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.

Submission Identification Number (SID)

Taxpayer's name	Social security number
SRINIVAS REDDY VANCHA	356-55-8911
Spouse's name	Spouse's social security number
PREETHI ENUKONDA	881-13-5666
Part I Tax Return Information – Tax Year Ending December 31, 2020 (Enter	er year you are authorizing.)
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	1 135,034.
2 Total tax	2 14,831.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	. 3 8,481.
4 Amount you want refunded to you	4
5 Amount you owe	. 5 6,435.
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL	TAXES		to enter or generate my PIN	F
				ERO firm name		1

5	8	9	1	1	
Ent dor	er fiv n't er	/e di nter a	gits, all ze	but ros	as my

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC ERO firm name

to enter or	generate	my	PIN
-------------	----------	----	-----

Date

5 3 6 6 6 as mv Enter five digits, but don't enter all zeros

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature F	Date 🖡								
Practitioner PIN Method Returns Only—continu	e bel	ow							
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		8 nter a		9	89)

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >	O's signature ► Date ►							
Don't	ERO Must Retain This Form — Se Submit This Form to the IRS Unless							
For Demonstral, Deduction Act Nation	a a success these wells and the attenue the sec		Farm 8870 (Day, 01 0001)					

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 04/16/21 PRO

E 1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) urn	20	20	OMB No. 1545	-0074	IRS Us	e Only	—Do not v	write or staple	e in this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly unchecked the MFS box, enter the n son is a child but not your dependent	ame of y	-	separately ouse. If you	. ,				,		, 0	dow(er) (QW) he qualifying
Your first name	and m	iddle initial	Last na	me							Your so	cial securi	ity number
SRINIVAS	S REI	DDY	VANC	CHA							356-	55-891	1
lf joint return, s	pouse's	s first name and middle initial	Last na	me							Spouse	's social se	ecurity number
PREETHI			ENUK	ONDA							881-	13-566	56
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.				A	pt. no.		Preside	ential Election	ion Campaign
15407 NH	E 13'	TH PL							407			here if you	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces be	low.	Sta	ate	ZIP co	de				ntly, want \$3 . Checking a
BELLEVU	C					W	A	980	07		0	low will not	0
Foreign country	/ name		F	oreign p	rovince/sta	te/coun	ty	Foreig	n postal (code	your tax or refund.		
												You	Spouse
At any time du	ring 20	020, did you receive, sell, send, excl	nange, c	or otherv	vise acqui	re any	financial intere	est in a	ny virtu	al cu	rrency?	Ves	X No
Standard Deduction	_	eone can claim:	•		•		a dependent า						
Age/Blindness	S You:	Were born before January 2, 1	956	Are b	lind S	pouse	: 🗌 Was bo	rn befo	re Janu	ary 2	2, 1956	🗌 ls b	olind
Dependents	s (see	instructions):		(2)	Social secu	rity	(3) Relationsh	nip	(4) 🖌	/ if q	ualifies fo	or (see instru	uctions):
If more		irst name Last name			number		to you		Child			1	ther dependents
than four	PRA	DYUN REDDY VANCHA		957-91-5783 Son								X	
dependents, see instructions	SHR	IYAN REDDY VANCHA		957	-91-57	21	Son				X		X
and check	5												
here 🕨 🗌													
	1	Wages, salaries, tips, etc. Attach F	orm(s)	N-2 .	<u>.</u>						. 1	1	44,944.
Attach	2 a	Tax-exempt interest	2a			bΤ	axable interes	t.			. 2k)	
Sch. B if required.	3a	Qualified dividends	3a			b	Drdinary divide	nds .			. 3k)	
	4a	IRA distributions	4a			bΤ	axable amoun	t			. 4k)	
	5a	Pensions and annuities	5a			bΤ	axable amoun	t			. 5k)	
Standard	6a	Social security benefits	6a			bΤ	axable amoun	t			. 6k)	
 Deduction for – Single or 	7	Capital gain or (loss). Attach Sche	dule D if	ⁱ require	d. If not re	quired	l, check here				7		
Married filing	8	Other income from Schedule 1, lin	e9.								. 8		-9,610.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is yo	our total ir	ncome					▶ 9	1	35,334.
Married filing	10	Adjustments to income:											
Jointly or Qualifying	а	From Schedule 1, line 22					10	а					
widow(er), \$24,800	b	Charitable contributions if you take	the star	ndard de	duction. S	ee inst	ructions 10	b		30	0.		
Head of	С	Add lines 10a and 10b. These are	your tot	al adjus	stments to	o inco	me				▶ 10		300.
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusteo	d gross in	come					► <u>11</u>	1 1	35,034.
If you checked any box under	12	Standard deduction or itemized	deduct	i ons (fro	m Schedu	ule A)					. 12	2	24,800.
any box under Standard	13	Qualified business income deduct	ion. Atta	ch Forn	n 8995 or	Form 8	3995-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. lf :	zero or les	s, ente	er-0				. 15	<u>; 1</u>	10,234.

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	2 3			16	15,831.
	17	Amount from Schedule 2, lin	ie3						17	
	18	Add lines 16 and 17							18	15,831.
	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	14,831.
	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	14,831.
	25	Federal income tax withheld	from:							
	а	Form(s) W-2				25	a 8	3,481		
	b	Form(s) 1099				25	b			
	с	Other forms (see instructions	s)			25	c			
	d	Add lines 25a through 25c							25d	8,481.
• If you have a	26	2020 estimated tax payment	ts and amount a	pplied from 20)19 return				26	
qualifying child,	27	Earned income credit (EIC)			. Nọ .	27	,			
attach Sch. EIC.	28	Additional child tax credit. A	ttach Schedule	8812		28	3			
nontaxable combat pay,	29	American opportunity credit	from Form 8863	8, line 8		29				
see instructions.	30	Recovery rebate credit. See	instructions .			30)			
	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 refu	ndable o	credits .	🕨	32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				🕨	33	8,481.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the am	iount yo	u overpaid		34	
neiuliu	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attached, c	heck he	ere	. 🕨 🗌	35a	
Direct deposit?	►b	Routing number X X X	X X X X	XX	► c Type:	Che	cking	Savings		
See instructions.	►d	Account number X X X	X X X X	X X X X	x x x x	X X	X	-		
	36	Amount of line 34 you want a	applied to your	2021 estimate	ed tax I	> 36	;			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount vou owe	now				37	6,435.
You Owe				-						
For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for 2020. See Schedule 3, line 12e, and its instructions for details.								
how to pay, see instructions.	38	Estimated tax penalty (see ir	nstructions) .			38	3	85.		
Third Party	Do	you want to allow another					,			
Designee		structions						omplete	below.	🗙 No
		signee's		Phone				sonal iden		
		me 🕨		no. 🕨				iber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com								
Here		· · ·	piete. Declaration (1		n al inornati	1		
	YO	ur signature		Date	Your occupatio	n				nt you an Identity IN. enter it here
Joint return?					IT EMPLC	YEE		(se	e inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occu			lf ti	ne IRS sei	nt your spouse an
Keep a copy for your records.			-							ection PIN, enter it here
your records.					IT EMPLC)YEE		(se	e inst.) 🕨	
		one no.		Email address						
Paid		eparer's name	Preparer's signat			Dat		PTIN		Check if:
Preparer	SYAM		SYAM PRIYA	RAM SAGAR	GUPTA TALL	AM 04	/27/2021		32703	Self-employed
Use Only		m's name 🕨 GLOBAL TAX						Ph	one no. (678)965-9522
	Fir	m's address 🕨 2530 Pebb	le Creek L	n Cummin	g GA 3004	1		Firi	n's EIN ▶	30-1017196
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	RI	EV 04/16/21 PR	0		Form 1040 (2020)

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

BAA

SCHEDULE	1
(Form 1040)	

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

;	ial security number
	Attachment Sequence No. 01
	2020

			-		Ocquei
Name(s) shown on	Form 1040, 104	0-SR, or 1040	0-NR	Your soci	al secu
SRINIVAS RED	DY VANCHA &	PREETHI	ENUKONDA	356-55	-8911

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2 a	Alimony received	2 a	
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	-9,610.
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	0 (10
Par	line 8	9	-9,610.
10		10	
11	Certain business expenses of reservists, performing artists, and fee-basis government		
••	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		
Eor Do	on Form 1040, 1040-SR, or 1040-NR, line 10a	22	le 1 (Form 1040) 2020
		Scheuu	(i oini 1040) 2020

		Supplemental Income and Loss													OMB No. 1545				
(Form 1	040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)														20			
	ent of the Treasury	► Attach to Form 1040, 1040-SR, 1040-NR, or 1041. ► Go to www.irs.gov/ScheduleE for instructions and the latest information													Attachment				
	Revenue Service (99)	► Go to www.irs.gov/ScheduleE for instructions and the latest information.												Sequence No. 13 al security number					
													-	er					
SRINIVAS REDDY VANCHA & PREETHI ENUKONDA 356-55 Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal states and Royalties																			
Part						individual, rep	-		-				- .	•		, use			
	l you make any																		
	Yes," did you o																		
<u>1</u> a	Physical addr											•		• 🗆					
A	DILSUKHNA							/											
B		UAIC II		ICADAD I	BEANO		5000	00											
	Type of Pro	operty 2 For each rental real estate property listed Fair Rental Personal												Use					
		(from list below) above, report the number of fa						al and		0	Days		Days	5	Q	βJΛ			
Α	3	personal use da					o file a	oox only is a	Α		185			0	[
В				qualified j	joint ven	nture. See ins	tructio	ns.	В						[
С									С						[
Туре с	of Property:																		
1 Sing	le Family Resid	dence	3	Vacation	/Short-1	Term Rental	5 La	nd		7 Self-	Rental								
2 Mult	i-Family Reside	Family Residence 4 Commercial 6 Royalties 8 Other (describe)																	
Incom	e:					Properties:			Α		В				С				
3	Rents received						3			500.									
4	Royalties rece	ived .					4												
Expen																			
5	Advertising .						5												
6	Auto and trave	•		,			6												
7	Cleaning and r						7			750.									
8	Commissions.						8												
9	Insurance						9												
10	Legal and othe						10												
11	Management f						11			680.									
12	Mortgage inter	-			-		12		6	600									
13 14	Other interest. Repairs						13			600. 100.									
14	Supplies						14			980.									
16	-						16			200.									
17	Utilities						17												
18	Depreciation e						18												
19	Other (list)	, and a second sec					19												
20	Total expense	s. Add I					20		10,	110.									
21	Subtract line 2			0			-												
21	result is a (loss																		
	file Form 6198					•	21		-9,	610.									
22	Deductible rer	ntal real	esta	te loss aft	er limita	ation, if any,													
	on Form 8582	(see in	struc	tions) .			22	(-9,6	510.)	()	(
23a	Total of all am	ounts re	eport	ed on line	3 for all	l rental prope	erties			23a		5	00.						
b	Total of all am	ounts re	eport	ed on line	4 for all	l royalty prop	oerties			23b									
С	Total of all am									23c									
d		Il amounts reported on line 18 for all properties																	
е	Total of all am									23e	1	0,1							
24	Income. Add											•	24						
25	Losses. Add ro	oyalty los	sses f	from line 21	l and rer	ntal real estate	e losse	s from li	ne 22. E	nter tota	al losses here	э.	25	(9,6	610.			
26	Total rental re																		
	here. If Parts											on			~	C10			
	Schedule 1 (Fo									line 41	on page 2 -9,61		26			,610.			
For Pa	perwork Reduct	ion Act	NOTIC	e, see the	separate	e instructions	i	_	NPA		-9,0I	υ.	Sch	nedule E	(Form 1	040) 2020			

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2020

_	8867	Paid Preparer's Due Diligence Checklist Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),	OMB No. 1545-007					
Form		2020						
	ent of the Treasury Revenue Service	tatus P R, or 1040-SS. ti on.	Attachment Sequence No. 70					
Тахрауе	ication n	umber						
		VANCHA & PREETHI ENUKONDA	356-55-8	911				
	eparer's name and I							
		I SAGAR GUPTA TALLAM	P0208270	3				
Part		gence Requirements						
		propriate box for the credit(s) and/or HOH filing status claimed on the return ned (check all that apply).		the rela		arts I–V HOH		
1		blete the return based on information for tax year 2020 provided by the tained by you?	taxpayer or	Yes	No	N/A		
2	worksheets for AOTC workshe	claimed on the return, did you complete the applicable EIC and/or CTC und in the Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS instructions set found in the Form 8863 instructions, or your own worksheet(s) that provid and all related forms and schedules for each credit claimed?	s, and/or the					
3	Did you satisfy the following.	<i>i</i> the knowledge requirement? To meet the knowledge requirement, you mus		X				
	determine th	taxpayer, ask questions, and contemporaneously document the taxpayer's r at the taxpayer is eligible to claim the credit(s) and/or HOH filing status.						
		mation to determine that the taxpayer is eligible to claim the credit(s) and/configure the amount(s) of any credit(s)		X				
4	information rea	nation provided by the taxpayer or a third party for use in preparing th asonably known to you, appear to be incorrect, incomplete, or inconsisten ons 4a and 4b. If " No, " go to question 5.)	t? (If "Yes,"		×			
а	Did you make	reasonable inquiries to determine the correct, complete, and consistent inforr	nation? .					
b	you asked, wh	mporaneously document your inquiries? (Documentation should include the norm you asked, when you asked, the information that was provided, and the don your preparation of the return.)	e impact the					
5	Did you satisfy keep a copy applicable wor 8867 and any	the record retention requirement? To meet the record retention requirement of your documentation referenced in 4b, a copy of this Form 8867, a c ksheet(s), a record of how, when, and from whom the information used to p applicable worksheet(s) was obtained, and a copy of any document(s) pro- you relied on to determine eligibility for the credit(s) and/or HOH filing status	nt, you must copy of any repare Form vided by the					
	the amount(s)			X				
	List those doc	uments provided by the taxpayer, if any, that you relied on:						
6	credit(s) and/c return is select	e taxpayer whether he/she could provide documentation to substantiate elig or HOH filing status and the amount(s) of any credit(s) claimed on the retu- red for audit?	urn if his/her	X				
7		e taxpayer if any of these credits were disallowed or reduced in a previous ye	ar?	×				
		e disallowed or reduced, go to question 7a; if not, go to question 8.)						
а		ete the required recertification Form 8862?						
8		is reporting self-employment income, did you ask questions to prepare a cule C (Form 1040)?						
					00/			

For Paperwork Reduction Act Notice, see separate instructions.

REV 04/16/21 PRO

Form **8867** (2020)

Form 8	867 (2020)			Page 2
Part	II 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
	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 X	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			 Part \	
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the quituition and related expenses for the claimed AOTC?	alified	Yes	No
Part			o Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the ta	-	Yes	No
Part	and provided more than half of the cost of keeping up a home for the year for a qualifying person? Eligibility Certification			
rart	 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: A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's response. 			-
	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	ny 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.			
	 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 	's aliaih	vility for	the
	credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).	-	-	
	4. A record of how, when, and from whom the information used to prepare this form and the applica obtained.			
	5. 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	re 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

15	Do you certify	that	all o	f the	ans	wers	on	this	Forn	n 88	367	are,	to tl	he b	oest o	of yo	our	kno	wlee	dge,	tru	e, (cori	rect	t, a	nd	Yes		No
	complete?																			•							×		
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