E1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) urn	202	20	OMB No. 1545	-0074	IRS Us	e Only	—Do not v	vrite or staple	in this space.	
Filing Status Check only one box.	lf yo	Single X Married filing jointly u checked the MFS box, enter the n on is a child but not your dependen	ame of y	ed filing sep /our spous								, 0	dow(er) (QW) he qualifying	
Your first name	and m	iddle initial	Last na	me							Your so	cial securi	ty number	
VENKATA	NAG	A PRASAD	DASA	RI							707-37-7624			
If joint return, s	pouse's	s first name and middle initial	Last na	me							Spouse's social security number			
RAJESWA	RAMM	A	DASA	RI							848-50-7129			
		er and street). If you have a P.O. box, see MDALE DR	instructio	ons.				A	vpt. no.			ential Electi here if you	i on Campaign , or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	mplete spaces below. State Z				ZIP co	/ P CODE .			spouse if filing jointly, want \$3		
TAMPA						F	FL		22626		to go to this fund. Checking a box below will not change			
Foreign country	y name		F	oreign provi	ince/state	/coun	ty	Foreig	n postal	code	your tax or refund.			
												You	Spouse	
At any time du	iring 20	020, did you receive, sell, send, excl	nange, c	or otherwise	e acquire	any	financial intere	est in a	ny virtu	ial cu	rrency?	Yes	X No	
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur	n or you	were a du	al-status	alier								
Age/Blindness	s You:	Were born before January 2, 1	956 _	Are blind	d Sp	ouse	: 🗌 Was bo	rn befo		-		Is b		
Dependents		instructions): irst name Last name			ial securi umber	у	(3) Relationsh to you	nip		if quitax ci	ualifies for (see instructions): redit Credit for other dependen			
than four	VENK'	TA NAGA CHETAN DASARI	926-99-012		20	Son						X		
dependents,	ESV	VAR DASARI	926-99-011		.3	3 Son						X		
see instruction and check	s —													
here 🕨 🗌														
	1	Wages, salaries, tips, etc. Attach F	- orm(s) \	N-2							. 1	1	20,208.	
Attach	2a	Tax-exempt interest	2a			bТ	b Taxable interestb Ordinary dividend				. 2k)		
Sch. B if required.	3a	Qualified dividends	3a			bС			s		. 3b)	120.	
	4a	IRA distributions	4a				axable amoun	t			. 4t)		
	5a	Pensions and annuities	5a	5a			axable amoun	t			. 5t)		
Standard	6a	Social security benefits	6a b Taxable amount						. 6k)				
• Single or	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								7		19,261.		
Married filing	8	Other income from Schedule 1, line 9								. 8		-5,346.		
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								▶ 9	1	34,243.		
Married filing	10	Adjustments to income:												
Jointly or Qualifying	а	From Schedule 1, line 22												
widow(er), \$24,800	b	Charitable contributions if you take	the stan	dard dedu	ction. Se	e inst	ructions 10	b		28	0.			
Head of	С	Add lines 10a and 10b. These are your total adjustments to income									▶ 10	c	280.	
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted g	ross inc	ome					► <u>11</u>	1	33,963.	
 If you checked 	12	Standard deduction or itemized	deducti	ons (from	Schedul	e A)					. 12	2	24,800.	
any box under Standard	13	Qualified business income deduct	ion. Atta	ch Form 8	995 or F	orm 8	8995-A				. 13	3		
Deduction, see instructions.	14	Add lines 12 and 13								. 14		24,800.		
	15	Taxable income. Subtract line 14	from lin	e 11. If zer	o or less	ente	er-0				. 15	; 1	09,163.	

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

Form **1040** (2020)

Form 1040 (2020))									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3			16	15,286.
	17	Amount from Schedule 2, lir	ie3					[17	
	18	Add lines 16 and 17						[18	15,286.
	19	Child tax credit or credit for	other dependen	ts				[19	1,000.
	20	Amount from Schedule 3, lin	ie7					[20	
	21	Add lines 19 and 20						[21	1,000.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				[22	14,286.
	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	14,286.
	25	Federal income tax withheld	from:							
	а	Form(s) W-2				25a	10,0)64.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						[25d	10,064.
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20)19 return			[26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)				27				
If you have	28	Additional child tax credit. A	ttach Schedule	8812		28				
nontaxable combat pay,	29	American opportunity credit	from Form 8863	3, line 8		29				
see instructions.	30	Recovery rebate credit. See	instructions .			30	3,0	000.		
	31	Amount from Schedule 3, lin	ie 13			31				
	32	Add lines 27 through 31. The	ese are your tot a	al other paym	ents and refund	able credit	s	. 🕨	32	3,000.
	33	Add lines 25d, 26, and 32. These are your total payments								13,064.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid							34	
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here								
Direct deposit?	►b	Routing number X X X X X X X X X X F C Type: Checking Savings								
See instructions.	►d	Account number X X X	X X X X	X X X Z	X X X X X	X X				
	36	Amount of line 34 you want a	applied to your	2021 estimate	ed tax 🕨	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe	now			. 🕨 🛛	37	1,222.
You Owe		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for								
For details on how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details.								
instructions.	38	Estimated tax penalty (see in	nstructions) .		🕨	38				
Third Party		you want to allow another	person to disc	cuss this retu	rn with the IRS					
Designee		structions				. 🕨 🗌	Yes. Com	•		X No
		signee's me ►		Phone no.			Persona number	al identific	ation	
Ciana		der penalties of perjury, I declare t	hat I have examine			hedules and		()	ha has	t of my knowledge and
Sign		ief, they are true, correct, and com								
Here	Yo	Your signature Date Your occupation					If the I	RS ser	nt you an Identity	
									N, enter it here	
Joint return?			SOFTWARE M						nst.) 🕨	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	Date	Spouse's occupa	tion				nt your spouse an action PIN, enter it here	
your records.			HOME MAKER				(see in	· .		
	Ph	one no.		Email address						
		eparer's name	Preparer's signat			Date	P	TIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM			GUPTA TALLAN			02082	703	Self-employed
Preparer		m's name ► GLOBAL TA								678)965-9522
Use Only		m's address ► 2530 Pebb		n Cummin	g GA 30041				EIN ►	
Go to www irs or		11040 for instructions and the late			BAA		3/21 PRO	1		Form 1040 (2020)
						112 00/1	5, Z I I I I U			

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

Form W-7
(Rev. August 2019)
Department of the Treasury Internal Revenue Service

Application for IRS Individual Taxpayer Identification Number by individuals who are not U.S. citizens or permanent

raaidanta

Department of the Treas Internal Revenue Servic		See sep	arate instruc		permaner	it reside					
An IRS individua	I taxpayer identification num	nber (ITIN) is for	· U.S. feder	al tax p	ourposes	only.	Applicati	on typ	e (check one	e box):	
Before you begin • Don't submit the	1: nis form if you have, or are elig	ible to get, a U.S	S. social sec	urity nu	ımber (SS	SN).			r a new ITIN In existing I		
must file a U.S. f	ubmitting Form W-7. Read t ederal tax return with Form	W-7 unless you	meet one						c, d, e, f, oi	r g, you	
	t alien required to get an ITIN to c		efit								
	t alien filing a U.S. federal tax retu										
	nt alien (based on days present i of U.S. citizen/resident alien)							SOM			
	J.S. citizen/resident alien	f d or e , enter nam DASARI VENK	e and SSN/IT	IN of U	S. citizen/i			structio	ons) ►	21	
f Nonresiden	۔ الا t alien student, professor, or rese) except	ion		// 5/ /0.		
	spouse of a nonresident alien hol	-			Janning a	i oncopi					
h 🗌 Other (see in											
Additional information	on for a and f : Enter treaty countr			an	d treaty art	icle nur	nber 🕨				
Name	1a First name		dle name			Last	name	name			
(see instructions)	VENKTA NAGA CHET		DAS			SARI					
Name at birth if different ►	1b First name	Mid	dle name			Last	name				
Applicant's Mailing	2 Street address, apartment number, or rural route number. If you have a P.O. box, see separate instructions. 12424 STREAMDALE DR										
Address	City or town, state or province, and country. Include ZIP code or postal code where appropriate. TAMPA FL USA 33626										
Foreign (non- U.S.) Address	3 Street address, apartment number, or rural route number. Don't use a P.O. box number.										
(see instructions)	City or town, state or province, and country. Include postal code where appropriate.										
Birth	4 Date of birth (month / day / yea	r) Country of birth		City ar	nd state or	province	e (optional)	5 🗙	Male		
Information	09/01/2007	INDIA							Female		
Other Information	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 INDIA 6b Foreign tax I.D. number (if any) 6c Type of U.S. visa (if any), number, and expiration date										
	6d Identification document(s) submitted (see instructions) ☑ Passport □ Driver's license/State I.D. □ USCIS documentation □ Other □ Driver's license/State I.D.										
	Date of entry into the United States										
	Issued by: INDIA No.: T8267019 Exp. date: 04/03/2024						(MM/DD/Y	YYY):	04/04/2	2019	
	 6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)? No/Don't know. Skip line 6f. 										
	 X 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 926-99-0	0120		IB	SN				and	
	name under which it was is	sued VENKTA N	NAGA CHETAN				DASARI				
		Firs	st name		Middle n	ame		La	ast name		
	6g Name of college/university of	or company (see in	structions) 🕨								
	City and state Length of stay										
Sign Here	Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompany documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to sh information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number.										
Keep a copy for your records.	Signature of applicant (if de	ctions)	Date (month / day / year)			Phone num	ber				
,	Name of delegate, if applic DASARI VENKATA		to continent			■ Parent □ Court-appointed guardian □ Power of attorney					
	Signature			Date (m	onth / day /	/ year)	Phone				
Acceptance							Fax				
Agent's Use ONLY	Name and title (type or prin	nt)	Name of company			EIN		P	TIN		
USE UNLT					Office	node					

REV 03/13/21 PRO

Office code

Form W-7
(Rev. August 2019)
Department of the Treasury Internal Revenue Service

Application for IRS Individual Taxpayer Identification Number For use by individuals who are not U.S. citizens or permanent

(Nev. August 2019)	For use by individuals who are not U.S. citizens or permanent residents.									574
Department of the Trease Internal Revenue Service			rate instruc		permanen	it reside				
An IRS individual	taxpayer identification num	ber (ITIN) is for	U.S. feder	al tax p	ourposes	only.	Арр	lication	type (check one b	ox):
Before you begin • Don't submit the	: is form if you have, or are eligil	ble to get, a U.S	social sec	urity nu	mber (SS	SN).		Apply	for a new ITIN w an existing ITIN	
-	ubmitting Form W-7. Read the								b, c, d, e, f, or g	, you
	ederal tax return with Form V	-		of the e	exception	ns (see	instruc	tions).		
_	alien required to get an ITIN to cla	2	efit							
_	alien filing a U.S. federal tax return t alien (based on days present in			C fodor	al tax natur	~				
	of U.S. citizen/resident alien) If		, 0				struction	s)► S(Л	
		a, ontor rotationor	ip to 0.0. on			(000 110				
e 🗌 Spouse of U	.S. citizen/resident alien	d or e, enter name	and SSN/IT	'IN of U.	S. citizen/r	resident	alien (se	ee instru	ictions) ►	
_	J	DASARI VENKA	ATA NAGA	PRAS	SAD				707-37-7624	:
_	alien student, professor, or resear	-	ederal tax re	turn or o	claiming ar	n except	ion			
• _ ·	spouse of a nonresident alien hold	ing a U.S. visa								
h U Other (see in	nstructions)				troaty art	ielo pur	bor 🕨			
Name	1a First name		and treaty article				Last name			
(see instructions)	ESWAR					DA	SARI			
Name at birth if	1b First name	Mido	lle name			Last	name			
different 🕨										
Applicant's Mailing	2 Street address, apartment number, or rural route number. If you have a P.O. box, see separate instructions. 12424 STREAMDALE DR									
Address	City or town, state or province, and country. Include ZIP code or postal code where appropriate.								22626	
	TAMPA FL USA 33626 3 Street address, apartment number, or rural route number. Don't use a P.O. box number. 33626									
Foreign (non-	o oreet autress, apartment number, or rurar route number. Doir t use a F.O. box number.									
U.S.) Address (see instructions)	City or town, state or province, and country. Include postal code where appropriate.									
(
Birth	4 Date of birth (month / day / year)	-		City ar	d state or	province	e (optior	nal) 5	X Male	
Information	10/15/2011	INDIA							Female	
Other Information	6a Country(ies) of citizenship INDIA 6b Foreign tax I.D. number (if any) 6c Type of U.S. visa (if any), number, and expiration date									
	6d Identification document(s) submitted (see instructions) 🛛 Passport 🗌 Driver's license/State I.D.									
	USCIS documentation Other Date of entry into									
	the United States Issued by: INDIA No.: T8267051 Exp. date: 04/03/2024 (MM/DD/YYYY): 04/04/									10
-	6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?									
	No/Don't know. Skip line 6f.									
	X 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 926-99-0113 IRSN at									and
	name under which it was iss	name under which it was issued ESWAR						DASARI		
-	First name Middle name Last name									
	6g Name of college/university or company (see instructions) ► City and state ► Length of stay ►									
01	Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying									
Sign Here	documentation and statements, and information with my acceptance agen	to the best of my	knowledge a	nd belief	, it is true,	correct,	and con	nplete. I	authorize the IRS to	
Keep a copy for your records.	Signature of applicant (if del	Date (m	ionth / day /	′ year)	Phone	number	r			
,	Name of delegate, if applica	ble (type or print)	t) Delegate's relation			iship 📐 🔀 Parent			Court-appointed guardian	
	DASARI VENKATA N	AGA PRASAD				Power of at				
Acceptance	Signature		Date (month / day / yea			year)	Phone			
Agent's		<u></u>					Fax		1	
Use ONLY	Name and title (type or print))	Name of co	ompany		EIN			PTIN	
	٢					Office	code			

REV 03/13/21 PRO