£104		ertmentoftre Treesuy-Internal Revenue Sav S. Indvidual Income Ta		tun 2	20	OMB No 1545	50074 IRS Use	Only-Do	onotwrit	learstaplei	nthisspace
Filing Statu Checkorly one box	lfyc	Singe 🛛 Married filingjointly [ouchecked the MFS box, enter the r son is a child but not your dependen	named								
Yourfirstnam	eandm	iddeirital	Læstn	ame				Yo	ursaci	al securit	tynumber
DHANUMJ	AYA	V	PAP:	PU				78	35-0	3-4478	3
lfjantretum, s	pouæ:	sfirstræmeandmiddeiritlal	Læstn	eme				Sp	ouse's	social sec	curitynumbe
RAMYA S	REE		PAP:	PU				AI	PPLI	ED FO	Я.
Homeadhress 3707 PI	•	erandstreet). Ifyouhavea P.O. box, see NA DR	einstruc	tions			Apt ma 49	a	neck he	neifya.	
		îce. Ifyou have a foreign address, also co	omplete	spaces below.		late	ZIPcode	to	space if filing jointly, went \$3 to go to this fund. Checking a box below will not change your tax on refund.		
SANTA C:				Fareign province/s		!A	95051 Fareign postal a				
r dag itali	yrane			raag ip wil te/si	aleccu	i ity	raag ipusia a		a ex	You	Spouse
Atanytimed	uing 2	020 did you receive, sell, send, exd	hange,	arotherwiseacq	Jire an <u>ı</u>	yfinancial intere	estinanyvintus	d currer	ncy?	Yes	X No
Standard Deduction Age/Blindnes	<u> </u>	neone candaim: 🗌 Youas a de Spouse itemizes on a separate retu 1 📗 Were born before January 2, 1	narya	uwereadual-sta			mbefore Janu	ary 2, 1°	956	☐ Isbl	ind
Dependent	s (see	instructions):		(2) Social sec	uity	(3) Relationsh	nip (4)	ifqualif	iesfor((see instru	ctions):
Ifmare		irstname Lastname		number		toyou	Child t	ax credit	t C	reditforot	ner dependent
thanfour	YOK	SHIT KUMAR PAPPU				Son					
dependents, see instruction	ъ										
anddreck											
here▶											
Λ#= d=	_1_	Wages, salaries, tips, etc Attach I	Fam(s))W-2					1	8	39,537.
Attach Sch Bif	2a	Tax-exemptinterest	2a		b Taxable interes		t		2 b		
required.	<u>:a</u>		3a		I	Ordnarydivida	nds		35		
) 4a	IRAdistributions	4a		b.	Taxable amour	nt		4 b		
	5a	Pensions and amulties	5a		b.	Taxable amour	nt		5 b		
Standard	6 a	_	6a		b Taxable amount				6 b		
Deduction for— Single or	7	Capital gainer (loss). Attach Sche	odule D	ifrequired Ifrot	require	d, dheck here	1	▶ ∐	7		
Married filing	8	Other income from Schedule 1, lin							8		
separately, \$12,400	9	Add lines 1, 20, 30, 40, 50, 60, 7,	and 8	This is your total	incom	e		. ▶	9	3	39,537.
 Married filing jointly or 	10	Adjustments to income				١	1				
, ·- ,		E 01 11 4 " 00				1 40	× 1				

10a

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

Qualifying widow(er), \$24,800

 Head of household,

\$18,650 • If you checked any box under

Standard Deduction

see instructions

11

12

13

14

15

Subtractline 10c from line 9. This is your adjusted gross income.

Standard deduction or itemized deductions (from Schedule A)

b Charitable contributions if you take the standard deduction See instructions c Add lines 10a and 10b. These are your total adjustments to income . .

Qualified business income deduction Attach Form 8995 or Form 8995 A.

Taxable income Subtractline 14 from line 11. If zero or less, enter -0.

64,737. Fam 1040(2020)

89,537.

24,800.

24,800.

10c

11

12

13

14

15

Fam 1040(202)			Page 2
	16	Tax (see instructions). Check if any from Fam(s): 1 🗌 8814 2 🗍 4972 3 🗍	16	7,372.
	17	Amount from Schedule 2 line 3	17	
	18	Add lines 16and 17	18	7,372.
	19	Child taxareal tarareal transfer other dependents	19	500.
	20	Amount from Schedule 3 line 7	20	
	21	Add lines 19 and 20	21	500.
	22	Subtractline 21 from line 18 If zero or less enter -0	22	6,872.
	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	6,872.
	25	Federal income tax withheld from:		
	а	Fam(s)W-2		
	b	Fam(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	7,771.
• If you have a	26	2020 estimated tax payments and amount applied from 2019 return	26	
qualifying child,	27	Earned income aredit (EIC)		
attachSch EIC. • If you have	28	Additional drild tax credit Attach Schedule 8812		
nontaxable combat pay,	29	American apparturity aredit from Farm 8863 line 8		
sæinstructions	30	Recovery rebate arealit See instructions		
	31	Amount from Scheolule 3, line 13		
	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	7,771.
Refund	34	Ifline 33 is more than line 24 subtract line 24 from line 33 This is the amount you overpaid	34	899.
TOO A	35a	Amount of line 34 you want refunded to you If Form 8888 is attached, check here ▶ □	35a	899.
Direct deposit?	▶b	Routing number 0 7 2 0 0 0 8 0 5 ► cType ★ Checking Savings		
Sæinstructions	▶d	Accountrumber 3 7 5 0 1 7 5 7 5 1 2 7		
	36	Amount of line 34 you want applied to your 2021 estimated tax \(\begin{array}{c}\) 36		
Amount	37	Subtractline 33 from line 24 This is the amount you owe now	37	
YouOwe		Note: Schedule H and Schedule SE fillers, line 37 may not represent all of the taxes you one for		
Fordetails on how to pay, see		2020 See Schedule 3, line 12e, and its instructions for details		
instructions	38	Estimated tax penalty (see instructions)		
Third Party Designee		o you want to allow another person to discuss this return with the IRS? See structions	oelow.	X No
2g		signee's Personal identifi		
		me ▶ no ▶ number(PIN) ▶		

Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions								
	Designee's name ▶	;	icanal icler ber (PIN)	ntification •					
Sign Here	Under penalties of parjury, I dedare 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. Dedaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.								
пае	Yoursignature	Date	Youroccupation			If the IRS sentyou an Identity Protection PIN enter it here			
Jaintretum?			SAP SYSTEM	ANALYST		einst)▶[
Sæinstructions Kæpacopyfor yourrecords	Spouses signature. If a joint return, l	Date	Spause's occupation			If the IRS sent your spouse an Identity Protection PIN, enter it here			
-			HOMEMAKER			(sæinst)▶			
	Phanena.	Email address							
Doiol	Preparer's name	Preparer's signa	ture		Date	PIIN		Check if:	
Paid Promoror -	SYAM PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/16/2021	P0208	32703	Self-a	mployed
Preparer -	Firm′sname▶ GLOBAL TAX				Ph	anena (678)965	-9522	
Use Only	Firm's address ▶ 2530 Pebb	g GA 30041		Fin	m′s∃N▶	30-10	17196		
ico towww.irs.gpw/Fam104Dfarinstructions and the latest infarmation BAA REV 01/08/21 PRO Fam 104D(2020)									



Paid Preparer's Due Dligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (ACTC),
Crild Tax Credit (CTC) (Including the Additional Child Tax Credit (ACTC) and
Credit for Other Dependents (DDG)), and Head of Household (HOH). Filing Status

OMB No. 1545-0074

Internal Revenue Service

Taxpayername(s) shown on return

Department of the Treesury To be completed by preparer and filed with Farm 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. ▶ Go towww.irs.gov/Form8867 for instructions and the latest information

Attachment Sequence No. 70

Taxpayer identification number

DHAN	UMJAYA V & RAMYA SREE PAPPU	785-03-	4478		
Enterpr	eparer's name and PTIN				
SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	P020827	03		
Part	9 1				
Please	e check the appropriate box for the credit(s) and/or HOH filling status daimed on the return				
	benefit(s) daimed (check all that apply).		7.0.0		HOH
1	Did you complete the return based on information for tax year 2020 provided by the reasonably dotained by you?	taxpayer or	Yes	No	N/A
2	If ared to are daimed 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 instructions AOTC worksheet found in the Form 8863 instructions, anyour own worksheet(s) that provide information, and all related forms and schedules for each ared to daimed?	and/orthe			
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must the following	tobboth of			
	 Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's redetermine that the taxpayer is digible to daim the credit(s) and/or HOH filling status. 	•			
	 Review infamation to determine that the taxpayer is eligible to daim the aredit(s) and/o status and to figure the amount(s) of any aredit(s) 		×		
4	Did any information provided by the taxpayer or a third party for use in preparing the information reasonably known to you, appear to be incorrect, incomplete, or inconsistent answerquestions 4a and 4b. If "Nb," go to question 5)	t? (If"Yes;"		×	
а	Did yourmake researable inquiries to determine the correct, complete, and consistent inform	nation? .			
b	Did you contemporareously oboument your inquiries? (Documentation should include the you asked, whom you asked, when you asked, the information that was provided, and the information had anyour preparation of the return)	e impact the			
5	Did you satisfy the record retention requirement? To meet the record retention requirement keep a copy of your obcumentation referenced in 4b, a copy of this Form 8867, a capplicable worksheet(s), a record of how, when, and from whom the information used to pose67 and any applicable worksheet(s) was obtained, and a copy of any obcument(s) providing and a copy of any obcument(s) providing and a copy of any obcument(s) and the capture that you relied on to determine digibility for the credit(s) and/or HOH filing status	capy of any repare Fam ided by the			
	$\label{the amount} \textit{the amount(s) of the ared it(s)} \ \ldots \ $		X		
	List those documents provided by the taxpayer, if any, that you relied on				
6	Did you ask the taxpayer whether he/she could provide about mentation to substantiate digitated its) and/or HOH filling status and the amount(s) of any area it(s) daimed on the return is selected for audit?	ın if his/her			
7	Did you ask the taxpayer if any of these cred to were disallowed ar reduced in a previous year		X		
2	(If areal its were disallowed ar reduced, go to question 7a; if not, go to question 8) Did you complete the required recentification Form 8862?				
а 8	Did you complete the required recentification Form 8862?				
0	carectScheduleC (Fam 1040)?				

Fam 8	867 (2020)		Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not daim EIC, go to Part	III.)	
9a	Have you determined that the taxpayer is eligible to daim the EIC for the number of qualifying children daimed, or is eligible to daim the EIC without a qualifying child? (If the taxpayer is daiming the EIC and does not have a qualifying child, go to question 10)	No	N/A
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?		
С	Did you explain to the taxpayer the rules about daiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?		
Part		CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a ditizen, rational, or resident of the United States?	No 🗆	N/A
11	Did you explain to the taxpayer that he she may not daim 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 outstood parenthas released a daim to exemption for the child?		
12	Did you explain to the taxpayer the rules about daiming 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	IV Due Diligence Questions for Returns Claiming AOTC (If the return does not daim AOTC, go to	Part	<u></u>
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qualified tuition and related expenses for the daimed AOTC?	Yes	No
Part	Due Diligence Questions for Claiming HOH (If the return closs not daim HOH filling status, go to	o Part'	M.)
14	Have you determined that the taxpayer was urmarried or considered urmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for a qualifying person?	Yes	Nb
Part			
	You will have complied with all due diligence requirements for daiming the applicable credit(s) and/or H status on the return of the taxpayer identified above if you		
	A Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responses or in your notes, review adequate information to determine if the taxpayer is eligible to daim the credit(s) and k status and to figure the amount(s) of the credit(s).		
	B. Camplete this Farm 8967 truthfully and accurately and complete the actions described in this checklist for a credit(s) daimed and HOH filling status, if daimed;	anyappl	icable
	C. SubmitFarm 8867 in the manner required; and		
	D. Keepall five of the following records for 3 years from the latest of the dates specified in the Form 8267 instr Document Retention	uctions	under
	1. A capyofthis Fam 8867.		
	2 The applicable worksheet(s) aryour own worksheet(s) for any arealit(s) daimed.		
	3 Capies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligible arealit(s) and/or HOH filling status and to figure the amount(s) of the credit(s).	ilityfor	the
	4 A record of how, when, and from whom the information used to prepare this form and the applicable world obtained.	ksheet(s)was
	5 A record of any additional information you relied upon, including questions you asked and the taxpayer's determine the taxpayer's eligibility for the credit(s) and/or HOH filling status and to figure the amount(s) of		
	▶ If you have not complied with all due diligence requirements, you may have to pay a \$540 penalty for eac comply related to a daim of an applicable credit or HOH filling status	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, and complete?	Yes 🗓	Nb
		am 88	$\sqrt{2m}$

(Rev. August 2019) Department of the Treasury Internal Revenue Service

Application for IRS Individual Taxpayer Identification Number For use by individual swho are not U.S. ditizens or permanent residents.

► See separate instructions

OMBNo 1545-0074

An IRS individual	I taxpayer identification num	ær (MN) is	far U.S. feder	al taxpur	poses	only.	Applicati	an typ	e (check ane bax):	
Before you begin							X Ac	plyfa	ranewITIN	
• Dan tsubmitt	risfom ifyouhave, orareeligil	de toget, a	U.S. social sec	urityrumk	cer (SSI)	V).	_ R∈	newa	nexisting ITIN	
	ulamitting Form W-7. Read th Ederal tax return with Form V								c, d, e, f, arg you	
a 🗌 Nonresident	talien required togetan ITIN toda	aim tax treaty	benefit							
b Nonresiden	talien filinga U.S. federal tax retun	n								
c 🗌 U.S. resider	ntalien (based on days presentin	the United S	States) filinga U.	S. feoberal ta	ex return					
d Dependento	of U.S. citizen/residentalien 🔪 Ifo	d, enterrelatio	anship to U.S. di	tizen/resida	ntalien (sæinst	ructions)			
	(
e⊠Spouseofl	•	dare, enterr HANUMJAY	name and SSN/T A PAPPU	NofU.S. (citizen/fe	sidenta	alien (see in		ns)▶ 5-03-4478	
f Nonresident	talien student, professor, or resear	ther filing a l	J.S. feobral taxre	etum ordair	mingan	exception	 an			
	spouse of a nonresidentalien hold	_			Ü	•				
h ☐ Other (see in	·									
	on for a and f: Enter treaty country	>		and tr	eatyar t io	derum	œr▶			
Name	1a Firstrame		Middle <i>ra</i> me			Lastr				
(see instructions)	RAMYA SREE					PAP	PU			
Name at birth if different •	1b Firstname		Middle <i>ra</i> me			Lastr	name			
	2 Streetaddress, apartmentru	mber critical	raute number li	Syou baye a	aPO h	DX 9999	senarate i	nstruct	ims	
Applicants	3707 PINCIANA DR		Total Bried. II	your avec	a i . O. D.	3 4 300	эрагаю п	54 001		
Mailing	Otyantown, state or province		v Indude7IPm	ne ar mostal	Imew	herean	noniale			
Address	SANTA CLARA	g a a aaa nij	· ·				TED STATES OF AMERICA 95051			
		mber critical	raute number C	mtirea				, ,		
Fareign (nan-	3 Street address, apartment number, crirural route number. Don't use a P.O. box number.									
U.S.) Address	City or town, state or province, and country. Include postal code where appropriate									
(see instructions)	aya wii, saca poilis	g a a a a a a a	у. п искерски	COCC VII LIC	ларанда	iac				
Birth	4 Dateofbirth (month/day/year)	Country of b	irth	Cityands	stateorp	rovince	(aptional)	5 🗆	Male	
Information	08/24/1989	INDIA		3					Female	
	6a Country(les) of citizenship	6b Fareignt	ax I.D. number (i	fany) 60	с Турес	fU.S. vi:	sa (ifany), n		and expiration date	
Other Information	INDIA			H	14		P91743	96	10/15/2020	
пипация	6d Identification document(s) submitted (see instructions) 🛛 Passport 🗌 Driver's license/State I.D.									
	□ LISCIS cha mantation □ Other									
							Dateofer	_		
	the United States Issued by: INDIA No: N3182836 Exp. date: 09/22/2025 (MM/DD/YYYY): 03/04/202									
	6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?									
	■ No/Dan't know. Skip line &.									
	Yes, Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).									
	6f EnterITINand/orIRSN▶ I		IRSN				and			
			11 61 4							
	rameunderwhich itwas issued▶ Firstrame Middle name Lastrame									
	6g Name of college/university or company (see instructions) >									
	Otyandstate ► Length of stay ▶									
C	Under penalties of perjury, I (applic	mat Ablamta A	Acres construct				d their applic	otoo ir		
Sign Here	documentation and statements, and information with my acceptance agen	to the best o	fmy knowledge a	nd belief, it	is true, c	carrect, a	and complete	e Lauth	rarize the IRS to share	
Keepa copyfor your records	Signature of applicant (fdelo	egate, seeins	structions)	Date (mont	h/day/j	year) 	Phonenum	iber		
Jul 1000 G	Name of delegate, if applica	ble (type or p	rint) Delegate's relation to applicant			hip [Parent Court-appointed guardian		
	\ Signature			Date (mont	h/day/\	year)	Phone		~;	
Acceptance				(9 - 3	· -	Fax			
Agent's	Name and title (type or print))	Nameofo	L OMIDEINV		EIN	· un		 ПN	
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	<u>'</u>						<u></u>			

(Rev. August 2019) Department of the Treasury Internal Revenue Service

Application for IRS Individual Taxpayer Identification Number For use by individual swho are not U.S. ditizens or permanent residents.

► See separate instructions

OMBNo 1545-0074

An IRS individual	l taxpayer identification numl	ær (ITIN) is	for U.S. feeter	al taxpurp	œsa			ne (check ane bax):		
Before you begin								ranewIΠN		
	isfam ifyouhave, oraredigil							nexisting ITIN		
	Jamitting Farm W-7. Read th Ederal tax return with Farm V							c, d, e, f, arg, you		
a Nonresiden	talien required togetan ITIN toda	aim tax treatyl	benefit							
b Nonresiden	talien filinga U.S. federal tax retur	n								
c 🗌 U.S. resider	ntalien (based on days presentin	the United S	itates) filinga U.:	S. federal tax	retun					
d⊠ Dependenta	of U.S. citizen/residentalien 🔪 If	d, enterrelatio	anship to U.S. di	tizen/resident	talien (se	æ instructia	rs)▶ SON			
e 🗌 Spouse of U		dore, enterr HANUMJAY	nameandSSN/T	∏NofU.S. at	tizen/resi	dentalien (s		ons)▶ 35-03-4478		
f \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ئے۔ talien student, professor, or resear			at mardaim	inaana	······································	/ 6	55-03-4478		
	spouse of a nomesidentalien hold	_		elunia dalin	ıı ya ıe	фии				
h Other (see in		ii gau.s. vise	a .							
	on for a and f. Enter treaty country			and tree	atvartide	e rum ber ▶				
Name	1a Firstrame		Viiddle name			Lastrame				
(see instructions)	YOKSHIT KUMAR					PAPPU				
Nameatbirthif	1b Firstname	n	Vliddle <i>re</i> me			Lastrame				
Applicant's	2 Streetadbress, apartmentru 3707 PINCIANA DR		route number. It	gouhaveal	P.O. bo	k, see separ	ateinstruc	tions		
Mailing	atyartown, statearproving	e, and country	/. IndudeZIPco	de or postal o	oodewh:	ere appropria	ate.			
Address	SANTA CLARA	_			CA	INDIA	95	5051		
Foreign (non- U.S.) Address	3 Streetadbress, apartmentru	mber, arrural	route rumber. D	ontusea P.	?O. box i	number.				
(see instructions)	Cityartown, state arprovina	e, and country	/. Indudepostal	codewhere a	appropria	ate				
Birth Information	4 Dateofbirth (month/day/year) 05/14/2017	Country of b INDIA	irth	Cityandsta	atearpro	oxince (aptic		Male Female		
Other	6a Country(ies) of citizenship INDIA	66 Fareign t	ex I.D. rumber (i	fany) 6c H4	٥.	-	ny), number, .81781	and expiration date 10/15/2020		
Information	6d Identification document(s) su	omitted (see in	nstructions) 🔀	? Passport		Diver's licen	se/State I.D			
	USCIS abaumentation Other Date of entry into									
							britedStates			
	Issued by: INDIA N	ы: Т85702	212 Ex	Exp. date: 10/13/2024 (MM/DDXYYYY): 03/04/202						
	6e Haveyoupreviouslyreceived an ITIN or an Internal Revenue Service Number (IRSN)? ☑ No/Don't know. Skip line 65.									
	Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).									
	•	ΠN	•	IRSN				and		
	rameurderwhich itwas issued >									
	Firstname Middle name Lastname									
	6g Name of college/university or company (see instructions) >									
	Cityandstate ▶			Len	gthafst	ay▶				
Sign Here	Under penalties of perjury, I (applic documentation and statements, and information with my acceptance agen	to the best of	fmy knowledge a	nd belief, it is	strue, co	rrect, and co	mplete I aut	narize the IRS to share		
Keepacopyfor	Signature of applicant (foldegate, see instructions)						enumber			
yauriecards	Name of delegate, if applicate DHANUMJAYA VENKA:			Delegate's re to applicant	egate's relationship		☐ Parent ☐ Court-appointed guardian			
	, , , , , , , , , , , , , , , , , , ,	IA DUKGAI	\AU			`\	werofattor	Ey		
Acceptance	Signature			Date (month.	/udy/ye		2			
Agents	Name and title (type or print))	Namedia	l mnenv	Е	Fax		 ПN		
UseONLY		,	, wanted 0	- I July	_	ffice code		1 II N		
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