Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

Submission Identification Number (SID)						
Taxpayer's name	Social securi	ty number				
RAJESH S SRIVASTAVA	667-05-4536					
Spouse's name	Spouse's soo	ial security	number			
NIDHI SRIVASTAVA	674-16	-9112				
Part I Tax Return Information — Tax Year Ending December 31, 2020	(Enter year you a	re autho	rizing.)			
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 , 2	207.		
2 Total tax		2		0.		
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3				
4 Amount you want refunded to you		4	5,8	800.		
5 Amount you owe	and keep a con	5	r roturn	<u>, , </u>		
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or an						
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accorpayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial in authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amend Electronic Funds Withdrawal Consent.	for rejection of the tie the U.S. Treasury a untindicated in the tinstitution to debit the erminate the authorize on requests must be in the processing or the payment. I fur	ransmission nd its designax preparate entry to the ation. To represent the electrostation acknowledge received the electrostation acknowledge received the electrostation acknowledge received the electrostation acknowledge received the rece	n, (b) the propertion softwallis accourate to later on the control of the contr	reason nancial vare for nt. This ncel) a than 2 nent of nat the		
Taxpayer's PIN: check one box only						
☐ I authorize GLOBAL TAXES LLC to enter or ger	perate my PIN	4 5 3	3 6	as my		
ERO firm name	ř En	ter five digit n't enter all	ts, but	13 IIIy		
signature on the income tax return (original or amended) I am now authorizing.	do	ii t eiitei aii	26105			
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.						
Your signature ► Date to be a signature ►	te ►					
Spouse's PIN: check one box only						
☐ I authorize GLOBAL TAXES LLC to enter or ger	nerate my PIN 6	9 1 2	1 2 2	20 m)/		
ERO firm name		│		as my		
signature on the income tax return (original or amended) I am now authorizing.		n't enter all				
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.						
Spouse's signature ▶ Dat	te ►					
Practitioner PIN Method Returns Only—continue	below					
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 7 2 7 Don't ent	8 6 1 er all zeros	9 8	9		
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I an requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Provide	n submitting this retu	urn in acco	rdance w			
FRO's signature ▶ Dat	te ▶					

ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

E1040 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	s 🗌 (Single X Married filing jointly	Marrie	d filing separately	(MFS)	☐ Head o	f hous	ehold (HC)H) [Qua	lifying wic	dow(er) (QW)
Check only one box.	If yo	ou checked the MFS box, enter the noson is a child but not your dependen	ame of y									
Your first name	and m	iddle initial	Last nan	ne					١	our so	cial securi	ity number
RAJESH :	S		SRIV.	ASTAVA						667-	05-453	6
If joint return, s	pouse's	s first name and middle initial	Last nan	ne					5	Spouse's social security number		
NIDHI			SRIV.	ASTAVA						674-	16-911	.2
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ns.				Apt. no.	F	Preside	ntial Electi	ion Campaign
5710 23	8TH	PI NE									here if you	
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete sp	aces below.	Sta	te	ZIP	code				ntly, want \$3 Checking a
REDMOND					W	A	98	053		_	ow will not	•
Foreign country	y name		F	oreign province/state	coun	ty	Fore	ign postal	code	our tax	x or refund	. <u> </u>
											You	Spouse
At any time du	ring 20	020, did you receive, sell, send, excl	hange, o	r otherwise acquire	e any	financial inter	est in	any virtu	al curr	ency?	Yes	⊠ No
Standard	Som	eone can claim: You as a de	pendent	☐ Your spou	se as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alier	1						
Age/Blindness	s You:	: Were born before January 2, 1	956	Are blind Sp	ouse	: Was bo	orn be	fore Janu	ary 2,	1956	☐ Is b	lind
Dependent	s (see	instructions):		(2) Social securi	ty	(3) Relations	ship	(4)	/ if qua	lifies fo	r (see instru	uctions):
If more	(1) F	irst name Last name		number to you				Child	tax cre	dit	Credit for of	ther dependents
than four	AAF	RAV SHANKAR	217-89-98	40	Son			×				
dependents, see instruction	s RIA	A SHANKAR	789-13-039	98	Daughte	r		×				
and check												
here ►											<u> </u>	
A++ I-	_1_	Wages, salaries, tips, etc. Attach I	Form(s) V	V-2						1	1	<u>68,771.</u>
Attach Sch. B if	2 a	Tax-exempt interest	2a		b T	axable intere	st			2b		106.
required.	3a	Qualified dividends	3a	26,512.	b (Ordinary divid	ends			3b)	26,849.
	4a	IRA distributions	4a		b T	axable amou	nt .			4b		
	5a	Pensions and annuities	5a		b T	axable amou	nt .			5b)	
Standard	6a	Social security benefits	6a		b T	axable amou	nt .			6b)	
• Single or	7	Capital gain or (loss). Attach Sche	dule D if	required. If not red	quired	l, check here			► ×	7		611.
Married filing	8	Other income from Schedule 1, lin	ie9							8		<u>17,130.</u>
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. Th	nis is your total inc	come				. ▶	9	_	79 , 207.
 Married filing jointly or 	10	Adjustments to income:				ĺ	1					
Qualifying	а	From Schedule 1, line 22				10	0a					
widow(er), \$24,800	b	Charitable contributions if you take	the stand	dard deduction. Se	e inst	ructions 10	0b					
Head of	С	Add lines 10a and 10b. These are	your tot a	al adjustments to	inco	me			. ▶	10		
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	djusted gross inc	ome				. ▶	11		79,207.
 If you checked any box under 	12	Standard deduction or itemized	deduction	ons (from Schedul	e A)					12		24,800.
Standard	13	Qualified business income deduct	ion. Atta	ch Form 8995 or F	orm 8	8995-A				13		
Deduction, see instructions.	14	Add lines 12 and 13								14		24,800.
	15	Taxable income. Subtract line 14	from line	e 11. If zero or less	, ente	er-0				15	5	54,407.

Form 1040 (2020))									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		. 16	10,0	70.
	17	Amount from Schedule 2, lin	ne 3				- .	. 17		
	18	Add lines 16 and 17						. 18	10,0	070.
	19	Child tax credit or credit for	other dependen	ts				. 19	2,1	100.
	20	Amount from Schedule 3, lin	ne 7					. 20	7,5	970.
	21	Add lines 19 and 20							10,0	
	22	Subtract line 21 from line 18	I. If zero or less,	enter -0				. 22		0.
	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		0.
	25	Federal income tax withheld	l from:							
	а	Form(s) W-2				25a				
	b	Form(s) 1099				25b				
	С	Other forms (see instructions				25c				
	d	Add lines 25a through 25c	,					. 25d		
	26	2020 estimated tax paymen							+	
 If you have a L qualifying child, 	27	Earned income credit (EIC)				27				
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	5,80	10		
see manuchons.	31	Amount from Schedule 3. lir				31	3,00	,,,,,		
	32	Add lines 27 through 31. The						▶ 32	5 9	300.
	33	Add lines 25d, 26, and 32. T	,						-	300.
	34		-					. 34		300.
Refund		If line 33 is more than line 24								300.
Direct deposit?	35a	Amount of line 34 you want Routing number 1 2 5					_	35a	J, C	300.
See instructions.	►b ►d	Account number 0 0 0				.] Checking [_ Savi	igs		
	36	Amount of line 34 you want				36				
Amount	37							▶ 37	-	
You Owe	31	Subtract line 33 from line 24		-						
For details on		Note: Schedule H and Sch 2020. See Schedule 3, line 1	· ·	•	•	of the taxes yo	ou owe	for		
how to pay, see instructions.	38	Estimated tax penalty (see in				38				
Third Party Designee		you want to allow another	•				Comp	ete below	. X No	
Designee		signee's		Phone				dentification	_	
		me ▶		no. 🕨			ımber (F			
Sign		der penalties of perjury, I declare t								
Here	bel	ief, they are true, correct, and com	plete. Declaration		, , ,	ased on all inform	ation of		,	Ü
	Yo	ur signature		Date	Your occupation				ent you an Identi PIN, enter it here	
laint vatuus 0					IT ENGINE	FD		(see inst.)		
Joint return? See instructions.	Sn	ouse's signature. If a joint return, I	hoth must sian	Date	Spouse's occupat			, ,	ent your spouse	an
Keep a copy for	op.	oues o signaturer ir a jenit return, i	2011 aat a.g						otection PIN, ente	
your records.					HOME MAKE	R		(see inst.)	•	
	Ph	one no.		Email address	RAJESHSS@1	HOTMAIL.C	MC			
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTI	N	Check if:	
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	07/20/202	1 P02	2082703	Self-emp	loyed
Preparer	Fin	m's name ▶ GLOBAL TA	XES LLC					Phone no.	(678) 965-9	9522
Use Only	Fin	m's address ▶ 2530 Pebb	le Creek L	n Cummin	g GA 30041			Firm's EIN	▶ 30-101	7196
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV 05/29/21 F	PRO		Form 104	10 (2020)
5										. ,

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

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

Attachment Sequence No. **01** Your social security number

RAJE	ESH S & NIDHI SRIVASTAVA 66	67-05	-453	36
Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received	. 2	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 E 📗	5	-9,530.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income. List type and amount ► Form 2555 -107,60	10.	8	-107,600.
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-N line 8		9	-117,130.
Par				
10	Educator expenses	. [1	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	I	11	
12	Health savings account deduction. Attach Form 8889	. [1	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	. [1	13	
14	Deductible part of self-employment tax. Attach Schedule SE	. [1	14	
15	Self-employed SEP, SIMPLE, and qualified plans	. [1	15	
16	Self-employed health insurance deduction	. [1	16	
17	Penalty on early withdrawal of savings	. [1	17	
18a	Alimony paid	. 1	8a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions) ▶			
19	IRA deduction		19	
20	Student loan interest deduction	. 2	20	
21	Tuition and fees deduction. Attach Form 8917	. 2	21	
22	Add lines 10 through 21. These are your adjustments to income. Enter here a on Form 1040, 1040-SR, or 1040-NR, line 10a	I	22	

SCHEDULE 3 (Form 1040)

Department of the Treasury

Internal Revenue Service

Additional Credits and Payments

► 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. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR RAJESH S & NIDHI SRIVASTAVA

Your social security number 667-05-4536

Par	t I Nonrefundable Credits	·		
1	Foreign tax credit. Attach Form 1116 if required		1	7 , 970.
2	Credit for child and dependent care expenses. Attach Form 2441		2	
3	Education credits from Form 8863, line 19		3	
4	Retirement savings contributions credit. Attach Form 8880		4	
5	Residential energy credits. Attach Form 5695		5	
6	Other credits from Form: a \square 3800 b \square 8801 c \square		6	
7	Add lines 1 through 6. Enter here and on Form 1040, 1040-SR, or	1040-NR, line 20	7	7 , 970.
Par	Other Payments and Refundable Credits			
8	Net premium tax credit. Attach Form 8962		8	
9	Amount paid with request for extension to file (see instructions) .		9	
10	Excess social security and tier 1 RRTA tax withheld		10	
11	Credit for federal tax on fuels. Attach Form 4136		11	
12	Other payments or refundable credits:			
а	Form 2439	12a		
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202	12b	_	
С	Health coverage tax credit from Form 8885	12c		
d	Other:	12d		
е	Deferral for certain Schedule H or SE filers (see instructions) .	12e		
f	Add lines 12a through 12e		12f	
13	Add lines 8 through 12f. Enter here and on Form 1040, 1040-SR, or	1040-NR, line 31	13	

SCHEDULE B (Form 1040)

Interest and Ordinary Dividends

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

► Attach to Form 1040 or 1040-SR.

2020	
Attachment	
Sequence No. 08	

Name(s) shown on r	eturn		Your	social secur	ty num	ber
RAJESH S &	NIDE	HI SRIVASTAVA	667	-05-453	86	
Part I Interest	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address ▶		Am	ount	
(See instructions and the instructions for Forms 1040 and 1040-SR, line 2b.))	FIDELITY BROKERAGE SERVICES LLC			1	06.
Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.			1			
	2	Add the amounts on line 1	2		1	06.
	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989.				
	4	Attach Form 8815	3		1	06.
	Note:	If line 4 is over \$1,500, you must complete Part III.		Am	ount	
Part II	5	List name of payer ► FIDELITY BROKERAGE SERVICES LLC			26,8	49.
Ordinary Dividends (See instructions and the instructions for Forms 1040 and						
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6		26,8	49
	Note:	line 3b				
Part III	You m	nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary divide a account; or (c) received a distribution from, or were a grantor of, or a transferor to, a			Yes	No
Foreign Accounts and Trusts	7a	At any time during 2020, did you have a financial interest in or signature authority of account (such as a bank account, securities account, or brokerage account) locate country? See instructions	ed in			×
Caution: If required, failure to file FinCEN		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See FinC and its instructions for filing requirements and exceptions to those requirements.	CEN F	orm 114		
Form 114 may result in substantial	b	If you are required to file FinCEN Form 114, enter the name of the foreign cour financial account is located ▶				
penalties. See instructions.	8	During 2020, did you receive a distribution from, or were you the grantor of, or t foreign trust? If "Yes," you may have to file Form 3520. See instructions				×

SCHEDULE E

Department of the Treasury

(Form 1040)

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.

OMB No. 1545-0074

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

Attachment

Internal F	Revenue Service (99)	► Go to www.irs.gov/Schedul	leE for ins	tructions	and the	latest i	nformation		Seque	ence No. 1	3
Name(s)	shown on return							Your soci	al securit	ty number	
RAJE	SH S & NIDHI SF	RIVASTAVA						667-0	5-453	6	
Part	Income or Loss	s From Rental Real Estate and	l Royaltie	s Note	: If you a	re in the	e business c	of renting pe	rsonal pr	roperty, us	se
	Schedule C. See	instructions. If you are an individual	l, report far	m rental i	ncome o	r loss fr	om Form 48	335 on page	2, line 4	1 0.	
A Dic	l you make any payme	nts in 2020 that would require yo	ou to file F	orm(s) 1	099? Se	e instr	uctions .		. 🗆 🕆	Yes 🗵 l	No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?							. 🗆 🕆	Yes 🗌 t	No
1a	Physical address of	each property (street, city, state	, ZIP cod	e)							
Α	2033 240TH AVE	SE SAMMAMISH WA 9807	75								
В											
C											
1b	Type of Property	2 For each rental real estate	property	listed			Rental	Persona		QJV	,
	(from list below)	above, report the number of personal use days. Check	the O.IV h	nax anly,		D	ays	Day	S	45.	
A	3	if you meet the requiremer qualified joint venture. See	nts to file a	as a	Α		366		0		
B		qualified joint venture. See	nstructio	ons.	В						
C					С						
	of Property:										
_	le Family Residence	3 Vacation/Short-Term Ren				Self-l					
	ti-Family Residence	4 Commercial		oyalties		Othe	r (describe)				
Incom		Properti			Α			3	<u> </u>	С	
3					34,7	788.			<u> </u>		
4			. 4						<u> </u>		
Expen											
5				-							
6	·	nstructions)									
7	•	nance		-	1,9	32.					
8				-							
9						312.					
10	•	essional fees	-								
11	-				10 1	0.5					
12		d to banks, etc. (see instruction	· —		12,1	.95.					
13					2 (-1 /					
14				-	2,6	514.					
15				-		\1 -					
16 17				-		216.					
18					17,7						
19		e or depletion				313.					
20					44,3						
	•	lines 5 through 19			44,3	10.					
21		line 3 (rents) and/or 4 (royalties	·								
	file Form 6198	instructions to find out if you m	. 21		-9,5	30					
22		l estate loss after limitation, if a			3,0	,50.					
22	on Form 8582 (see in			(- 9,53	30 1	1)	(١
23a		eported on line 3 for all rental pr				23a		34,788.	`		
b		eported on line 4 for all royalty p				23b		, ,			
C		eported on line 12 for all proper				23c	1	2,195.			
d		eported on line 18 for all proper				23d		7,719.			
e		eported on line 20 for all proper				23e		14,318.			
24		e amounts shown on line 21. Do						. 24			
25		sses from line 21 and rental real es				iter tota			(9,53	0.)
26		ate and royalty income or flos							<u> </u>		

-9,530.

26

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

Foreign Tax Credit

(Individual, Estate, or Trust)
► Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T. COPY 1

OMB No. 1545-0121 Attachment Sequence No. 19

Department of the Treasury Internal Revenue Service (99) ▶ Go to www.irs.gov/Form1116 for instructions and the latest information.

Name								Identify	ing number a	s shown	on page	e 1 of your tax return
RA	JESH S & NIDHI	SRIVAS'	TAVA					667-	05-4536			
	a separate Form 1116 f . Report all amounts in						of Incon	ne in the ins	tructions. Ch	neck onl	y one l	oox on each Form
	Section 951A category Foreign branch category		c ☐ Passive d ☒ Genera					901(j) income ncome re-so		•] Lum	o-sum distributions
. P	esident of (name of o	country)	IIC 7									
Vot	: If you paid taxes to	only one f	foreign count									ou paid taxes to
	e than one foreign o				-							
Pa	rt I Taxable Inco	ome or Lo	ss From So	ources O						hecke	d abo	ove)
					Fo	reign C	Country	or U.S. Pos				Total
	Enter the name of possession				A India			В	С		(Add	cols. A, B, and C.)
4.	Gross income from				IIIaIa							
10	above and of the		-									
		1687		000)								
	From Form 2											
					61,1	71.					1a	61,171.
k	Check if line 1a is services as ar compensation from more, and you u	n employe n all source sed an alte	ee, your t es is \$250,000 ernative basis	otal) or s to								
	determine its source			▶ 🗆								
Ded	uctions and losses (Ca											
2	Expenses definite 1a (attach stateme		o the income									
3	Pro rata share of	other dedu	ctions not de	finitely								
	related:											
a	Certain itemized d	eductions o	r standard de	duction								
	(see instructions) .				24,8	00.						
k	,			-								
(24,8							
(O	•		· -	168,7							
•			•	· ·	231,1							
f		•	,			302						
4	Multiply line 3c by Pro rata share of in				18,1	09.						
4		•	•	· · ·								
ĉ	Home Mortgage In	`										
k			,									
5	Losses from foreig			_								
6	Add lines 2, 3g, 4a			-	18,1	09.					6	18,109.
7	Subtract line 6 fror					age 2				. ▶	7	43,062.
Pa	t II Foreign Tax	es Paid o	r Accrued	(see instr	uctions)							
	Credit is claimed for taxes				Foi	reign tax	xes paid	or accrued				
2	(you must check one)					_						
	(j) X Paid	SEE STM			() 011	_	T	41-11-1 -4	In U.S. do		hau I	(v) Total favoian
Country	(k) Accrued	raxes	withheld at sour	ce on:	(p) Other foreign taxes		raxes wi	thheld at sour	ce on:	(t) Ot foreign		(u) Total foreign taxes paid or
	(I) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	paid or accrued	(q) Div	idends	(r) Rents and royalties	(s) Interest	paid accru		accrued (add cols. (q) through (t))
Α	INDIA				4,093,337.					55 , 2	39.	55,239.
В												
С												
8	Add lines A throu	gh C, colun	nn (u). Enter t	he total h	ere and on	line 9,	page 2	<u> </u>		. ▶	8	55,239.

Page 2

Part	III Figuring the Credit				, ,
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	55,239.		
	or accrued for the category of income checked above Part 1	9	33,239.	-	
10	Carryback or carryover (attach detailed computation)	10			
10	(If your income was section 951A category income (box a above	10		-	
	Part I), leave line 10 blank.)				
11	Add lines 9 and 10	11	55,239.		
			00,203.		
12	Reduction in foreign taxes (see instructions) ŞEĘ ŞTMT	12	(35,220.)		
			,		
13	Taxes reclassified under high tax kickout (see instructions)	13			
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes	avail	able for credit	14	20,019.
15	Enter the amount from line 7. This is your taxable income or (loss) from				
	sources outside the United States (before adjustments) for the category				
	of income checked above Part I (see instructions)	15	43,062.		
16	Adjustments to line 15 (see instructions)	16			
17	Combine the amounts on lines 15 and 16. This is your net foreign				
••	source taxable income. (If the result is zero or less, you have no				
	foreign tax credit for the category of income you checked above				
	Part I. Skip lines 18 through 24. However, if you are filing more than				
	one Form 1116, you must complete line 20.)	17	43,062.		
18	Individuals: Enter the amount from line 15 of your Form 1040,				
	1040-SR, or 1040-NR. Estates and trusts: Enter your taxable				
	income without the deduction for your exemption	18	54,407.		
	Caution: If you figured your tax using the lower rates on qualified d	livider	nds or capital gains, see		
	instructions.				
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"			19	0.7915
20	Individuals: Enter the total of Form 1040 or 1040-SR, line 16, and Sci	hedul	e 2 (Form 1040) line 2 If		
20	you are a nonresident alien, enter the total of Form 1040-NR, line 16				
	line 2. Estates and trusts: Enter the amount from Form 1041, Sche				
	Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts				
	Form 1040-NR, line 16			20	10,070.
	Caution: If you are completing line 20 for separate category g	(lump	-sum distributions), see		
	instructions.				
21	Multiply line 20 by line 19 (maximum amount of credit)			21	7,970.
22	Increase in limitation (section 960(c))			22	
23	Add lines 21 and 22			23	7,970.
24	Enter the smaller of line 14 or line 23. If this is the only Form 111				
	through 32 and enter this amount on line 33. Otherwise, complete the				
	instructions)			24	7,970.
	Summary of Credits From Separate Parts III (see instru		ns)		
25	Credit for taxes on section 951A category income	25		-	
26	Credit for taxes on foreign branch category income	26		-	
27	Credit for taxes on passive category income	27		-	
28	Credit for taxes on general category income	28			
29	Credit for taxes on section 901(j) income	29			
30	Credit for taxes on certain income re-sourced by treaty	30			
31	Credit for taxes on lump-sum distributions	31			
32	Add lines 25 through 31			32	
33	Enter the smaller of line 20 or line 32			33	7,970.
34	Reduction of credit for international boycott operations. See instruction			34	
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter h		•		
	1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, li	ine 1a	a	35	7,970.

REVENUE PROCEDURE 2020-27

Department of the Treasury Internal Revenue Service

Foreign Earned Income

► Attach to Form 1040 or 1040-SR.

► Go to www.irs.gov/Form2555 for instructions and the latest information. For Use by U.S. Citizens and Resident Aliens Only

OMB No. 1545-0074

Attachment Sequence No. **34**

Name sl	nown on For	m 1040 or 1040-SR					Your social	security number
RAJE	SH S SI	RIVASTAVA					667-05	-4536
Part	Ge	neral Informat	tion					
1 Y	our foreign	address (including	g country)				2 Your occ	cupation
1	MARIGOL	D 12, L&T S	SERENE COUN	NTY HYDERABAD T	ELANGANA Ir	ndia 500032	IT E	NGINEER
3		r's name ► TU						
4a	Employe	r's U.S. address	► None					
b	Employe	r's foreign addre	ess► 7TH FLO	OOR, KAPIL TOWERS,	115/1, NANAK	RAMGUDA HYDER	ABAD TELANGA	NA India 500032
5	Employe	r is (check	a 🔀 A foreig			b \square A U.S. com		
	any that		d \square A foreig	gn affiliate of a U.S. co	ompany	e Other (spec	cify) ►	
6a	If you pre	eviously filed For	m 2555 or For	m 2555-EZ, enter the	last year you file	ed the form		2019
b	If you dic	ln't previously fil	e Form 2555 o	r Form 2555-EZ to cla	aim either of the	exclusions, chec	k here 🕨 🗌	and go to line 7.
С				clusions?				
d	If you ans	swered "Yes," e	nter the type o	f exclusion and the tax	x year for which	the revocation w	as effective.	-
7				nal?▶ UNITED ST				
8a				sidence for your famil hold in the instruction		dverse living con-	ditions at your	•
b				eparate foreign reside				
5		ed a second hou		addraga				
9	List vour	tax home(s) dur	ing vour tax ve	ar and date(s) establis	shed. ► N/A			
	,							12/31/2020
	Novt o	omploto oith	or Part II a	r Part III. If an ite	m doosn't or	only ontor "N	I/A " If you	don't give
	-	-			-		_	_
	un	e illiorillatioi	i askeu ioi,	any exclusion or	deduction	you claim ma	y be disalic	oweu.
Part	II Tax	cpayers Qualif	fying Under I	Bona Fide Residen	ce Test			
	No	te: Only U.S. c	itizens and re	sident aliens who a	re citizens or n	nationals of U.S	. treaty coun	tries can use this
	tes	t. See instructi	ons.					
10	Date bon	a fide residence	began ► 10/	19/2009	, and e	ended ► CONT	INUES	
11	Kind of li	ving quarters in	foreign country	√ ► a ☐ Purchased h	ouse b 🗷 R	ented house or a	partment	c Rented room
				d Quarters furr				
12a				ad during any part of	the tax year? .			Yes No
b		who and for wha						
13a				the authorities of the				
				hat country? See insti				
b	•			ne country where you				
			to 13a and "I	No" to 13b, you don	't qualify as a	bona fide resid	ent. Don't co	mplete the rest of
	this part		- 11-141 04-4		do o Ho o Accesso		(-) (-1) -	alassa Basak Salahada
14				s or its possessions d			umns (a)–(a) b	elow. Don't include
			(c) Number of	out report it on Form 1 (d) Income earned in			(c) Number of	(d) Income earned in
(a arrive	n) Date ed in U.S.	(b) Date left U.S.	days in U.S.	Ú.S. on business	(a) Date arrived in U.S.	(b) Date left U.S.	days in U.S. on	Ú.S. on business
			on business	(attach computation)			business	(attach computation)
				0.				
15a	List any o	contractual term	s or other cond	ditions relating to the I	Length of your er	nployment abroa	ıd. ▶	
b	Enter the	type of visa und	der which you e	entered the foreign co	untry. ► N/A			<u></u>
С				y or employment in a				
d	-			States while living abro				
е			f your home, w	hether it was rented, t	the names of the	e occupants, and	their relations	ship
	to you.							

	7.7. (0000)					_		
Part	555 (2020) Taxpayers Qualifying Under Phys	ical Procence T	oct			Page 2		
Paru	Note: U.S. citizens and all resident			ructions.				
16	The physical presence test is based on the 1	2-month period fr	om ▶		through 			
17	Enter your principal country of employment of	during your tax yea	ar. ►					
18	If you traveled abroad during the 12-month period entered on line 16, complete columns (a)–(f) below. Exclude travel betwee foreign countries that didn't involve travel on or over international waters, or in or over the United States, for 24 hours or most five you have no travel to report during the period, enter "Physically present in a foreign country or countries for the entire month period." Don't include the income from column (f) below in Part IV, but report it on Form 1040 or 1040-SR.							
	(a) Name of country (including U.S.)	(b) Date arrived	(c) Date left	(d) Full days present in country	(e) Number of days in U.S. on business	(f) Income earned in U.S. on business (attach computation)		
Part	IV All Taxpayers			•	•			

Note: Enter on lines 19 through 23 all income, including noncash income, you earned and actually or constructively received during your 2020 tax year for services you performed in a foreign country. If any of the foreign earned income received this tax year was earned in a prior tax year, or will be earned in a later tax year (such as a bonus), see the instructions. **Don't** include income from line 14, column (d), or line 18, column (f). Report amounts in U.S. dollars, using the exchange rates in effect when you actually or constructively received the income.

If you are a cash basis taxpayer, report on Form 1040 or 1040-SR all income you received in 2020, no matter when you performed the service.

	porter mod the control		
	2020 Foreign Earned Income		Amount (in U.S. dollars)
19 20	Total wages, salaries, bonuses, commissions, etc	19	168,771.
а	In a business (including farming) or profession	20a	
b	In a partnership. List partnership's name and address and type of income. ▶	20b	
21	Noncash income (market value of property or facilities furnished by employer—attach statement showing how it was determined):		
а	Home (lodging)	21a	
b	Meals	21b	
C	Car	21c	
d	Other property or facilities. List type and amount. ▶	21d	
22	Allowances, reimbursements, or expenses paid on your behalf for services you performed:		
а	Cost of living and overseas differential		
b	Family		
С	Education		
d	Home leave		
е	Quarters		
f	For any other purpose. List type and amount. ▶		
	22f		
g	Add lines 22a through 22f	22g	
23	Other foreign earned income. List type and amount. ▶	23	
24	Add lines 19 through 21d, line 22g, and line 23	24	168,771.
25	Total amount of meals and lodging included on line 24 that is excludable (see instructions)	25	
26	Subtract line 25 from line 24. Enter the result here and on line 27 on page 3. This is your 2020 foreign earned income	26	168,771.

Part	V All Taxpayers		
07	Enter the amount from line 26	07	4.60 774
27	Enter the amount from line 26	27	168,771.
	✓ Yes. Complete Part VI.		
	No. Go to Part VII.		
Part			
	Tanpayoro oraniming and riodoning Encoderior and the Encoderior		
28	Qualified housing expenses for the tax year (see instructions)	28	
29a	Enter location where housing expenses incurred. See instructions. ▶		
b	Enter limit on housing expenses. See instructions	29b	
30	Enter the smaller of line 28 or line 29b	30	
31	Number of days in your qualifying period that fall within your 2020 tax year		
00	(see instructions)		
32	Multiply \$47.04 by the number of days on line 31. If 366 is entered on line 31, enter \$17,216 here	32	
33	Subtract line 32 from line 30. If the result is zero or less, don't complete the rest of this part or any of Part IX	33	
34	Enter employer-provided amounts. See instructions	00	
35	Divide line 34 by line 27. Enter the result as a decimal (rounded to at least three places), but don't		
	enter more than "1.000"	35	
36	Housing exclusion. Multiply line 33 by line 35. Enter the result but don't enter more than the amount		
	on line 34. Also, complete Part VIII	36	
	exclusion, complete Parts VII and VIII before Part IX.		
Part	•		
37	Maximum foreign earned income exclusion. Enter \$107,600	37	107,600.
38	• If you completed Part VI, enter the number from line 31.		101,0001
	• All others, enter the number of days in your qualifying period that fall } 38 366 days		
	within your 2020 tax year. See the instructions for line 31.		
39	• If line 38 and the number of days in your 2020 tax year (usually 366) are the same, enter "1.000."		
	• Otherwise, divide line 38 by the number of days in your 2020 tax year and enter the result as a	39	1.000
	decimal (rounded to at least three places).		
40	Multiply line 37 by line 39	40	107,600.
41	Subtract line 36 from line 27	41	168,771.
42 Part	Foreign earned income exclusion. Enter the smaller of line 40 or line 41. Also, complete Part VIII • VIII Taxpayers Claiming the Housing Exclusion, Foreign Earned Income Exclusion, or B		107,600.
43	Add lines 36 and 42	43	107,600.
44	Deductions allowed in figuring your adjusted gross income (Form 1040 or 1040-SR, line 11) that are		107,000.
• • •	allocable to the excluded income. See instructions and attach computation	44	
45	Subtract line 44 from line 43. Enter the result here and in parentheses on Schedule 1 (Form 1040), line		
	8. In the blank space next to line 8, enter "Form 2555." On Schedule 1 (Form 1040), subtract this		
	amount from your additional income to arrive at the amount reported on Schedule 1 (Form 1040), line		
	9. Complete the Foreign Earned Income Tax Worksheet in the Instructions for Forms 1040 and 1040-		
	SR if you enter an amount on this line	45	107,600.
Part		iore t	nan line 36, and
46	Subtract line 36 from line 33	46	
47	Subtract line 43 from line 27	47	
48	Enter the smaller of line 46 or line 47	48	
	Note: If line 47 is more than line 48 and you couldn't deduct all of your 2019 housing deduction		
	because of the 2019 limit, use the Housing Deduction Carryover Worksheet in the instructions to figure the amount to enter on line 49. Otherwise, go to line 50.		
49	Housing deduction carryover from 2019 (from the Housing Deduction Carryover Worksheet in the instructions)	49	
50	Housing deduction. Add lines 48 and 49. Enter the total here and on Schedule 1 (Form 1040) to the left of line 22. Next to the amount on Schedule 1 (Form 1040), line 22, enter "Form 2555." Add the amount to the adjustments to income reported on Schedule 1 (Form 1040), line 22. Complete the		
	Foreign Earned Income Tax Worksheet in the Instructions for Forms 1040 and 1040-SR if you enter an		
	amount on this line	50	

Form **8867**

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC), Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

OMB No. 1545-0074

Attachment Sequence No. **70**

Internal Revenue Service

Department of the Treasury | ► To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. ▶ Go to www.irs.gov/Form8867 for instructions and the latest information.

Taxpayer name(s) shown on return Taxpayer identification number RAJESH S & NIDHI SRIVASTAVA 667-05-4536 Enter preparer's name and PTIN SYAM PRIYA RAM SAGAR GUPTA TALLAM P02082703 **Due Diligence Requirements** Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I-V for the benefit(s) claimed (check all that apply). ☐ EIC ▼ CTC/ACTC/ODC □ AOTC ☐ HOH No N/A Did you complete the return based on information for tax year 2020 provided by the taxpayer or X If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit claimed? X Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following. • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status. • Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing X Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes," X Did you make reasonable inquiries to determine the correct, complete, and consistent information? . Did you contemporaneously document your inquiries? (Documentation should include the questions you asked, whom you asked, when you asked, the information that was provided, and the impact the information had on your preparation of the return.) Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure X List those documents provided by the taxpaver, if any, that you relied on:

Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year? . . .

If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and

(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)

X

orm 88	867 (2020)			Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	Yes	No	N/A
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?			
Part		claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the taxpayer has not lived with the child for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?			
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar			
	statement to the return?	X		
Part				
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qu tuition and related expenses for the claimed AOTC?	alified 	Yes	No
Part		s, go to	o Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax	x year	Yes	No
	and provided more than half of the cost of keeping up a home for the year for a qualifying person?			
Part		,		
	➤ You will have complied with all due diligence requirements for claiming the applicable credit(s) a status on the return of the taxpayer identified above if you:	nd/or H	OH filii	ng
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's respo in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(status and to figure the amount(s) of the credit(s);			
	 B. Complete this Form 8867 truthfully and accurately and complete the actions described in this check credit(s) claimed and HOH filing status, if claimed; 	list for a	ıny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 Document Retention.	67 instr	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).	's eligib	ility for	the
	A record of how, when, and from whom the information used to prepare this form and the applica obtained.	ble wor	ksheet(s) was
	A record of any additional information you relied upon, including questions you asked and the tax determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount			
	▶ If you have not complied with all due diligence requirements, you may have to pay a \$540 penalty comply related to a claim of an applicable credit or HOH filing status.	for eac	ch failu	ire to
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct	t. and	Yes	No
	complete?	-,		

Additional information from your 2020 Federal Tax Return

Form 1116: Foreign Tax Credit

Foreign Taxes (A)

Other Foreign Currency Taxes Paid or Accrued

Explanation Statement

Explanation

TOTAL SALARY OF RS.1,25,06,264 .00 HAS BEEN CONEVRTED INTO DOLLARS @ RS.74.102 PER DOLLAR

Form 1116: Foreign Tax Credit

Line 12 Explanation Statement

Foreign Tax Reduction

TOTAL SALARY RECEIVED IN INDIA WAS RS.1,25,06,264 .00 HAS BEEN CONVERTED TO US DOLLARS @RS.74.102 PER DOLLAR