

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)► NAGARAJU SANDRALA 352-51-5688
- 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)	1a First name MODALA	Middle name N/A	Last name HIMA BINDHU
	1b First name N/A	Middle name N/A	Last name N/A

Applicant's Mailing Address	2 Street address, apartment number, or rural route number. If you have a P.O. box, see separate instructions.		
	638 SW DEXTER CIRCLE APT 105 City or town, state or province, and country. Include ZIP code or postal code where appropriate. LAKE CITY, FL 32025		

Foreign (non-U.S.) Address (see instructions)	3 Street address, apartment number, or rural route number. Don't use a P.O. box number.		
	20-183, ESLAMPURAM City or town, state or province, and country. Include postal code where appropriate. MIRYALAGUDA, NALGONDA, TELANGANA, INDIA 508207		

Birth Information	4 Date of birth (month / day / year) 05/19/1994	Country of birth INIDA	City and state or province (optional) MIRYALAGUDA, TELANGA	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) N/A	6c Type of U.S. visa (if any), number, and expiration date F2 P6176121 01/30/2025	
	6d Identification document(s) submitted (see instructions)		Date of entry into the United States (MM/DD/YYYY): 02/14/2020	

Sign Here	6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?			
	<input checked="" type="checkbox"/> No/Don't know. Skip line 6f. <input type="checkbox"/> Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).			
Acceptance Agent's Use ONLY	6f Enter ITIN and/or IRSN		and	
	name under which it was issued		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 571-585-9363	
Acceptance Agent's Use ONLY	Name of delegate, if applicable (type or print)	Delegate's relationship to applicant	Parent <input type="checkbox"/> Court-appointed guardian <input type="checkbox"/> Power of attorney <input type="checkbox"/>	

Acceptance Agent's Use ONLY	Signature	Date (month / day / year)	Phone	
	Name and title (type or print)	Name of company	EIN	PTIN
Office code				

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 NAGARAJU		Last name SANDRALA	Your social security number 352-51-5688	
If joint return, spouse's first name and middle initial MODALA		Last name HIMA BINDHU	Spouse's social security number APP-LI-ED	
Home address (number and street). If you have a P.O. box, see instructions. 638 SW DEXTER CIRCLE			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. <input type="checkbox"/> You <input type="checkbox"/> Spouse	
City, town, or post office. If you have a foreign address, also complete spaces below. LAKE CITY		State FL		ZIP code 32025
Foreign country name		Foreign province/state/county		Foreign postal code

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): If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>	(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
					<input 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.	1 Wages, salaries, tips, etc. Attach Form(s) W-2	1	119,450
	2a Tax-exempt interest	2a	
	3a Qualified dividends	3a	
	4a IRA distributions	4a	
	5a Pensions and annuities	5a	
	6a Social security benefits	6a	
	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>	7	
	8 Other income from Schedule 1, line 9	8	
	9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ▶	9	119,450
Standard Deduction for- • 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.	10 Adjustments to income:		
	a From Schedule 1, line 22	10a	
	b Charitable contributions if you take the standard deduction. See instructions	10b	
	c Add lines 10a and 10b. These are your total adjustments to income ▶	10c	0
	11 Subtract line 10c from line 9. This is your adjusted gross income ▶	11	119,450
12 Standard deduction or itemized deductions (from Schedule A).	12	24,800	
13 Qualified business income deduction. Attach Form 8995 or Form 8995-A	13		
14 Add lines 12 and 13	14	24,800	
15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-.	15	94,650	

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	12,409
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	12,409
19	Child tax credit or credit for other dependents	19	
20	Amount from Schedule 3, line 7	20	1,856
21	Add lines 19 and 20	21	1,856
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	10,553
23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	
24	Add lines 22 and 23. This is your total tax ▶	24	10,553
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	18,562
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	18,562
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	0
31	Amount from Schedule 3, line 13	31	
32	Add lines 27 through 31. These are your total other payments and refundable credits ▶	32	0
33	Add lines 25d, 26, and 32. These are your total payments ▶	33	18,562

• 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	8,009
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here. ▶ <input type="checkbox"/>	35a	8,009
▶ b	Routing number <u>0 5 2 0 0 1 6 3 3</u> ▶ c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
▶ d	Account number <u>4 4 6 0 3 2 5 3 6 2 6 1</u>		
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	0
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 ▶ **Praveen Vundavalli** Phone no. ▶ **201-510-0123** Personal identification number (PIN) ▶ **5 3 9 0 8**

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. 571-585-9363	Email address		

Paid Preparer Use Only

Preparer's signature	Date	PTIN	Check if:
Praveen Vundavalli	01-27-2021	P01628002	<input type="checkbox"/> Self-employed
Preparer's name Praveen Vundavalli	Phone no. 201-510-0123		
Firm's name ▶ CENTUM TAX SOLUTIONS LLC			
Firm's address ▶ 634 WEST FOULKE AVE FINDLAY, OH 45840	Firm's EIN ▶ 42-1769904		

**SCHEDULE 3
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Credits and Payments

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

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

OMB No. 1545-0074

2020

Attachment
Sequence No. **03**

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

NAGARAJU SANDRALA & MODALA HIMA BINDHU

Your social security number

352-51-5688

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	
2	Credit for child and dependent care expenses. Attach Form 2441	2	
3	Education credits from Form 8863, line 19	3	1,856
4	Retirement savings contributions credit. Attach Form 8880	4	
5	Residential energy credits. Attach Form 5695	5	
6	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/> _____	6	
7	Add lines 1 through 6. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20	7	1,856

Part II Other Payments and Refundable Credits

8	Net premium tax credit. Attach Form 8962	8	
9	Amount paid with request for extension to file (see instructions)	9	
10	Excess social security and tier 1 RRTA tax withheld	10	
11	Credit for federal tax on fuels. Attach Form 4136	11	
12	Other payments or refundable credits:		
a	Form 2439	12a	
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202	12b	
c	Health coverage tax credit from Form 8885	12c	
d	Other: _____	12d	
e	Deferral for certain Schedule H or SE filers (see instructions)	12e	
f	Add lines 12a through 12e	12f	
13	Add lines 8 through 12f. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31	13	0

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 3 (Form 1040) 2020

Form **8863**

Education Credits (American Opportunity and Lifetime Learning Credits)

OMB No. 1545-0074

2020

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040 or 1040-SR.

Attachment
Sequence No. **50**

▶ Go to www.irs.gov/Form8863 for instructions and the latest information.

Name(s) shown on return

Your social security number

NAGARAJU SANDRALA & MODALA HIMA BINDHU

352-51-5688



Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

Part I Refundable American Opportunity Credit

1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30				1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, qualifying widow(er)	2	180,000			
3	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter	3	119,450			
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit	4	60,550			
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	5	20,000			
6	If line 4 is: <ul style="list-style-type: none"> • Equal to or more than line 5, enter 1.000 on line 6 • Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rounded to at least three places) 				6	1.000
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year and meet the conditions described in the instructions, you can't take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box <input type="checkbox"/>				7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the amount here and on Form 1040 or 1040-SR, line 29. Then go to line 9 below				8	

Part II Nonrefundable Education Credits

9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions)				9	
10	After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19				10	12,580
11	Enter the smaller of line 10 or \$10,000				11	10,000
12	Multiply line 11 by 20% (0.20)				12	2,000
13	Enter: \$138,000 if married filing jointly; \$69,000 if single, head of household, or qualifying widow(er)	13	138,000			
14	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter	14	119,450			
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19	15	18,550			
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	16	20,000			
17	If line 15 is: <ul style="list-style-type: none"> • Equal to or more than line 16, enter 1.000 on line 17 and go to line 18 • Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to at least three places) 				17	0.928
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) ▶				18	1,856
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see instructions) here and on Schedule 3 (Form 1040), line 3				19	1,856

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8863** (2020)

Name(s) shown on return

Your social security number

NAGARAJU SANDRALA & MODALA HIMA BINDHU

352-51-5688



Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

Part III Student and Educational Institution Information. See instructions.

20 Student name (as shown on page 1 of your tax return) NAGARAJU SANDRALA	21 Student social security number (as shown on page 1 of your tax return) 352-51-5688
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22 Educational institution information (see instructions) a. Name of first educational institution OTTAWA UNIVERSITY	b. Name of second educational institution (if any)
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(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 1001 S. CEDAR, #20 OTTAWA, KS 66067	(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
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(2) Did the student receive Form 1098-T from this institution for 2020? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	(2) Did the student receive Form 1098-T from this institution for 2020? <input type="checkbox"/> Yes <input type="checkbox"/> No
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(3) Did the student receive Form 1098-T from this institution for 2019 with box 7 checked? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(3) Did the student receive Form 1098-T from this institution for 2019 with box 7 checked? <input type="checkbox"/> Yes <input type="checkbox"/> No
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(4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3) . You can get the EIN from Form 1098-T or from the institution. 48-0543772	(4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3) . You can get the EIN from Form 1098-T or from the institution.
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23 Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2020?	<input type="checkbox"/> Yes - Stop! Go to line 31 for this student.	<input checked="" type="checkbox"/> No - Go to line 24.
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24 Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2020 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	<input checked="" type="checkbox"/> Yes - Go to line 25.	<input type="checkbox"/> No - Stop! Go to line 31 for this student.
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25 Did the student complete the first 4 years of postsecondary education before 2020? See instructions.	<input type="checkbox"/> Yes - Stop! Go to line 31 for this student.	<input checked="" type="checkbox"/> No - Go to line 26.
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26 Was the student convicted, before the end of 2020, of a felony for possession or distribution of a controlled substance?	<input type="checkbox"/> Yes - Stop! Go to line 31 for this student.	<input checked="" type="checkbox"/> No - Complete lines 27 through 30 for this student.
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You **can't** take the American opportunity credit and the lifetime learning credit for the **same student** in the same year. If you complete lines 27 through 30 for this student, don't complete line 31.

American Opportunity Credit

27 Adjusted qualified education expenses (see instructions). Don't enter more than \$4,000	27	
28 Subtract \$2,000 from line 27. If zero or less, enter -0-	28	
29 Multiply line 28 by 25% (0.25)	29	
30 If line 28 is zero, enter the amount from line 27. Otherwise, add \$2,000 to the amount on line 29 and enter the result. Skip line 31. Include the total of all amounts from all Parts III, line 30, on Part I, line 1	30	

Lifetime Learning Credit

31 Adjusted qualified education expenses (see instructions). Include the total of all amounts from all Parts III, line 31, on Part II, line 10	31	12,580
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Adjusted Qualified Education Expenses Worksheet

Form 8863

(Keep for your records)

2020

Name(s) as shown on return

Tax ID Number

NAGARAJU SANDRALA & MODALA HIMA BINDHU

352-51-5688

Student name

Student Tax ID Number

NAGARAJU SANDRALA

352-51-5688

1. Total qualified education expenses paid for or on behalf of the student in 2020 for the academic period	<u>14,080</u>
2. Less adjustments:	
a. Tax-free educational assistance received in 2020 allocable to the academic period	_____
b. Tax-free educational assistance received in 2021 (and before you file your 2020 tax return) allocable to the academic period	_____
c. Refunds of qualified education expenses paid in 2020 if the refund is received in 2020 or in 2021 before you file your 2020 tax return	<u>1,500</u>
3. Total adjustments (add lines 2a, 2b, and 2c)	<u>1,500</u>
4. Adjusted qualified education expenses. Subtract line 3 from line 1. If zero or less, enter -0-	<u>12,580</u>