

Note: Are you plannin	g to purc	hase any Hous	e Property in	n Tax Year	2021 In	United Star	tes Of America
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Please Mention Yes Or No Yes No

documents to prepare and analyze your taxes and share you a Free Tax return Draft Copy for TY2020.

IF YOU RECEIVED STIMULUS CHECK, PLEASE MENTION THE AMOUNT YOU RECEIVED, IF NOT PLEASE MENTION AS "NO"

2020	Amount :1200
2021	Amount :600

PERSONALINFORMATION

Particulars	Primary Taxpayer	Spouse	Dependent 1 (Child1)	Dependent 2 (Child -2)	Dependent 3 (Other dependent person)
FIRST NAME (PER	Rajesh				
SSN/ITIN)					
MIDDLE NAME (PER					
SSN/ITIN)					
LAST NAME (PER	Bhupathiraju				
SSN/ITIN)					
SSN/ITIN NUMBER	739-04-7348				
DATE OF BIRTH	01/01/1988				
(MM/DD/YY)					
RELATIONSHIP WITH					
PRIMARY TAXPAYER					
OCCUPATION	Software Engineer				
CURRENT ADDRESS	20401 N 19th AVE				
	Phoenix Arizona				
	85027				
CELL NUMBER	480-385-8052				



Note: Are you planning to purchase any House Property in Tax Year 2021 In United States Of America					
Please Mention Yes Or No	Yes	3	No		
ALTERNATIVE NUMBER (HOME)					
WORK NUMBER (WITH EXTENSION)					
EMAIL ADDRESS	Rajesh.b1419@g mail.com				
FIRST PORT OF ENTRY DATE (MM/DD/YY)	06/08/2018				
VISA STATUS ON 31 ST DEC 2020					
ANY CHANGE IN VISA STATUS DURING THE YEAR 2020 (IF YES PLS. SPECIFY)					
MARITAL STATUS AS ON DEC 31,2020	Single				
DATE OF MARRIAGE (IF APPLICABLE)					
FILING STATUS (SINGLE/MARRIED/HEAD OF HOUSEHOLD)	Single				
NO. OF MONTHS STAYED IN US DURING 2020	12				
WILL YOU STAY IN US FOR MORE THAN 183 DAYS IN YEAR 2021 – (YES OR NO)	Yes				



lease Mention Yes Or No	Yes	No	
ANY OTHER			

NOTE: IF YOU DO NOT HAVE AN SSN FOR YOUR SPOUSE/DEPENDENTS WE CAN APPLY FOR ITIN. FOR ITIN APPLICATION PROCESSING PLEASE REACH US ON (551)-271-1611 OR WRITE TO shravani@gtaxfile.com

<u>CHILD AND DEPENDENT CARE EXPENSES PROVIDER DETAILS</u> -

DEPENDENT NAME	NAME OF THE ORGANIZATION	ADDRESS WITH PHONE NUMBER	FEDERAL ID NUMBER (EIN / SSN) OF THE ORGANIZATION / PERSON WHO PROVIDED THE CARE.	AMOUNT PAID

1. DEPENDENTS UNDER AGE 24 WITH UNEARNED INCOME (E.G. INTEREST OR DIVIDENDS EARNED, STOCK SALE PROCEEDS) GREATER THAN \$950 MAY NEED TO FILE A RETURN.

NOTE: DEPENDENTS WITH UNEARNED INCOME GREATER THAN \$1,900 ARE SUBJECT TO THEIR PARENT'S TAX RATE. COORDINATION OF RETURNS BETWEEN PARENT AND CHILD IS VERY IMPORTANT.

2. PLEASE COMPLETE CHILDCARE EXPENSES SECTION ONLY IF BOTH TAXPAYER & SPOUSE ARE WORKING.

BANK ACCOUNT DETAILS

BANK DETAILS FOR DIR	BANK DETAILS FOR DIRECT DEPOSIT OF REFUND AMOUNT/AUTO			
WITHDRAWAL OF OWE	WITHDRAWAL OF OWE AMOUNT(OPTIONAL)			
BANK NAME	Bank Of America			



Note: Are you planning	to purchase any Ho	use Property i	n Tax Year 2021	In United States Of America
Please Mention Yes Or	No	Yes	No	
BANK ROUTING	122101706			
NUMBER (PAPER OR ELECTRONIC)	122101700			
BANK ACCOUNT NUMBER	457039075691			
CHECKING / SAVING ACCOUNT	Checking Account			
ACCOUNT HOLDER NAME	Rajesh Bhupathiraju	u		

RESIDENCY DETAILS:



Note: A	Are you plan	ning to purchas	se any House Prop	perty in T	ax Year 2021	In United States	Of America
Please	Mention Yes	s Or No	Yes		No		
	STATES I	RESIDENCY DET	ΓAILS		STATE	S RESIDENCY DET	TAILS
YEAR	STATES		TO (MM/DD/YY)	YEAR	STATE STATE(S)		TO (MM/DD/YY)
YEAR 2020		TAXPAYER FROM	ТО	YEAR 2020		SPOUSE FROM	ТО
	STATE(S)	FROM (MM/DD/YY	TO (MM/DD/YY)			SPOUSE FROM	ТО

Home Mortgage Interest

Home mortgage interest paid in US -*FORM 1098Mandatory	Points, if any	Home mortgage interest paid in INDIA – *Below details required	Mortgage insurance premiums paid, if any	Investment interest. Attach Form 4952
		Bank Name (Foreign)	Bank Address	
			(Foreign)	

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Note: Are you planning to purchase	e any House Property	n Tax Year 202ate	of America
Please Mention Yes Or No	Yes	No	

	CHARITY CONTRIBUTIONS					
S.n o	Charitable Institution Name	Donated Amount	Property Donated	FMV of Property Donated	No. of trips driven and one way distance	
1						
2						
3						
Note	: 1) Cash Contribution more th	an \$ 250 receip	ts are Mandat	ory		

Note: 1) Cash Contribution more than \$ 250 receipts are Mandatory
2) Non - Cash Contribution more than \$ 500 receipts are Mandatory

HEALTH INSURANCE:

Are you and your dependents covered under Health Coverage as per Federal laws??? Mandatory	yes
If not so, please specify who are not covered and for how many months	
IF you/your spouse resident of MA state, Covered by Massachusetts Health Insurance. Please provide F0rm 1099-HC.	

INVESTMENTS – SALE & PURCHASE OF STOCKS

For stocks you will receive 1099-B form from vendors like Robinhood, Etrade etc., If the stocks were given by your employer you will receive a supplemental document and you need to submit it also.



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Purchase Date	Description of Stock	Qty	Rate per Unit	Total =Qty*Rate	Sale Date	Description of the Stock	Qty	Rate per Unit	Total= Qty*Rat e

Note: If you have more than 10 transactions, Please send us the sale and purchase details in an Excel sheet with the columns listed above.

Other Deductions – Adjustments to Income				
Particulars	Taxpayer	Spouse		
Educator expenses – only for Teaching profession (\$ 250)				
Health savings account Contribution				
Penalty on early withdrawal of saving				
Contribution towards Traditional IRA for 2020				
Student loan interest deduction – Provide Form 1098 E				
Tuition & Fees Provide Form 1098-T				
Gambling Losses				

FOR FBAR/FATCA

	Tax Payer(No)	Spouse (No)
Did you have more than \$10,000 in your Foreign Accounts at any time	No	
during the Tax Year 2020		
Did you have more than \$50,000 in your Foreign Accounts at any time	No	
during the		
Tax Year 2020		



Note: Are you pla	anning to pu	chase any House	Property in	า Tax Year	2021 In United	d States Of	⁻ America
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Please Mention Yes Or No Yes No

\$50,000 at any time during the tax year 2020.

UPLOAD /EMAIL THE FOLLOWING DOCUMENTS ALONG WITH THE THIS TAX ORGANISER

WITH THE THIS TAX ORGANISER
Duly Filled TY-2020 Tax Organizer
W-2's:Wages/salaries from All employers – Upload Documents
1099-INT &1099-DIV: Interest & Dividends for All Accounts
1099-B: Sales of Securities, Mutual Funds, etc.
Year-End: Investment statements, Mutual Fund supplemental information
1099-R: Income from Pension, IRAs and Annuities
1099-G: Unemployment Compensation/state income tax refund
K-1:Partnerships,Trusts,Estates and S-Corporations
Last Paystubs of the year from ALL Employers
1099-SSA/ 1099-RRB: Social Security and Railroad Retirement benefits
Scholarships, Fellowships and Grants Form 1042 S
Foreign Tax certificate (if you made any income from foreign country during 2020)
Disability and Sick Pay
Gambling Winnings
Form W-2G – Income from Gambling
Prizes and Awards
Rental Income (if any) INDIA or USA
Alimony Received (if any)



Note: Are you planning to purchase any House Property in Tax Year 2021 In United States Of America					
Please Mention Yes Or No	Yes	No			
Education Loan Interes	st Certificate (India) (From 01 st Ja	an To			
Form-1099HC-(Details residing in MA)	Required From Tax Payer who is	s			
For New ITIN Or Renew Last page is required)	wal ITIN (Passport and VISA First	t and			

S. No	Friend(s) Name	Friends E-mail ID	Contact Number
1			
2			
3			
4			
5			
6			

Feel Free to reach us at (212)-920-4151, (305)-359-3078

(Monday to Saturday 9:00 AM to 8:00 PM EST)

<u>Tax Preparation Fee for TY2020</u>				
Filing Status: Single MFJ MFS HOH QWDC				
Particulars	Fee(\$)			
Federal – Standard Return (Form 1040)	\$ 19.99			



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	\$ 34.99
Federal – Non Resident Tax Return (Form 1040NR)	\$ 59.99
Federal – ITIN Case (Paper filing)- Form 1040	\$ 89.99
Federal – Non Resident Spouse Election (Paper	\$ 119.99
Filing) (6013G & H)	
Federal – Schedule C, E & 1099 Misc	\$ 119.99
FBAR Processing	\$29.99
For State Rental Credit Planning/OSTC Credit	\$19.99
Planning	
City Return (KY, MI, NY, OH, PA) / County Return	\$ 19.99 each city
Stock Transaction	\$ 10 Per Page
FATCA Processing - Form 1040	\$29.99
Tax Representation (Unlimited (Up to 8 Succeeding	*Free*
Years)	

- In case of any audit taxpayer need to furnish the documents as per IRS guidelines to substantiate the claim made on the tax return.
- Claim only those expenses that you have incurred while working at client location and which is
 necessary expenditure to work at client locations, not lavish by nature but should be supported by
 proper documentary evidence.

Thank you for completing this form and Please upload or email your w2 and other income related statements to prepare your taxes accurately.

Looking for your Business & Support!



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Please Mention Yes Or No	Yes	No

Write to us at: contact@gtaxfile.comor call us at (212)-920-4151, (305)-359-3078