayer Identification Number

► For use by individuals who are not U.S. citizens or permanent residents.

► See separate instructions.

OMB No. 1545-0074

Internal Revenue Service An IRS individual taxpayer identification number (ITIN) is for U.S. federal tax purposes only. Application type (check one box): Apply for a new ITIN Renew an existing ITIN Don't submit this form if you have, or are eligible to get, a U.S. social security number (SSN). Reason vou're submitting Form W-7. Read the instructions for the box you check. Caution: If you check box b, c, d, e, f, or g, you must file a U.S. federal tax return with Form W-7 unless you meet one of the exceptions (see instructions). a Nonresident alien required to get an ITIN to claim tax treaty benefit **b** Nonresident alien filing a U.S. federal tax return c U.S. resident alien (based on days present in the United States) filing a U.S. federal tax return If d, enter relationship to U.S. citizen/resident alien (see instructions) ▶ d Dependent of U.S. citizen/resident alien e X Spouse of U.S. citizen/resident alien If d or e, enter name and SSN/ITIN of U.S. citizen/resident alien (see instructions) ▶ MAHESH REDDY NANDIGAMA f Union Nonresident alien student, professor, or researcher filing a U.S. federal tax return or claiming an exception g Dependent/spouse of a nonresident alien holding a U.S. visa h ☐ Other (see instructions) ▶ Additional information for a and f: Enter treaty country and treaty article number ▶ 1a First name Last name Middle name Name SINDU MADIREDDI (see instructions) 1b First name Middle name Name at birth if Last name different . . > 2 Street address, apartment number, or rural route number. If you have a P.O. box, see separate instructions. Applicant's 6800 MCNEIL DRIVE Apt 1014 Mailing City or town, state or province, and country. Include ZIP code or postal code where appropriate. **Address** 78729 AUSTIN USA Street address, apartment number, or rural route number. Don't use a P.O. box number. Foreign (non-**U.S.) Address** City or town, state or province, and country. Include postal code where appropriate. (see instructions) 4 Date of birth (month / day / year) Country of birth City and state or province (optional) Male **Birth** Information 07/28/1993 TNDTA ▼ Female 6a Country(ies) of citizenship **6b** Foreign tax I.D. number (if any) 6c Type of U.S. visa (if any), number, and expiration date Other INDIA P6249542 09/30/2023 Information 6d Identification document(s) submitted (see instructions) X Passport Driver's license/State I.D. Other USCIS documentation Date of entry into the United States No.: T6935370 Exp. date: 08/27/2029 Issued by: INDIA (MM/DD/YYYY): 6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)? No/Don't know. Skip line 6f. Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions). 6f Enter ITIN and/or IRSN ▶ ITIN **IRSN** and name under which it was issued ▶ First name Middle name Last name 6g Name of college/university or company (see instructions) ▶ City and state ▶ Length of stay ▶ Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying Sign documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number. Here Signature of applicant (if delegate, see instructions) Date (month / day / year) Phone number Keep a copy for your records. Name of delegate, if applicable (type or print) Delegate's relationship Parent Court-appointed guardian to applicant Power of attorney Date (month / day / year) Signature Phone **Acceptance** Fax Agent's Name and title (type or print) Name of company **Use ONLY**

Office code