**PERSONAL INFORMATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Particulars** | **Primary Taxpayer** | **Spouse** | **Dependent 1 (Child1)** | **Dependent 2****(Child -2)** | **Dependent 3****(Other dependent person)** |
| **FIRST NAME (PER SSN/ITIN)** | **Sandeep** | **Sri Sweetha** |  |  |  |
| **MIDDLE NAME (PER SSN/ITIN)** |  |  |  |  |  |
| **LAST NAME (PER SSN/ITIN)** | **Edpuganti** | **Jammalamudi** |  |  |  |
| **SSN/ITIN NUMBER** | **618-87-0526** | ITIN: 952-92-1554 |  |  |  |
| **DATE OF BIRTH (MM/DD/YY)** | **07/06/1986** | **04/22/1993** |  |  |  |
| **RELATIONSHIP WITH PRIMARY TAXPAYER** |  | **Wife** |  |  |  |
| **OCCUPATION** | **Software Developer** |  |  |  |  |
| **CURRENT ADDRESS** | **6827 S IVY STApt 107Englewood, CO 80112** | **6827 S IVY STApt 107EnglewoodCO 80112** |  |  |  |
| **CELL NUMBER** | **510-358-0093** |  |  |  |  |
| **ALTERNATIVE NUMBER (HOME)** |  |  |  |  |  |
| **WORK NUMBER (WITH EXTENSION)** |  |  |  |  |  |
| **EMAIL ADDRESS** | **Sandeep04546@gmail.com** |  |  |  |  |
| **FIRST PORT OF ENTRY DATE (MM/DD/YY)** |  |  |  |  |  |
| **VISA STATUS ON 31ST DEC 2020** | **H1B** | **H4** |  |  |  |
| **ANY CHANGE IN VISA STATUS DURING THE YEAR 2020 (IF YES PLS. SPECIFY)** |  |  |  |  |  |
| **MARITAL STATUS AS ON** **DEC 31,2020** | **Married** | **Married** |  |  |  |
| **DATE OF MARRIAGE (IF APPLICABLE)** | **11/13/2015** |  |  |  |  |
| **FILING STATUS (SINGLE/MARRIED/HEAD OF HOUSEHOLD)** | **Head of Household** |  |  |  |  |
| **NO. OF MONTHS STAYED IN US DURING 2020** | **12** | **12** |  |  |  |
| **WILL YOU STAY IN US FOR MORE THAN 183 DAYS IN YEAR 2021 – (YES OR NO)** | **Yes** | **Yes** |  |  |  |
| **IF ANY OTHER INFORMATION** |  |  |  |  |  |

**CHILD AND DEPENDENT CARE EXPENSES PROVIDER DETAILS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **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** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**BANK ACCOUNT DETAILS**

|  |
| --- |
| **BANK DETAILS FOR DIRECT DEPOSIT OF REFUND AMOUNT/AUTO WITHDRAWAL OF OWE AMOUNT(OPTIONAL)** |
| BANK NAME | Bank Of America |
| BANK ROUTING NUMBER (PAPER OR ELECTRONIC) | 121000358 |
| BANK ACCOUNT NUMBER | 000663434921 |
| CHECKING / SAVING ACCOUNT | CHECKING |
| ACCOUNT HOLDER NAME | Sandeep Edpuganti |

 **RESIDENCY DETAILS:**

|  |  |
| --- | --- |
| **STATES RESIDENCY DETAILS** | **STATES RESIDENCY DETAILS** |
| **TAXPAYER** | **SPOUSE** |
| **YEAR** | **STATE(S)** | **FROM****(MM/DD/YY)** | **TO****(MM/DD/YY)** | **YEAR** | **STATE(S)** | **FROM****(MM/DD/YY)** | **TO****(MM/DD/YY)** |
| **2020** | CO | FULL YEAR |  | **2020** | CO | FULL YEAR |  |
| **2019** | CO | FULL YEAR |  | **2019** | CO | FULL YEAR |  |
| **2018** | CO | FULL YEAR |  | **2018** | CO | FULL YEAR |  |

**Have u received any Stimulus Payment in TY 2020-If Yes, Please Mention the amount of Payment Received in TY 2020-$**

**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)** |  |
|  |  |  |  |  |

**Note**: Are you planning to purchase any House Property in Tax Year 2021 In United States Of America

Please Mention Yes Or No Yes

Please Mention Yes Or No Yes No