

**Filing Status**  Single  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 ▶

Your first name and middle initial <b>PRITAM</b>	Last name <b>GHOSH</b>	Your social security number <b>513-81-2317</b>
If joint return, spouse's first name and middle initial <b>AMRITA</b>	Last name <b>PODDER</b>	Spouse's social security number <b>946-99-1807</b>
Home address (number and street). If you have a P.O. box, see instructions. <b>333 ANDOVER DRIVE</b>		Apt. no. <b>219</b>
City, town, or post office. If you have a foreign address, also complete spaces below. <b>BURBANK</b>		State <b>CA</b>
		ZIP code <b>91504</b>
Foreign country name	Foreign province/state/county	Foreign postal code

**Presidential Election Campaign**  
 Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.  
 You  Spouse

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?  Yes  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

**Dependents** (see instructions):

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check if qualifies for (see instructions):	
				Child tax credit	Credit for other dependents
<b>PRIYANSHI</b>	<b>GHOSH</b>	<b>191-11-1647</b>	<b>DAUGHTER</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Attach Sch. B if required.	<b>1</b> Wages, salaries, tips, etc. Attach Form(s) W-2	<b>1</b>	<b>145,650</b>
	<b>2a</b> Tax-exempt interest	<b>2a</b>	
	<b>3a</b> Qualified dividends	<b>3a</b>	
	<b>4a</b> IRA distributions	<b>4a</b>	
	<b>5a</b> Pensions and annuities	<b>5a</b>	
	<b>6a</b> Social security benefits	<b>6a</b>	
	<b>7</b> Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>	<b>7</b>	
	<b>8</b> Other income from Schedule 1, line 9	<b>8</b>	
	<b>9</b> Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b> ▶	<b>9</b>	<b>145,650</b>
<b>Standard Deduction for-</b> ● Single or Married filing separately, \$12,400 ● Married filing jointly or Qualifying widow(er), \$24,800 ● Head of household, \$18,650 ● If you checked any box under <i>Standard Deduction</i> , see instructions.	<b>10</b> Adjustments to income:		
	<b>a</b> From Schedule 1, line 22	<b>10a</b>	
	<b>b</b> Charitable contributions if you take the standard deduction. See instructions	<b>10b</b>	
	<b>c</b> Add lines 10a and 10b. These are your <b>total adjustments to income</b> ▶	<b>10c</b>	<b>0</b>
	<b>11</b> Subtract line 10c from line 9. This is your <b>adjusted gross income</b> ▶	<b>11</b>	<b>145,650</b>
	<b>12</b> <b>Standard deduction or itemized deductions</b> (from Schedule A).	<b>12</b>	<b>24,800</b>
	<b>13</b> Qualified business income deduction. Attach Form 8995 or Form 8995-A	<b>13</b>	
	<b>14</b> Add lines 12 and 13	<b>14</b>	<b>24,800</b>
	<b>15</b> <b>Taxable income.</b> Subtract line 14 from line 11. If zero or less, enter -0-	<b>15</b>	<b>120,850</b>

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

Table with 2 columns: Description and Amount. Rows include Tax (18,167), Federal income tax withheld (26,943), and Total payments (28,643).

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

Refund

Direct deposit? See instructions.

Table for Refund section including lines 34 (12,476), 35a (12,476), and 36.

Amount You Owe

For details on how to pay, see instructions.

Table for Amount You Owe section including lines 37 (0) and 38.

Third Party Designee

Form for Third Party Designee with fields for name, phone, and identification number.

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.

Joint return? See instructions. Keep a copy for your records.

Signature section for both taxpayer and spouse, including dates, occupations, and PINs.

Paid Preparer Use Only

Form for Paid Preparer Use Only with fields for signature, name, firm name, address, and EIN.

## Application for IRS Individual Taxpayer Identification Number

▶ **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) ▶ \_\_\_\_\_  
**PRITAM HGOSH** **513-81-2317**
- 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 ▶ \_\_\_\_\_

<b>Name</b> (see instructions)	1a First name <b>AMRITA</b>	Middle name <b>N/A</b>	Last name <b>PODDER</b>
	1b First name <b>N/A</b>	Middle name <b>N/A</b>	Last name <b>N/A</b>

**Applicant's Mailing Address**

2 Street address, apartment number, or rural route number. **If you have a P.O. box, see separate instructions.**  
**333 ANDOVER DRIVE** **APT 219**  
City or town, state or province, and country. Include ZIP code or postal code where appropriate.  
**BURBANK, CA 91504**

**Foreign (non-U.S.) Address**

3 Street address, apartment number, or rural route number. **Don't use a P.O. box number.**  
**14 ASHOK ROW GANGULY BAGAN**  
City or town, state or province, and country. Include postal code where appropriate.  
**KOLKATA, WEST BENGAL, INDIA 700084**

**Birth Information**

4 Date of birth (month / day / year) **01/03/1990** Country of birth **INDIA** City and state or province (optional) **KOLKATA/WB**

5  Male  Female

**Other Information**

6a Country(ies) of citizenship **INDIA** 6b Foreign tax I.D. number (if any) **N/A** 6c Type of U.S. visa (if any), number, and expiration date **H4 N9382976 06/10/2021**

6d Identification document(s) submitted (see instructions)  Passport  Driver's license/State I.D.  
 USCIS documentation  Other \_\_\_\_\_

Issued by: **INDIA** No.: **K6215144** Exp. date: **10/25/2022** Date of entry into the United States (MM/DD/YYYY): **02/17/2019**

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 946-99-1807** **IRSN N/A** and name under which it was issued ▶ **AMRITA** **PODDER**  
First name Middle name Last name

6g Name of college/university or company (see instructions) ▶ **N/A** City and state ▶ **N/A** Length of stay ▶ **N/A**

**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.

Signature of applicant (if delegate, see instructions) \_\_\_\_\_ Date (month / day / year) \_\_\_\_\_ Phone number **716-292-5769**

Name of delegate, if applicable (type or print) **AMRITA PODDER** Delegate's relationship to applicant  Parent  Court-appointed guardian  Power of attorney

**Acceptance Agent's Use ONLY**

Signature \_\_\_\_\_ Date (month / day / year) **01-20-2021** Phone **408-515-0974** Fax **408-213-8380**

Name and title (type or print) **Sanjeev Kumar Sharma, CAA** Name of company **Bus.Fin. & Tax Svcs** EIN **82-1581721** PTIN **P00434138** Office Code **00770958**