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	vrite or staple	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	
Your first name	and m	iddle initial	Last na	me							Your so	cial securi	ty number
VIJAYKU	MAR		RANG	ANATI	HAN						011-	33-103	9
If joint return, s	pouse's	s first name and middle initial	Last na	me							Spouse	's social se	curity number
SHANTHA			NALL	APOTH	HULA						146-	45-377	5
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.				A	pt. no.		Preside	ential Electi	on Campaign
1800 EL	PAS	EO ST						1	702			here if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces be	low.	Sta	ite	ZIP co	de				ntly, want \$3 Checking a
HOSTON						T	Х	770	54		•	low will not	•
Foreign country	/ name		F	-oreign p	rovince/sta	te/coun	ty	Foreig	n postal	code	your ta	x or refund	
												You	Spouse
At any time du	ring 20	020, did you receive, sell, send, exch	nange, c	or otherv	vise acqui	re any	financial intere	est in a	ny virtu	al cu	rrency?	Yes	🗙 No
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur	n or you	were a	dual-statu	us alier							
Age/Blindness	S You:	Were born before January 2, 1	956 _	Are b	lind S	pouse	: 🗌 Was bo	rn befo	ore Janu	ary 2	2, 1956	ls b	lind
Dependent				(2) \$	Social secu	rity	(3) Relationsh	nip	• •			or (see instru	,
If more	<u> </u>	irst name Last name			number		to you		Child	_	redit	Credit for ot	her dependents
than four dependents,	VIS	SHRUTH VIJAYKUMAR		837	-99-61	.85	Son						
see instruction	s ——												
and check here ►													
			- ())									<u> </u>	
Attach	1	Wages, salaries, tips, etc. Attach F	11	N-2.	· · ·	• •		• •	• •	·	. 1		94,200.
Sch. B if	2a	'	2a				axable interes		• •	•	. 2t		
required.	<u>3a</u>		3a				Ordinary divide		• •	•	. 3t		
	4a		4a				axable amoun		• •	·	. 4k		
	5a		5a				axable amoun		• •	·	. 5t		
Standard Deduction for –	6a	···· · · · · · · · · ·	6a	·			axable amoun	τ	• •	· -	. 61		
Single or	7	Capital gain or (loss). Attach Scher		-				• •	• •				F 400
Married filing separately,	8	Other income from Schedule 1, lin						• •	• •	·	. 8		<u>-5,400.</u> 88,800.
\$12,400 • Married filing	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a		nis is yc	our total Ir	icome		• •	• •	•	▶ 9		00,000.
jointly or	10	Adjustments to income:					10						
Qualifying widow(er),	a ⊾				· · ·						_		
\$24,800	b	Charitable contributions if you take									▶ 10		
 Head of household, 	C	······································											00 000
\$18,650	11	Subtract line 10c from line 9. This is your adjusted gross income											88,800.
 If you checked any box under 	12	Qualified business income deduction		``		,							24,800.
Standard Deduction,	13 14	Add lines 12 and 13											21 800
see instructions.	14 15	Taxable income. Subtract line 14											<u>24,800.</u> 64,000.
	10	Taxable Income. Subtract life 14		C I I. II 4						•	. 10	·	4040

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

Form **1040** (2020)

Joint return? So FTWARE ENGINEER Protection (see inst.) See instructions. Keep a copy for your records. Spouse's signature. If a joint return, both must sign. Date Spouse's occupation (see inst.) Phone no. (440)990-6413 Email address VIJKUMR@GMAIL.COM Preparer's name Preparer's signature Date Date PTIN Preparer SYM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM Date PTIN Firm's name CLOBAL TAYES LLC Phone no. Phone no. Phone no.	Page 2			
18 Add lines 16 and 17 19 19 Child tax credit for ordeit for other dependents 19 20 Amount from Schedule 3, line 7 20 21 Add lines 19 and 20 21 22 Subtract line 21 from line 18. If zero or less, enter -0- 22 23 Other taxes, including self-employment tax, from Schedule 2, line 10 22 24 Add lines 22 and 23. This is your total tax ▶ 25 Federal income tax withheld from: 256 26 Other taxes, including self-employment tax, from Schedule 2, line 10 256 26 2020 estimated tax payments and amount applied from 2019 return 256 26 2020 estimated tax payments and amount applied from 2019 return 26 29 Anerican opportunity credit from Form 8883, line 8 29 29 American opportunity credit from form S880 is line 3 31 31 32 Add lines 251, 26, and 32. These are your total payments 33 32 Add lines 254, 26, and 32. These are your total payments 43 34 thine 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 36 36 Amount of line 34 you	16 7,288.			
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Joint return? Spouse's signature Date Your occupation If the IRS is Protection See instructions. Keep a copy for your records. Spouse's signature. If a joint return, both must sign. Date Spouse's occupation If the IRS is Identity Protection Phone no. (440)990-6413 Email address VIJKUMR@GMAIL.COM Preparer's name Preparer's signature Date Date SYM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM Op/09/2021 P02082703	eparer has any knowledge.			
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Paid Preparer SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 09/09/2021 P02082703				
Preparer	Check if:			
	03 Self-employed			
	ne no. (678)965-9522			
Use Only Intrastance Global TAkes Hic Protection Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN	IN ► 30-1017196			
Go to www.irs.gov/Form1040 for instructions and the latest information. BAA REV 07/28/21 PRO	Form 1040 (2020)			

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SCHEDULE	1
(Form 1040)	

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasur
Internal Revenue Service

► Attach to Form 1040, 1040-SR, or 1040-NR.

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

	<u>2</u> 02	U
	Attachment Sequence No.	01
-		

Name(s) shown	on Fo	rm 1040, 104	10-	SR, or 1040	-NR	
VIJAYKUMAR	RAN	GANATHAN	&	SHANTHA	NALLAPOTHULA	

Your social security number 011-33-1039

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2 a	Alimony received	2a	
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	-5,400.
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,		F 400
Par	line 8 . <th>9</th> <th>-5,400.</th>	9	-5,400.
		10	
10 11	Educator expenses	10	
••	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 on Form 1040, 1040-SR, or 1040-NR, line 10a	22	
For Pa			e 1 (Form 1040) 2020

	DULE E		OMB	No. 1545-0074													
(Form 1	040)	(From r	renta	l real estate, roy	alties, partners	hips, S	corpor	ations, e	estates,	trusts, REM	IICs, etc	s.) 🕥	2020				
Departme	ent of the Treasury			► Attac	ch to Form 104	0, 1040	-SR, 10	40-NR, c	or 1041.				Attachment				
	Revenue Service (99)			Go to www.irs.go	ov/ScheduleE f	or inst	ructions	and the	e latest	information		Sequ	ence No. 13				
Name(s)	shown on return											social securi					
_				& SHANTHA							-	-33-103	-				
Part				n Rental Real E		-		-			-						
				ctions. If you are a							-	-					
				2020 that would													
				required Form(· · 🗆	Yes 🗌 No				
<u>1a</u>				property (street, RABAD TELAN			,										
B	GANDHI NA	GAR HI		ABAD ILLAN	GANA IN S	0004	5										
1b	Type of Pro	perty	2	For each rental	real estate pro	norty l	istad		Fair	Rental	Perso	onal Use	• • •				
	(from list be		-	above, report th	ne number of fa	air rent	al and			Days		Days	QJV				
Α	3	,		above, report th personal use da if you meet the	ays. Check the requirements to	QJV b o file a	ox only s a	Α		365		0					
В				qualified joint ve	enture. See ins	tructio	ns.	В									
С								С									
Туре с	of Property:																
1 Sing	le Family Resid	dence	3	Vacation/Short	-Term Rental	5 La	nd		7 Self-	Rental							
	ti-Family Reside	ence	4	Commercial			yalties	1	8 Othe	r (describe)						
Incom	e:				Properties:			Α		E	3		С				
3						3			600.								
4		ived.				4											
Expen																	
5	-					5			80.								
6		-		ctions)		6			300.								
7	-					7											
8						8											
9 10						10											
11	-	-		al fees		11											
12				anks, etc. (see		12											
13		-				13		5	500.								
14						14			120.								
15						15											
16	Taxes					16											
17						17											
18	Depreciation e	xpense	or de	epletion		18											
19	Other (list) 🕨					19											
20	Total expenses	s. Add lir	nes 5	5 through 19 .		20		б,	000.								
21	Subtract line 2	0 from li	ine 3	(rents) and/or 4	4 (royalties). If												
				ctions to find ou				_									
						21		-5,	400.								
22				te loss after limi						1							
				tions)		22	(00.)	(<u> </u>)(
23a			-	ed on line 3 for a				• •	23a		600).					
b			-	ed on line 4 for a ed on line 12 for				• •	23b 23c			-					
c d			-	ed on line 12 for ed on line 18 for			• •	• •	23c 23d								
e u			-	ed on line 20 for			· · · ·	• •	23u 23e		6,000	,					
24			-	ounts shown on					200			24					
25				rom line 21 and r			-		nter tota	al losses her		25 (5,400.)				
26				nd royalty inco								· · ·	-,,				
20				d line 40 on pa													
				ne 5. Otherwise,								26	-5,400.				

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2020

_	Baid Preparer's Due Diligence Checklist	Paid Preparer's Due Diligence Checklist								
	Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC)) Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing S	and Status	2	02	0					
	Revenue Service Service Go to www.irs.gov/Form8867 for instructions and the latest information		Attach Seque	ence No.	70					
Тахрауе	er name(s) shown on return	Taxpayer identi	fication n	umber						
	AYKUMAR RANGANATHAN & SHANTHA NALLAPOTHULA	011-33-1	039							
	eparer's name and PTIN		_							
	M PRIYA RAM SAGAR GUPTA TALLAM	P0208270	3							
Part										
	e check the appropriate box for the credit(s) and/or HOH filing status claimed on the return									
	benefit(s) claimed (check all that apply).		AOTC		HOH					
1	Did you complete the return based on information for tax year 2020 provided by the reasonably obtained by you?		Yes X	No	N/A					
2	If credits are claimed on the return, did you complete the applicable EIC and/or CTC worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS instruction AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provide	is, and/or the								
	information, and all related forms and schedules for each credit claimed?		×							
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you mut the following.	st do both of								
	• Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.	responses to								
	• Review information to determine that the taxpayer is eligible to claim the credit(s) and/ 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 t information reasonably known to you, appear to be incorrect, incomplete, or inconsister answer questions 4a and 4b. If "No," go to question 5.)	nt? (If "Yes,"		×						
а	Did you make reasonable inquiries to determine the correct, complete, and consistent infor	mation? .								
b	Did you contemporaneously document your inquiries? (Documentation should include t	he questions								
	you asked, whom you asked, when you asked, the information that was provided, and the information had on your preparation of the return.)	ne impact the								
5	Did you satisfy the record retention requirement? To meet the record retention requirement keep a copy of your documentation referenced in 4b, a copy of this Form 8867, a applicable worksheet(s), a record of how, when, and from whom the information used to p	copy of any prepare Form								
	8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) pro taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing statute	s or to figure		_						
	the amount(s) of the credit(s)		×							
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate elig credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the ret return is selected for audit?	urn if his/her	×							
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous ye	ear?		×						
	(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 correct Schedule C (Form 1040)?	complete and								
				000						

For Paperwork Reduction Act Notice, see separate instructions.

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			
Dout	statement to the return?			
Part 13	Due Diligence Questions for Returns Claiming AOTC (If the return does not claim AOTC) Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qu	-	Yes	/.) No
10	tuition and related expenses for the claimed AOTC?			
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			
	 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() 	nses on	the ret	urn or
	 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; 			
	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.			
	2. 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 credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).	•	2	
	A record of how, when, and from whom the information used to prepare this form and the applica obtained.	ble wor	ksheet(s) was
	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	of t	he a	ansv	vers	on	this	For	m	886	7 ar	re, t	o th	e be	st o	f you	r kr	nowl	edg	je, 1	true	, cc	orre	ct,	ar	nd	Yes	No	
	complete?																												×		
																		REV 07	7/28/2	21 PR	0							Fo	orm 886	7 (2020))