E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

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

| Filing Status Check only one box. | If yo | Single Married filing jointly uchecked the MFS box, enter the son is a child but not your dependent | name of | | | | | | | | | | |
|---|----------|---|-------------|------------------------------|------------|----------------|---------|------------------|------------|--|------------------------------|--|--|
| Your first name | and m | iddle initial | Last na | ıme | | | | | Your s | Your social security number | | | |
| JEWEL E | LIAS | | CRAS | STA | | | | | 396- | 396-83-4925 | | | |
| If joint return, s | pouse's | s first name and middle initial | Last na | ıme | | | | | Spouse | 's social se | curity number | | |
| KENRICK | REU: | BEN | MASC | CARENHAS | | | | | 720- | 720-35-5144 | | | |
| Home address | (numbe | er and street). If you have a P.O. box, se | e instructi | ons. | | | | Apt. no. | Preside | ential Electi | on Campaign | | |
| 375 CRO | VOOW | ER WAY | | | | | | | | here if you, | • | | |
| City, town, or p | ost offi | ce. If you have a foreign address, also c | omplete s | paces below. | Sta | nte | ZIP | code | | | ntly, want \$3 Checking a | | |
| LEWIS C | ENTE | R | | | 0 | H | 43 | 3035 | | to go to this fund. Checking a box below will not change your tax or refund. You Spouse | | | |
| Foreign country | y name | | | Foreign province/stat | e/coun | ty | For | eign postal code | your ta | | | | |
| At any time du | ıring 20 | 020, did you receive, sell, send, exc | change, d | or otherwise acqui | e any | financial inte | rest ir | n any virtual c | urrency? | ☐ Yes | ⊠ No | | |
| Standard Deduction | _ | eone can claim: | | • | | • | | | | | | | |
| Age/Blindness | s You: | Were born before January 2, | 1956 Г | Are blind S | pouse | : Was b | orn b | efore January | 2, 1956 | ☐ Is b | lind | | |
| Dependents | | | _ | (2) Social secui | | (3) Relation | | | | or (see instru | ictions): | | |
| If more | | irst name Last name | | number to you | | | JP | Child tax | | 1 | her dependents | | |
| than four | JEN | JELLE MASCARENHAS | | 232-59-6883 Daugh | | | r | × | | | | | |
| dependents, | | | | | | | | | | | | | |
| see instruction and check | s — | | | | | | | | | | | | |
| here ► | | | | | | | | | | | | | |
| | 1 | Wages, salaries, tips, etc. Attach | Form(s) | W-2 | | | | | . 1 | | 75,885. | | |
| Attach | 2a | Tax-exempt interest | 2a | | b 1 | axable intere | st | | . 21 | o | | | |
| Sch. B if required. | 3a | Qualified dividends | 3a | 162. | b (| Ordinary divid | ends | | . 31 | o | 162. | | |
| | 4a | IRA distributions | 4a | | b٦ | Taxable amount | | | . 41 | o | | | |
| | 5a | Pensions and annuities | 5a | | b٦ | axable amou | nt . | | . 51 | o | | | |
| Standard | 6a | Social security benefits | 6a | | b 7 | axable amou | nt . | | . 61 | o | | | |
| Deduction for— Single or | 7 | Capital gain or (loss). Attach School | edule D i | f required. If not re | quirec | l, check here | | • | □ 7 | • | 20,485. | | |
| Married filing | 8 | Other income from Schedule 1, li | ne 9 . | | | | | | . 8 | | -7,491. | | |
| separately, \$12,400 | 9 | Add lines 1, 2b, 3b, 4b, 5b, 6b, 7 | , and 8. T | This is your total in | come | | | | ▶ 9 |) | 89,041. | | |
| Married filing | 10 | Adjustments to income: | | | | | | | | | | | |
| jointly or Qualifying | а | From Schedule 1, line 22 | | | | 1 | 0a | | | | | | |
| widow(er), \$24,800 | b | Charitable contributions if you take the standard deduction. See instructions 10b 300. | | | | | | | 00. | | | | |
| Head of | С | Add lines 10a and 10b. These are your total adjustments to income | | | | | | ▶ 10 | | 300. | | | |
| household, \$18,650 | 11 | Subtract line 10c from line 9. This | s is your a | adjusted gross in | come | | | | ▶ 1 | _ | 88,741. | | |
| If you checked any box under | 12 | Standard deduction or itemized | d deduct | ions (from Schedu | ıle A) | | | | . 12 | | 24,800. | | |
| Standard | 13 | Qualified business income deduc | tion. Atta | ach Form 8995 or I | Form 8 | 3995-A . | | | . 1 | 3 | | | |
| Deduction, see instructions. | 14 | Add lines 12 and 13 | | | | | | | . 14 | | 24,800. | | |
| | 15 | Taxable income. Subtract line 1- | 4 from lin | ne 11. If zero or les | s, ente | er-0 | | | . 19 | 5 | 63,941. | | |

| Form 1040 (2020 |)) | | | | | | | | Page 2 |
|---|------------|---|---------------------|--------------------|----------------------------|--------------------|--------------|---------------------------|---------------------------|
| | 16 | Tax (see instructions). Check | if any from Form | n(s): 1 881 | 4 2 4972 | 3 🗌 | | 16 | 7,258. |
| | 17 | Amount from Schedule 2, lin | | | | | | 17 | |
| | 18 | Add lines 16 and 17 | | | | | | 18 | 7,258. |
| | 19 | Child tax credit or credit for | other dependen | ts | | | | 19 | 2,000. |
| | 20 | Amount from Schedule 3, lin | ne 7 | | | | | 20 | |
| | 21 | Add lines 19 and 20 | | | | | | 21 | 2,000. |
| | 22 | Subtract line 21 from line 18 | B. If zero or less, | enter -0 | | | | 22 | 5,258. |
| | 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 | 5,258. |
| | 25 | Federal income tax withheld | • | | | | | | -, |
| | а | Form(s) W-2 | | | | 25a | L2,069 | | |
| | b | Form(s) 1099 | | | | 25b | | | |
| | С | Other forms (see instruction | | | | 25c | | | |
| | d | Add lines 25a through 25c | , | | | | | 25d | 12,069. |
| | 26 | 2020 estimated tax paymen | | | | | | 26 | |
| 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 | 500 | \dashv | |
| 3cc manuchons. | 31 | Amount from Schedule 3, lir | | | | 31 | 300 | 1 | |
| | 32 | Add lines 27 through 31. Th | 32 | 500. | | | | | |
| | 33 | | | 12,569. | | | | | |
| | 34 | Add lines 25d, 26, and 32. These are your total payments | | | | | | | 7,311. |
| Refund | 35a | · · · · · · · · · · · · · · · · · · · | | | | | | 34 35a | 7,311. |
| Direct deposit? | b b | | | | | | | | 7,311. |
| See instructions. | ►d | | | | | | | | |
| | 36 | Amount of line 34 you want applied to your 2021 estimated tax 36 | | | | | | | |
| A 100 0 1 110 t | | | | | | | | 37 | |
| Amount You Owe | 37 | Subtract line 33 from line 24 | | - | | | | | |
| For details on | | Note: Schedule H and Sch | · | | | | | | |
| how to pay, see | 20 | 2020. See Schedule 3, line 12e, and its instructions for details. Estimated tax penalty (see instructions) | | | | | | | |
| instructions. | 38 | | | | | | | | |
| Third Party Designee | | you want to allow another | • | | rn with the IRS? | | Complete | helow | × No |
| Designee | | signee's | | Phone | | | ersonal iden | | M NO |
| | | me > | | no. | | | ımber (PIN) | | |
| Sign | Un | der penalties of perjury, I declare | that I have examine | ed this return and | d accompanying sch | edules and state | ments, and | to the bes | st of my knowledge and |
| Here | bel | ief, they are true, correct, and com | plete. Declaration | of preparer (other | r than taxpayer) is ba | ased on all inform | ation of whi | ch prepare | er has any knowledge. |
| Here | Yo | ur signature | | Date | Your occupation | | | | nt you an Identity |
| | N | | | | 3 0 0 7 0 0 3 3 7 0 | PPOFFE | | otection Pl e inst.) ▶ | IN, enter it here |
| Joint return? See instructions. | Sp. | ouse's signature. If a joint return, | hath must sign | Date | ASSISTANT Spouse's occupat | | | | nt your spouse an |
| Keep a copy for | Sp | ouse's signature. If a joint return, | both must sign. | Date | Spouse's occupat | IOH | | | ection PIN, enter it here |
| your records. | | | | | TEST ENGI | NEER | (se | e inst.) 🕨 | |
| | Ph | one no. | | Email address | | | | | |
| Delet | Pre | eparer's name | Preparer's signat | | | Date | PTIN | | Check if: |
| Paid | RV | SSMANIKUMARAPPANA | RVSSMANIK | UMARAPPAN | JA | 04/14/202 | 1 P0209 | 90332 | Self-employed |
| Preparer | Fir | m's name ▶ GLOBAL TA | XES LLC | | | | | | 646)727-7157 |
| Use Only | | m's address ▶ 2530 Pebb | | n Cummin | g GA 30041 | | | m's EIN ▶ | |
| Go to www irs an | | n1040 for instructions and the late | | | BAA | REV 03/13/21 F | | | Form 1040 (2020) |
| | | | | | DAA | 30/10/211 | | | (2020) |

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form1040 for instructions and the latest information. Sequence No. 01

Your social security number

396-83-4925

JEWEL ELIAS CRASTA & KENRICK REUBEN MASCARENHAS **Additional Income** Part I 1 Taxable refunds, credits, or offsets of state and local income taxes 1 2a **b** Date of original divorce or separation agreement (see instructions) 3 3 4 4 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 5 5 -7,491. 6 6 7 7 8 Other income. List type and amount 8 Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR. 9 9 -7,491. Adjustments to Income Part II 10 Educator expenses 10 Certain business expenses of reservists, performing artists, and fee-basis government 11 11 12 12 Moving expenses for members of the Armed Forces, Attach Form 3903 13 13 14 Deductible part of self-employment tax. Attach Schedule SE 14 15 Self-employed SEP, SIMPLE, and qualified plans 15 16 16 17 17 18a c Date of original divorce or separation agreement (see instructions) 19 19 IRA deduction 20 20 21 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

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, or 1040-NR.

▶ Go to www.irs.gov/ScheduleD for instructions and the latest information. ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Name(s) shown on return JEWEL ELIAS CRASTA & KENRICK REUBEN MASCARENHAS Your social security number 396-83-4925

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 482,604. 464,508. 2,389. 20,485. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 20,485. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15

Schedule D (Form 1040) 2020 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 20,485. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No. 12A

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Social security number or taxpayer identification number

396-83-4925

JEWEL ELIAS CRASTA & KENRICK REUBEN MASCARENHAS

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

| (C) Short-term transactions | not reported | to you on F | orm 1099-B | | | | |
|---|--|--------------------------------|-------------------------------------|---|--|--|--|
| 1 (a) Description of property | (b) Date acquired | (c) Date sold or | (d) Proceeds | (e) Cost or other basis. See the Note below | Adjustment, if If you enter an enter a co See the sep | (h) Gain or (loss). Subtract column (e | |
| (Example: 100 sh. XYZ Co.) | (Mo., day, yr.) | disposed of (Mo., day, yr.) | (sales price) (see instructions) | and see Column (e) in the separate instructions | (f) Code(s) from instructions | (g) Amount of adjustment | from column (d) and combine the result with column (g) |
| ROBINHOOD SECURITIES LLC | Various | 11/11/20 | 482,604. | 464,508. | W | 2,389. | 20,485. |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above is checked) or line 3 (if Box A) | al here and inc is checked), lir | lude on your ne 2 (if Box B | 482 604 | 464 508 | | 2 380 | 20 485 |

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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.

OMB No. 1545-0074

Attachment Sequence No. **13**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

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

Your social security number

| JEWE | | & KENRICK REUBEN MASCARE | | | | | | | -83-49 | | |
|--------------|--------------------------|---|---------|-----------|-----------|------------|---------------|-----------------|-------------|-------|----------|
| Part | Income or Loss | From Rental Real Estate and Ro | yaltie | s Not | e: If you | are in th | e business o | of renting | g personal | prope | ty, use |
| | Schedule C. See i | nstructions. If you are an individual, rep | ort far | m rental | income | or loss f | rom Form 48 | 335 on p | age 2, line | 40. | |
| A Did | d you make any paymer | nts in 2020 that would require you to | file F | orm(s) | 1099? S | ee inst | ructions . | | 🗆 | Yes | X No |
| B If " | Yes," did you or will yo | ou file required Form(s) 1099? | | | | | | | 🗆 | Yes | ☐ No |
| 1a | Physical address of e | each property (street, city, state, ZIF | , code | e) | | | | | | | |
| Α | MADHAPUR HYDER | ABAD IN | | | | | | | | | |
| В | | | | | | | | | | | |
| С | | | | | | | | | | | |
| 1b | Type of Property | 2 For each rental real estate prop | | | | | Rental | | onal Use | | QJV |
| | (from list below) | above, report the number of fa personal use days. Check the if you meet the requirements to | | | | L | Days | Days | | | |
| <u>A</u> | 1 | if you meet the requirements to qualified joint venture. See inst | file a | as a | Α | | 260 | | 0 | | Ц |
| В | | quaimed joint venture. See inst | ructio | ns. | В | | | | | | <u> </u> |
| С | | | | | С | | | | | | |
| | of Property: | | | | | | | | | | |
| | gle Family Residence | 3 Vacation/Short-Term Rental | | | | 7 Self- | | | | | |
| | ti-Family Residence | 4 Commercial | 6 Rc | oyalties | | 8 Othe | r (describe) | | | | |
| ncom | | Properties: | _ | - | Α | 202 | В | 5 | | С | |
| 3 | | | 3 | - | | 320. | | | | | |
| 4 | | | 4 | + | | | | | | | |
| Exper | | | _ | | | | | | | | |
| 5 | _ | nstructions) | 5 6 | | | | | | | | |
| 6 7 | • | ance | 7 | | 1 | 263. | | | | | |
| 8 | | | 8 | | | 203. | | | | | |
| 9 | | | 9 | | | | | | | | |
| 10 | | ssional fees | 10 | | | | | | | | |
| 11 | | | 11 | | | | | | | | |
| 12 | | d to banks, etc. (see instructions) | 12 | | | | | | | | |
| 13 | | | 13 | | | | | | | | |
| 14 | | | 14 | | 1 | 825. | | | | | |
| 15 | • | | 15 | | | 163. | | | | | |
| 16 | | | 16 | | | 103. | | | | | |
| 17 | | | 17 | | 2 | 560. | | | | | |
| 18 | | or depletion | 18 | | | 300. | | | | | |
| 19 | Other (list) ▶ | · | 19 | | | | | | | | |
| 20 | ` ′ | ines 5 through 19 | 20 | | 7, | 811. | | | | | |
| 21 | • | line 3 (rents) and/or 4 (royalties). If | | | | | | | | | |
| _ 1 | | nstructions to find out if you must | | | | | | | | | |
| | file Form 6198 | | 21 | | -7, | 491. | | | | | |
| 22 | Deductible rental real | estate loss after limitation, if any, | | | | | | | | | |
| | on Form 8582 (see ins | | 22 | (| 7,4 | 191.) | (| |)(| | <u> </u> |
| 23a | | eported on line 3 for all rental prope | rties | | | 23a | | 320 | 0. | | |
| 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 | | 7,81 | 1. | | |
| 24 | • | e amounts shown on line 21. Do no | | - | | | | | 24 | | |
| 25 | Losses. Add royalty los | sses from line 21 and rental real estate | losse | s from li | ne 22. E | inter tota | al losses her | e | 25 (| 7 | ,491. |
| 26 | | ate and royalty income or (loss). | | | | | | | | | |
| | | V, and line 40 on page 2 do not | | | | | | | | | |
| | Schedule 1 (Form 104 | 10), line 5. Otherwise, include this ar | noun | t in the | total on | line 41 | on page 2 | . 2 | 26 | _ | 7,491. |

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 Internal Revenue Service

▶ To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. ▶ Go to www.irs.gov/Form8867 for instructions and the latest information.

Taxpayer name(s) shown on return Taxpayer identification number JEWEL ELIAS CRASTA & KENRICK REUBEN MASCARENHAS 396-83-4925

| nter pre | eparer's name and PTIN | | | | |
|----------|--|--------------------------|----------|----|-----------------|
| RVSS | SMANIKUMARAPPANA P0209 | 0332 | 2 | | |
| Part | Due Diligence Requirements | | | | |
| | check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and combenefit(s) claimed (check all that apply). | • | the rela | | arts I-V HOH |
| 1 | Did you complete the return based on information for tax year 2020 provided by the taxpayer | or | Yes | No | N/A |
| | reasonably obtained by you? | . [| X | | |
| 2 | If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/O worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS instructions, and/or AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the sa information, and all related forms and schedules for each credit claimed? | the me | × | | |
| 3 | Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both the following. | ı of | | | |
| | • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status. | s to | | | |
| | • Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH fill 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 return, information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Ye answer questions 4a and 4b. If "No," go to question 5.) | s," | | | |
| • | Did you make reasonable inquiries to determine the correct, complete, and consistent information? | _ | | × | |
| a | | | | | |
| b | Did you contemporaneously document your inquiries? (Documentation should include the question you asked, whom you asked, when you asked, the information that was provided, and the impact information had on your preparation of the return.) | the | | | |
| 5 | Did you satisfy the record retention requirement? To meet the record retention requirement, you meet a copy of your documentation referenced in 4b, a copy of this Form 8867, a copy of applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to fig the amount(s) of the credit(s) | any orm the ure | × | | |
| | List those documents provided by the taxpayer, if any, that you relied on: | _ | W. | | |
| 6 | Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/return is selected for audit? | | × | | |
| 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.) | | × | | |
| 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 complete a | - | | | |
| - | correct Schedule C (Form 1040)? | | | | |

| orm 8 | 867 (2020) | | | Page 2 |
|-------|--|------------|-----------|---------|
| Part | Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go | to Part | III.) | |
| 9a | | Yes | No | N/A |
| | 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.) | | | |
| 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? | | | |
| • | Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of | | | |
| С | more than one person (tiebreaker rules)? | | | |
| Part | | claim C | TC, A | CTC, |
| | or ODC, go to Part IV.) | | | |
| 10 | Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is | Yes | No | N/A |
| | a citizen, national, or resident of the United States? | × | | |
| 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? | | | |
| 10 | · | | | |
| 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? | × | | П |
| Part | | | Part \ | /.) |
| 13 | Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qu | alified | Yes | No |
| | tuition and related expenses for the claimed AOTC? | | | |
| Part | <u> </u> | | | |
| 14 | Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the ta | 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 | | | |
| rait | You will have complied with all due diligence requirements for claiming the applicable credit(s) a | nd/or H | OH fili | 20 |
| | status on the return of the taxpayer identified above if you: | iu/oi n | OH IIII | ig |
| | A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's response | nses on | the re | turn or |
| | 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 | list for a | ny app | licable |
| | credit(s) claimed and HOH filing status, if claimed; | | | |
| | 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 instru | 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 | r'e aliaih | ility for | the |
| | credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s). | s eligib | niity ioi | uie |
| | 4. A record of how, when, and from whom the information used to prepare this form and the applica | ble worl | ksheet(| s) was |
| | obtained. | | | |
| | 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 | for eac | ch failu | re to |
| | comply related to a claim of an applicable credit or HOH filing status. | | | |
| 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 |
| 13 | complete? | | × | |