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 securit	y number
AARTHI KRISHNAKUMAR	765-39-	-7192
Spouse's name	Spouse's soci	ial security number
SENTHIL KUMAR THANGAPPAN	972-94-	-3142
Part I Tax Return Information — Tax Year Ending December 31,	Enter year you a	re authorizing.)
Enter whole dollars only on lines 1 through 5.	, ,	<u> </u>
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1 Adjusted gross income		1 66,658.
2 Total tax		2 630.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 5,940.
4 Amount you want refunded to you		4 6,410.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a	and keep a copy	y of your return)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I 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 authorize Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accoun payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial insauthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terr 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 it 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 amende Electronic Funds Withdrawal Consent.	ransmitter, or electro or rejection of the transmitter. Treasury are nt indicated in the tastitution to debit the minate the authorizan requests must be in the processing of the payment. I furt	nic return originator (ERO ansmission, (b) the reason of its designated Financia ax preparation software for entry to this account. This tion. To revoke (cancel) as received no later than 2 the electronic payment of her acknowledge that the
Taxpayer's PIN: check one box only		
	orato my DINI 9	
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	[*] Ent	er five digits, but 't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.		
Your signature ▶ Date	e -	
Spouse's PIN: check one box only		
X I authorize GLOBAL TAXES LLC to enter or general signature on the income tax return (original or amended) I am now authorizing.	Ent	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.		
Spouse's signature ▶ Date	.	
Practitioner PIN Method Returns Only—continue be	elow	
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.		8 6 1 9 8 9 er all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual inco authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Provider	submitting this retu	rn in accordance with the
ERO's signature ▶ Date	.	
ERO Must Retain This Form — See Instruction		

Don't Submit This Form to the IRS Unless Requested To Do So

£1040

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

2020

OMB No. 1545-0074

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

Filing Status Check only one box.	If yo	Single Married filing jointly bu checked the MFS box, enter the son is a child but not your depende	name of	ed filing separately your spouse. If you	•	<i>,</i> —		•	,		, ,	` , ` ,	
Your first name			Last na	me					Yo	our soc	cial securi	ty number	
AARTHI			KRIS	SHNAKUMAR						765-39-7192			
If joint return, s	spouse's	s first name and middle initial	Last na	me					Sp	ouse's	social se	curity number	
SENTHIL			THAN	IGAPPAN					9	72-9	94-314	2	
		er and street). If you have a P.O. box, se						Apt. no.				on Campaign	
1131 HI	DDEN	RIDGE						3107			ere if you,		
City, town, or p	oost offi	ce. If you have a foreign address, also	complete s	paces below.	Sta	ate	ZIP	code		spouse if filing jointly, want \$3			
IRVING					T	X	75	5038		_	tnis tuna. ow will not	Checking a	
Foreign countr	y name		ı	Foreign province/sta	te/cour	nty	For	eign postal cod			or refund	0	
· ·	-					•					You	Spouse	
At any time du	uring 20	020, did you receive, sell, send, ex	change, c	or otherwise acqui	re any	financial in	terest in	n any virtual	currer	ncy?	Yes	X No	
Standard Deduction		neone can claim:	•			•	nt						
Age/Blindnes	s You:	: Were born before January 2,	1956	Are blind S	pous	e: 🗌 Was	born be	efore Januar	v 2. 19	956	☐ Is b	lind	
Dependent				(2) Social secu		(3) Relation					(see instru		
•	•	irst name Last name											
If more than four		HIRAN SENTHILKUMAR		807-95-18	369	Son		×					
dependents,				00. 20 10					1				
see instruction and check	s —								- 1				
here ▶ □	-								- 1				
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					-	1	Т	72,508.	
Attach	2a	Tax-exempt interest	2a		h ⁻	Taxable inte	rest			2b			
Sch. B if	3a	Qualified dividends	3a			Ordinary div			•	3b	1		
required.	4a	IRA distributions	4a			Taxable am			·	4b	+		
	5a	Pensions and annuities	5a			Taxable am				5b			
Standard	6a	Social security benefits	6a			Taxable am				6b			
Deduction for -	7	Capital gain or (loss). Attach Sch		required. If not re				•	- 🗆	7	+		
 Single or Married filing 	8	Other income from Schedule 1, I			•				_	8	1	-5,850.	
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7							•	9		66,658.	
\$12,400 Married filing	10	Adjustments to income:	,	, , , , , , , , , , , , , , , , , , , ,									
jointly or Qualifying	а					1	10a						
widow(er),	b	Charitable contributions if you take			ee ins	tructions	10b						
\$24,800 • Head of	c	Add lines 10a and 10b. These ar				L			•	10c			
household,	11	Subtract line 10c from line 9. Thi	•	-					•	11		66,658.	
\$18,650 • If you checked	12	Standard deduction or itemize	•	•						12		24,800.	
any box under Standard	13	Qualified business income dedu		`	,	8995-A				13	1		
Deduction,	14	Add lines 12 and 13								14	_	24,800.	
see instructions.	15	Taxable income Subtract line 1		e 11 If zero or les	 s ent	or -0-			•	15		41.858.	

Form 1040 (2020))								Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		. 16	
	17	Amount from Schedule 2, lir	ne 3				 .	. 17	
	18	Add lines 16 and 17						. 18	4,630.
	19	Child tax credit or credit for	other dependen	ts				. 19	2,000.
	20	Amount from Schedule 3, lir	ne 7					. 20	2,000.
	21	Add lines 19 and 20						. 21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. 22	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10 .			. 23	0.
	24	Add lines 22 and 23. This is						▶ 24	
	25	Federal income tax withheld	from:						
	а	Form(s) W-2				25a	5,94	10.	
	b	Form(s) 1099				25b			
	С	Other forms (see instruction				25c			
	d	Add lines 25a through 25c	,					. 25	5,940.
	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	1,10	20	
see instructions.	31	Amount from Schedule 3, lir				31	Ι, Ι	,,,,	
	32	Add lines 27 through 31. The						▶ 32	1,100.
	33								
		Add lines 25d, 26, and 32. T							
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid						. 34	
Divert deposit?	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □ Routing number 0 3 1 1 7 6 1 1 0 ▶ c Type: ★ Checking □ Savings						_	0,410.
Direct deposit? See instructions.	►b	Account number 3 6 1				Checking	Savi	ngs	
	► d	· · · · · · · · · · · · · · · · · · ·				+			
<u> </u>	36	Amount of line 34 you want							
Amount You Owe	37	Subtract line 33 from line 24	. This is the amo	ount you owe	now			▶ 37	
For details on		Note: Schedule H and Sch	· ·	•		of the taxes y	ou owe	for	
how to pay, see		2020. See Schedule 3, line 1	•			1 1			
instructions.	38	Estimated tax penalty (see in				38			
Third Party		you want to allow another	•				0		₩ N.
Designee									
		signee's me ▶		Phone no. ▶			Personal I number (F	dentificatio	
Sign		der penalties of perjury, I declare t	hat I have examine		d accompanying sch				est of my knowledge and
Sign		lief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation			If the IRS	sent you an Identity
	k.	-							PIN, enter it here
Joint return?	L				SOFTWARE I			(see inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupat	ion			sent your spouse an otection PIN, enter it here
your records.				STUDENT				(see inst.)	
	———Ph	one no.		Email address	BIODENI			, ,	
		eparer's name	Preparer's signat			Date	PTI	N	Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM			מווסדם דמו.ו.אм			 208270:	
Preparer				1011 DUQUE	COLIA TADDAM	102/22/20	<u> </u>		
Use Only		0500 - 117 - 1 00044							(678)965-9522
0-1				LI CUIIIIIIIII				Firm's EIN	
GO TO WWW.irs.go	ov/Forr	n1040 for instructions and the late	st information.		BAA	REV 02/15/21	PRO		Form 1040 (2020)

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

AARTHI KRISHNAKUMAR & SENTHIL KUMAR THANGAPPAN

► 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

765-39-7192

Par	t 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	-5,850.
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	E 0E0
Par	line 8	9	-5,850.
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government	10	
	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 on Form 1040, 1040-SR, or 1040-NR, line 10a	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
AARTHI KRISHNAKUMAR & SENTHIL KUMAR THANGAPPAN

Your social security number 765-39-7192

Par	t I Nonrefundable Credits	·		
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses. Attach Form 2441		2	
3	Education credits from Form 8863, line 19		3	2,000.
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	2,000.
Par	t II 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		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	
For Pa	perwork Reduction Act Notice, see your tax return instructions.	REV 02/15/21 PRO	Schedu	le 3 (Form 1040) 2020

SCHEDULE E

(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.

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

OMB No. 1545-0074 Attachment Sequence No. 13

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

Department of the Treasury

Your social security number

AART	HI KRISHNAKUMAR	& SENTHIL KUMAR THANGA	PPAN					7	65-39-	7192	2	
Part	Income or Loss	From Rental Real Estate and Ro	yaltie	s Note:	If you	are in th	e business c	of rent	ing persor	al pro	perty,	use
	Schedule C. See	instructions. If you are an individual, rep	ort farr	m rental in	come o	or loss f	rom Form 4 8	3 5 or	n page 2, I	ne 40).	
A Did	l you make any payme	nts in 2020 that would require you to	file F	orm(s) 10	99? S	ee insti	ructions .			Y	es X	No
		ou file required Form(s) 1099?										
		each property (street, city, state, ZIF										
A	<u> </u>	ROAD THANJAVUR TAMIL NAI			07							
В												
С												
1b	Type of Property	2 For each rental real estate prop	nerty li	isted		Fair	Rental	Per	sonal Us	e	_	
	(from list below)	above, report the number of fa	ir rent	al and			Days		Days		Q.	JV
Α	1	personal use days. Check the if you meet the requirements to	QJV b	ox only	Α		365		0			1
В		qualified joint venture. See inst	tructio	ns.	В		300					<u>-</u> 1
				-	C							<u>-</u> 1
	f Property:											
	le Family Residence	3 Vacation/Short-Term Rental	5 1 2	nd		7 Self-	Rontal					
_	i-Family Residence	4 Commercial		valties			r (describe)					
Incom		Properties:	1 110	yailies	Α	o Otrie	r (describe)				С	
3		•	3			650.						
-3 -			4			650.						
			4									
Expen			_			100						
5			5			100.						
6	,	nstructions)	6			300.						
7		nance	7									
8			8									
9			9									
10	_	ssional fees	10									
11			11									
12		d to banks, etc. (see instructions)	12									
13			13		6,	000.						
14			14			100.						
15	Supplies		15									
16	Taxes		16									
17	Utilities		17									
18		or depletion	18									
19	Other (list)		19									
20	Total expenses. Add	lines 5 through 19	20		6,	500.						
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If										
	result is a (loss), see	instructions to find out if you must										
	file Form 6198		21		-5,	850.						
22	Deductible rental real	estate loss after limitation, if any,										
	on Form 8582 (see in	structions)	22	(-5,8	50.)	()()
23a	Total of all amounts re	eported on line 3 for all rental prope	rties			23a		6	50.			
b	Total of all amounts re	eported on line 4 for all royalty prop	erties			23b						
С	Total of all amounts re	eported on line 12 for all properties				23c						
d	Total of all amounts re	eported on line 18 for all properties				23d						
е	Total of all amounts re	eported on line 20 for all properties				23e		6,5	00.			
24		e amounts shown on line 21. Do no	t inclu	ide any l	osses				24			
25	•	sses from line 21 and rental real estate		,		nter tota	al losses her	e.	25 (5,8	50.)
26		ate and royalty income or (loss).							()			
20		V, and line 40 on page 2 do not										
		10) line 5. Otherwise include this ar						0.1	26		-5	850.

Form **8863**

Education Credits(American Opportunity and Lifetime Learning Credits)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return ► Attach to Form 1040 or 1040-SR.

► Go to www.irs.gov/Form8863 for instructions and the latest information.

OMB No. 1545-0074

2020
Attachment Sequence No. 50

AARTHI KRISHNAKUMAR & SENTHIL KUMAR THANGAPPAN

Your social security number 765-39-7192



Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

Part			
1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)		
3	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter		
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit		
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)		
6	If line 4 is:		
	• Equal to or more than line 5, enter 1.000 on line 6		
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rounded to	6	
	at least three places)		
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year and meet the		
	conditions described in the instructions, you can't take the refundable American opportunity credit;	7	
0	skip line 8, enter the amount from line 7 on line 9, and check this box		
8	on Form 1040 or 1040-SR, line 29. Then go to line 9 below.	8	
Part			
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions) .	9	
10	After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If		
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19	10	21,548.
11	Enter the smaller of line 10 or \$10,000	11	10,000.
12	Multiply line 11 by 20% (0.20)	12	2,000.
13	Enter: \$138,000 if married filing jointly; \$69,000 if single, head of household, or qualifying widow(er)		
14	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on		
	line 18, and go to line 19		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)		
17	If line 15 is:		
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18		
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to at least three places)	17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) ▶	18	2,000.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see		
	instructions) here and on Schedule 3 (Form 1040), line 3	19	2,000.

BAA

· /	
Name(s) shown on return	Your social security number
AARTHI KRISHNAKUMAR & SENTHIL KUMAR THANGAPPAN	765-39-7192

	A	
CA	UT	ION

Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

B		On the Leville of
Par		
20	Student name (as shown on page 1 of your tax return) SENTHIL KUMAR	21 Student social security number (as shown on page 1 of your tax return)
	THANGAPPAN	972-94-3142
22	Educational institution information (see instructions)	
а	. Name of first educational institution	b. Name of second educational institution (if any)
	THE UNIVERSITY OF TEXAS AT DALLAS	` **
(*	 Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. WEST CAMPBELL ROAD 	(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
	RICHARDSON TX 75080	
(2	2) Did the student receive Form 1098-T from this institution for 2020? ✓ Yes ☐ No	(2) Did the student receive Form 1098-T Yes No from this institution for 2020?
(;	B) Did the student receive Form 1098-T from this institution for 2019 with box ☐ Yes ☒ No 7 checked?	(3) Did the student receive Form 1098-T from this institution for 2019 with box ☐ Yes ☐ No 7 checked?
(4	Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	(4) Enter the institution's employer identification numbe (EIN) if you're claiming the American opportunity credit o if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.
	75-1305566	
23	Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2020?	\square Yes — Stop! Go to line 31 for this student. \bowtie No — Go to line 24.
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2020 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	$oxed{x}$ Yes — Go to line 25. $oxed{D}$ No — Stop! Go to line 31 for this student.
25	Did the student complete the first 4 years of postsecondary education before 2020? See instructions.	Yes — Stop! ▼ Go to line 31 for this student. No — Go to line 26.
26	Was the student convicted, before the end of 2020, of a felony for possession or distribution of a controlled substance?	Yes — Stop! Go to line 31 for this student. No — Complete lines 27 through 30 for this student.
CAUT	you complete lines 27 through 30 for this student, don't d	fetime learning credit for the same student in the same year. If complete line 31.
	American Opportunity Credit	
27	Adjusted qualified education expenses (see instructions). Dor	't enter more than \$4,000
28	Subtract \$2,000 from line 27. If zero or less, enter -0	
29	Multiply line 28 by 25% (0.25)	29
30	If line 28 is zero, enter the amount from line 27. Otherwise, a enter the result. Skip line 31. Include the total of all amounts f	
	Lifetime Learning Credit	
31	Adjusted qualified education expenses (see instructions). Incl	

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**

Department of the Treasury

► To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.

Internal Revenue Service ▶ Go to www.irs.gov/Form8867 for instructions and the latest information. Taxpayer name(s) shown on return

Taxpayer identification number

AART	THI KRISHNAKUMAR & SENTHIL KUMAR THANGAPPAN	765-39-7	192		
Enter pr	eparer's name and PTIN				
SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	P0208270	13		
Part	·				
	check the appropriate box for the credit(s) and/or HOH filing status claimed on the return a benefit(s) claimed (check all that apply).		the rel	I	arts I-V HOH
1	Did you complete the return based on information for tax year 2020 provided by the t reasonably obtained by you?		Yes	No	N/A
2	If credits are claimed on the return, did you complete the applicable EIC and/or CTC/A worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS instructions, AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provide information, and all related forms and schedules for each credit claimed?	and/or the s the same	X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must the following.	do both of		_	
	 Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's re 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 status and to figure the amount(s) of any credit(s)		×		
4	Did any information provided by the taxpayer or a third party for use in preparing the information reasonably known to you, appear to be incorrect, incomplete, or inconsistent answer questions 4a and 4b. If " No ," go to question 5.)	? (If "Yes,"		×	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent information	ation? .			
b 5	Did you contemporaneously document your inquiries? (Documentation should include the you asked, whom you asked, when you asked, the information that was provided, and the information had on your preparation of the return.) Did you satisfy the record retention requirement? To meet the record retention requirement	impact the			
3	keep a copy of your documentation referenced in 4b, a copy of this Form 8867, a coapplicable worksheet(s), a record of how, when, and from whom the information used to pre 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provides	opy of any epare Form ded by the			
	taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status the amount(s) of the credit(s)	_	×		
	List those documents provided by the taxpayer, if any, that you relied on:				
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate eligible credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return return is selected for audit?	n if his/her	X		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year (If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)	r?	X		
а	Did you complete the required recertification Form 8862?				
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a concernet School to C. (Form 1040)?	mplete and			

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	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	claim (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?	×		
Part	,			
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the question and related expenses for the claimed AOTC?		Yes	No
Part			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
Part	and provided more than half of the cost of keeping up a home for the year for a qualifying person? VI Eligibility Certification			Ш
ı are	➤ You will have complied with all due diligence requirements for claiming the applicable credit(s) as status on the return of the taxpayer identified above if you:	nd/or H	OH fili	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?	i, and	₩	