

Filing Status [] Single [X] Married filing jointly [] Married filing separately (MFS) [] Head of household (HOH) [] Qualifying widow(er) (QW)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent

Personal information section including: Your first name and middle initial (ARUN KUMAR), Last name (MORA), Your social security number (286-81-3486), Spouse's social security number (977-94-4916), Home address (1624 MACALPINE CIRCLE), City (Morrisville), State (NC), ZIP code (27560).

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? [] Yes [X] No

Standard Deduction Someone can claim: [] You as a dependent [] Your spouse as a dependent [] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [] Were born before January 2, 1956 [] Are blind Spouse: [] Was born before January 2, 1956 [] Is blind

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents. Includes a checkbox for 'Dependents (see instructions):'.

Main income tax calculation table with 15 rows. Includes sections for 'Attach Sch. B if required' and 'Standard Deduction for—' with bullet points for filing status options. Total taxable income is 52,805.

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

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	5,944.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	5,944.
19	Child tax credit or credit 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	5,944.
23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	0.
24	Add lines 22 and 23. This is your total tax	24	5,944.
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	12,027.
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	12,027.
26	2020 estimated tax payments and amount applied from 2019 return	26	
27	Earned income credit (EIC)	27	
28	Additional child tax credit. Attach Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Recovery rebate credit. See instructions	30	
31	Amount from Schedule 3, line 13	31	
32	Add lines 27 through 31. These are your total other payments and refundable credits	32	
33	Add lines 25d, 26, and 32. These are your total payments	33	12,027.

• If you have a qualifying child, attach Sch. EIC.
• If you have nontaxable combat pay, see instructions.

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	6,083.
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	6,083.
b	Routing number 081000032		
c	Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number 355006749489		
36	Amount of line 34 you want applied to your 2021 estimated tax	36	

Amount You Owe

For details on how to pay, see instructions.

37	Subtract line 33 from line 24. This is the amount you owe now	37	
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.			
38	Estimated tax penalty (see instructions)	38	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. No

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
Phone no. (816) 745-6197	Email address	ARUNKUMARMORA@GMAIL.COM	

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if:
SYAM PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA RAM SAGAR GUPTA TALLAM	09/14/2021	P02082703	<input type="checkbox"/> Self-employed
Firm's name	Firm's address			Phone no.
GLOBAL TAXES LLC	2530 Pebble Creek Ln Cumming GA 30041			(678) 965-9522
Firm's EIN				30-1017196

Application for IRS Individual Taxpayer Identification Number

OMB No. 1545-0074

► For use by individuals who are not U.S. citizens or permanent residents.
► See separate instructions.

An IRS individual taxpayer identification number (ITIN) is for U.S. federal tax purposes only.

Application type (check one box):
 Apply for a new ITIN
 Renew an existing ITIN

Before you begin:

• Don't submit this form if you have, or are eligible to get, a U.S. social security number (SSN).

Reason you're submitting Form W-7. Read the instructions for the box you check. **Caution:** If you check box **b, c, d, e, f,** or **g,** you must file a U.S. federal tax return with Form W-7 unless you meet one of the exceptions (see instructions).

- a Nonresident alien required to get an ITIN to claim tax treaty benefit
- b Nonresident alien filing a U.S. federal tax return
- c U.S. resident alien (based on days present in the United States) filing a U.S. federal tax return
- d Dependent of U.S. citizen/resident alien } If d, enter relationship to U.S. citizen/resident alien (see instructions) ► _____
- e Spouse of U.S. citizen/resident alien } If d or e, enter name and SSN/ITIN of U.S. citizen/resident alien (see instructions) ►
ARUN KUMAR MORA 286-81-3486
- f Nonresident alien student, professor, or researcher filing a U.S. federal tax return or claiming an exception
- g Dependent/spouse of a nonresident alien holding a U.S. visa
- h Other (see instructions) ► _____

Additional information for **a** and **f**: Enter treaty country ► _____ and treaty article number ► _____

Name (see instructions) Name at birth if different . . . ►	1a First name SRIJA	Middle name	Last name PEDAPUDI
	1b First name	Middle name	Last name

Applicant's Mailing Address

2 Street address, apartment number, or rural route number. **If you have a P.O. box, see separate instructions.**
1624 MACALPINE CIRCLE

City or town, state or province, and country. Include ZIP code or postal code where appropriate.
Morrisville NC USA 27560

Foreign (non-U.S.) Address
(see instructions)

3 Street address, apartment number, or rural route number. **Don't use a P.O. box number.**

City or town, state or province, and country. Include postal code where appropriate.

Birth Information

4 Date of birth (month / day / year) 03 / 22 / 1994	Country of birth INDIA	City and state or province (optional)	5 <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
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Other Information

6a Country(ies) of citizenship
INDIA

6b Foreign tax I.D. number (if any)

6c Type of U.S. visa (if any), number, and expiration date

6d Identification document(s) submitted (see instructions) Passport Driver's license/State I.D.
 USCIS documentation Other _____
 Issued by: INDIA No.: M7814001 Exp. date: 03 / 30 / 2025 Date of entry into the United States (MM/DD/YYYY): _____

6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?
 No/Don't know. Skip line 6f.
 Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).

6f Enter ITIN and/or IRSN ► **ITIN** _____ **IRSN** _____ and name under which it was issued ►
 First name Middle name Last name

6g Name of college/university or company (see instructions) ► _____
 City and state ► _____ Length of stay ► _____

Sign Here
Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number.

Keep a copy for your records.

Signature of applicant (if delegate, see instructions)	Date (month / day / year)	Phone number
Name of delegate, if applicable (type or print)	Delegate's relationship to applicant	<input type="checkbox"/> Parent <input type="checkbox"/> Court-appointed guardian <input type="checkbox"/> Power of attorney

Acceptance Agent's Use ONLY

Signature	Date (month / day / year)	Phone	Fax
Name and title (type or print)	Name of company	EIN	PTIN
		Office code	



201010013

Keep this form for your records. Do not send this form to the State of Maryland unless specifically requested to do so. See Instructions.

Print Using Blue or Black Ink Only.

ARUN KUMAR First Name MI MORA Last Name 286813486 SSN/Taxpayer Identification Number

SRIJA Spouse's First Name MI PEDAPUDI Spouse's Last Name 977944916 SSN/Taxpayer Identification Number

Part I Tax Return Information (whole dollars only)

- 1. Amount of overpayment to be applied to 2021 estimated tax
2. Amount of overpayment to be refunded to you REFUND 510
3. Total amount due (Pay in full by April 15, 2021. See instructions.)

Part II Taxpayer Declaration and Signature Authorization

Under penalties of perjury, I declare that I have compared the information contained on my electronic return with the information that I provided to my Electronic Return Originator (ERO) or entered on-line and that the name(s) and amounts described above agree with the amounts shown on the corresponding lines of my 2020 Maryland electronic income tax return.

Your PIN: check one box only

[X] I authorize GLOBAL TAXES LLC ERO firm name to enter or generate my PIN 13486 Enter five digits. Do not enter all zeros.

[] I will enter my PIN as my signature on my tax year 2020 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method.

Your signature Date

Spouse's PIN: check one box only

[X] I authorize GLOBAL TAXES LLC ERO firm name to enter or generate my PIN 44916 Enter five digits. Do not enter all zeros.

[] I will enter my PIN as my signature on my tax year 2020 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method.

Spouse's signature Date

Practitioner PIN Method Returns Only

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. 58727861989 Do not enter all zeros.

I certify this numeric entry is my PIN, which is my signature for the tax year 2020 electronically filed income tax return for the taxpayer(s). I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and the Maryland MeF Handbook for Authorized e-file Providers.

ERO's signature Date 09142021

DO NOT MAIL



205050013

OR FISCAL YEAR BEGINNING _____ 2020, ENDING _____

286813486 Social Security Number 977944916 Spouse's Social Security Number

ARUN KUMAR First Name MI

MORA Last Name

SRIJA Spouse's First Name MI

PEDAPUDI Spouse's Last Name



Does your name match the name on your social security card? If not, to ensure you get credit for your personal exemptions, contact SSA at 1-800-772-1213 or visit www.ssa.gov.

1624 MACALPINE CIRCLE Current Mailing Address Line 1 (Street No. and Street Name or PO Box)

MONTGOMERY Maryland County

Current Mailing Address Line 2 (Apt No., Suite No., Floor No.)

City, Town or Taxing Area Name of county and incorporated city, town or special taxing area in which you were employed on the last day of the taxable period if you earned wages in Maryland. (See Instruction 6.)

MORRISVILLE City or Town NC State 27560 ZIP Code + 4

FILING STATUS See Instruction 1 to determine if you are required to file.

- CHECK ONE BOX 1. Single (If you can be claimed on another person's tax return, use Filing Status 6.) 2. Married filing joint return or spouse had no income 3. Married filing separately, Spouse's SSN 4. Head of household 5. Qualifying widow(er) with dependent child 6. Dependent taxpayer (Enter 0 in Exemption Box (A) - See Instruction 8.)

RESIDENCE INFORMATION See Instruction 9.

Enter 2-letter state code for your state of legal residence. TX
If PA resident, enter both County and City, Borough or Township
Were you a resident of another state for the entire year of 2020? If no, attach explanation. Yes No
Are you or your spouse a member of the military? Yes No
Did you file a Maryland income tax return for 2019? Yes No If "Yes," was it a Resident or a Nonresident return?
Dates you resided in Maryland for 2020. If none, enter "NONE": FROM None TO None (MMDDYYYY).
Check here for Maryland taxes withheld in error. (See Instruction 4.)

EXEMPTIONS See Instruction 10. Check appropriate box(es). NOTE: If you are claiming dependents, you must attach the Dependents' Information Form 502B to this form in order to receive the applicable exemption amount.

- A. Yourself Spouse Enter number checked 2 See Instruction 10 A. \$ 6400
B. 65 or over 65 or over
Blind Blind Enter number checked X \$1,000 B. \$
C. Enter number from line 3 of Dependent Form 502B See Instruction 10 C. \$
D. Enter Total Exemptions (Add A, B and C.) Total Amount D. \$ 6400

Print Using Blue or Black Ink Only
Place your W-2 wage and tax statements and ATTACH HERE with ONE stapler. Do not attach check or money order to Form 505. Attach check or money order to Form PV.



205050113

Name ARUN KUMAR MORA & SRIJA PEDAPUDI SSN 286813486

INCOME AND ADJUSTMENTS INFORMATION

(See Instruction 11.)

Table with 4 columns: Line number, Description, (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows 1-17.

ADDITIONS TO INCOME (See Instruction 12.)

Table with 4 columns: Line number, Description, (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows 18-21.

SUBTRACTIONS FROM INCOME (See Instruction 13.)

Table with 4 columns: Line number, Description, (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows 22-25.

DEDUCTION METHOD See Instruction 15. (All taxpayers must select one method and check the appropriate box.)

Table with 4 columns: Line number, Description, (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows 26-31.

MARYLAND TAX COMPUTATION - COMPLETE FORM 505NR BEFORE CONTINUING.

Table with 4 columns: Line number, Description, (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows 32-33.



205050213

Name ARUN KUMAR MORA & SRIJA PEDAPUDI SSN 286813486

- 34. Other income tax credits for individuals from Part AA, line 13 of Form 502CR (Attach Form 502CR.)34.
35. Business tax credits You must file this form electronically to claim business tax credits on Form 500CR
36. Total credits (Add lines 33 through 35.)36.
37. Maryland tax after credits (Subtract line 36 from line 32c.) If less than 0, enter 0.37. 1735
38. Contribution to Chesapeake Bay and Endangered Species Fund (See Instruction 21.)38.
39. Contribution to Developmental Disabilities Services and Support Fund (See Instruction 21.)39.
40. Contribution to Maryland Cancer Fund (See Instruction 21.)40.
41. Contribution to Fair Campaign Financing Fund (See Instruction 21.)41.
42. Total Maryland income tax and contributions (Add lines 37 through 41.)42. 1735
43. Total Maryland tax withheld (Enter total from your W-2 and 1099 forms and attach if MD tax is withheld.)43. 2245
44. 2020 estimated tax payments, amount applied from 2019 return, payments made with an extension request and Form MW506NRS44.
45. Nonresident tax paid by pass-through entities (Attach Maryland Schedule K-1 (510))45.
46. Refundable income tax credits from Part CC, line 8 of Form 502CR (Attach Form 502CR. See Instruction 22.)46.
47. Total payments and credits (Add lines 43 through 46.)47. 2245
48. Balance due (If line 42 is more than line 47, subtract line 47 from line 42.)48.
49. Overpayment (If line 42 is less than line 47, subtract line 42 from line 47.)49. 510
50. Amount of overpayment TO BE APPLIED TO 2021 ESTIMATED TAX.50.
51. Amount of overpayment TO BE REFUNDED TO YOU (Subtract line 50 from line 49.) See line 5451. 510
52. Interest charges from Form 502UP or for late filing (See Instruction 23.) Total52.
Check here if you are attaching Form 502UP.
53. TOTAL AMOUNT DUE (Add line 48 and line 52.) IF \$1 OR MORE, PAY IN FULL WITH THIS RETURN.
Include Form PV.53.

DIRECT DEPOSIT OF REFUND (See Instruction 22.) Be sure the account information is correct. For Splitting Direct Deposit, use Form 588. To comply with banking and NACHA (National Automated Clearing House Association) rules, if this refund will go to an account outside of the United States, place "Y" in this box or if you authorize the State of Maryland to direct deposit your refund check this box [X] and complete the following information clearly and legibly.

54a. Type of account: [X] Checking [] Savings 54b. Routing Number (9-digits) 081000032
54c. Account Number 355006749489 54d. Name(s) as it appears on the bank account

Check here if you authorize your preparer to discuss this return with us. Check here if you authorize your paid preparer not to file electronically. Check here if you agree to receive your 1099G Income Tax Refund statement electronically (See Instruction 25). Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements and to the best of my knowledge and belief it is true, correct and complete. If prepared by a person other than taxpayer, the declaration is based on all information of which the preparer has any knowledge.

Your signature Date Spouse's signature Date
8167456197 Taxpayer(s) daytime phone number
2530 PEBBLE CREEK LN Street address of Preparer/Firm
CUMMING GA 30041 City, State, ZIP Code + 4
SYAM PRIYA RAM SAGAR GUPTA TALLAM Signature of Preparer other than taxpayer (Required by Law)
GLOBAL TAXES LLC Printed name of the Preparer/Firm's name
6789659522 Telephone number of Preparer P02082703 Preparer's PTIN (Required by law)

CODE NUMBERS (3 digits per line)



For returns filed without payments, mail your completed return to:

Comptroller of Maryland
Revenue Administration Division
110 Carroll Street
Annapolis, MD 21411-0001

For returns filed with payments, attach check or money order to Form PV. Make checks payable to Comptroller of Maryland. Do not attach Form PV or check/money order to Form 505. Place Form PV with attached check/money order on TOP of Form 505 and mail to:

Comptroller of Maryland
Payment Processing
PO Box 8888
Annapolis, MD 21401-8888



MARYLAND FORM 505NR

NONRESIDENT INCOME TAX CALCULATION
ATTACH TO YOUR TAX RETURN



20505N013

2020

Print Using Blue or Black Ink Only

ARUN KUMAR _____ MI _____ MORA _____ 286813486 _____
 First Name Last Name Social Security Number
 SRIJA _____ MI _____ PEDAPUDI _____ 977944916 _____
 Spouse's First Name Spouse's Last Name Spouse's Social Security Number

**If you are filing Form 505, use the Form 505NR Instructions appearing on page 2 of this form.
 If you are filing Form 515, use the Form 505NR Instructions appearing in Instruction 18 of the Form 515 Instructions.**

PART I - CALCULATION OF TAX WITHOUT ALLOWING CERTAIN MODIFICATIONS

1. Enter Taxable net income from Form 505, line 31 (or Form 515, line 32) 1. 66555 .
 2. Enter tax from Tax Table or Computation Worksheet Schedules I or II. Continue to Part II. 2. 3109 .

PART II - CALCULATION OF MARYLAND TAX

3. Enter your federal adjusted gross income from Form 505 (or Form 515), line 17 (Column 1) 3. 77605 .
 3a. Earned Income (See instructions.) ▶ 3a. 77605 .
 4. Enter your federal adjusted gross income plus additions from Form 505 (or 515) line 21. 4. 77605 .
 5. Enter the Taxable Military Income of a Nonresident from line 22 of Form 505. 5. _____ .
 6a. Enter your subtractions from line 23 of Form 505 or Form 515 6a. _____ .
 6b. Enter non-Maryland income from Form 505 (or 515) not included on lines 5 or 6a of this form (See instructions.) ▶ 6b. 48503 .
 7. Add lines 5 through 6b plus line 7 of Form 502LU. 7. 48503 .
 8. Maryland Adjusted Gross Income. Subtract line 7 from line 4. 8. 29102 .

If you are using the standard deduction, recalculate the standard deduction based on the income on line 8 and enter on line 8a . . 8a. 4365 .

9. Maryland Income Factor. Divide line 8 by line 3. The factor cannot exceed 1.000000 and cannot be less than 0. If line 8 is 0 or less, the factor is 0. If line 8 is greater than 0 and line 3 is 0 or less, the factor is 1.000000. 9. 375002 .
 10. Deduction amount.
 If you are using the standard deduction, multiply the standard deduction on line 8a by line 9 of this form and enter on line 10a . . 10a. 1637 .
 If you are itemizing your deductions, multiply the deduction on Form 505, line 26d, by line 9 of this form and enter on line 10b. . . 10b. _____ .

Form 515 Users, see Instruction 18 in Form 515 Instructions.

11. Net income (Subtract line 10a or 10b from line 8.) 11. 27465 .
 12. Exemption amount. Multiply the total exemption amount on Form 505, line 28 (or Form 515, line 29) by line 9. 12. 2400 .
 13. Maryland Taxable Net Income (Subtract line 12 from line 11.) 13. 25065 .
 14. Enter the tax amount from line 2 of this form. 14. 3109 .
 15. Maryland Nonresident factor: Divide the amount on line 13 on this form by line 1. If more than 1.000000, enter 1.000000. If 0 or less, the factor is 0. 15. 376606 .
 16. Maryland Tax. Multiply line 14 by line 15. Enter this amount on Form 505, line 32a (Form 515, line 33) 16. 1171 .
 17. Special nonresident tax. Multiply line 13 of this form by 0.0225. Enter this amount on Form 505, line 32b. If line 13 is 0 or less, enter 0. 17. 564 .

FOR FORM 515 FILERS ONLY.

If you are: (1) a nonresident employed in Maryland and (2) you are a resident of a local jurisdiction that imposes a local income or earnings tax on Maryland residents, then you must file a Form 515 to report and pay a tax on your Maryland wages. Form 515 filers pay a local income tax instead of the Special Nonresident Tax.

18. Local Income Tax. Multiply line 13 of this form by the local rate of the Maryland county (or Baltimore City) where you are employed. Enter this amount on Form 515, line 39. If line 13 is 0 or less, enter 0 18. _____ .