

**STATEMENT OF DECLARATION SO AS TO BE TREATED AS RESIDENT ALIENS OF
THE LAND OF THE UNITED STATES OF AMERICA FOR THE PURPOSE OF TAX
MATTERS BEGINNING THE TY 2023**

We, KALYANA SHARAFF (SSN 837-78-3292) and SREEVANI JARUDODLA (ITIN:APPLIED FOR) willfully agree and consent to be treated as Resident Aliens of the land of USA for the purpose of treating Income Tax Matters on our worldwide income beginning the Tax Year 2023.

Invoking special provisions contained in Section 6013(g) of Internal Revenue Code and considering certain situations as prescribed by IRS in its Publication 519, if, at the end of the tax year, taxpayer is married and one spouse is a U.S. citizen or a resident alien and the other spouse is a nonresident alien, taxpayer can choose to treat the nonresident spouse also as a U.S. resident alien. If the taxpayer makes this choice, both the spouses are treated as residents for the entire tax year for income tax purposes.

In view of the above, we appeal requesting the IRS to kindly consider treating SREEVANI JARUDODLA also as resident alien for the Tax Year 2023.

For your kind information and perusal, our full legal names and current addresses are as follows

First Party to Filing Returns:

KALYANA SHARAFF
5008 WOLFDAL DR
MCKINNEY, TX, 75071

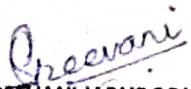
Second Party to Filing Returns:

SREEVANI JARUDODLA
5008 WOLFDAL DR
MCKINNEY, TX, 75071

Thank you.

Sincerely,

KALYANA SHARAFF
SSN: 837-78-3292
DATE OF BIRTH: - 09/14/1980


SREEVANI JARUDODLA
ITIN: APPLIED FOR
DATE OF BIRTH: - 08/04/1977

For the year Jan. 1-Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____, 2023. See separate instructions.

Your first name and middle initial: KALYANA C; Last name: SHARAFF; Your social security number: 837 78 3292

If joint return, spouse's first name and middle initial: SREEVANI; Last name: JARUDODLA; Spouse's social security number: APP LI ED F

Home address (number and street): 5008 WOLFDALE DR; Apt. no. _____; Presidential Election Campaign: [] You [] Spouse

City, town, or post office: MCKINNEY; State: TX; ZIP code: 75071

Foreign country name: _____; Foreign province/state/country: _____; Foreign postal code: _____

Filing Status: [] Single [] Head of household (HOH) [X] Married filing jointly (even if only one had income) [] Married filing separately (MFS) [] Qualifying surviving spouse (QSS)

Digital Assets: At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? [] 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, 1959 [] Are blind Spouse: [] Was born before January 2, 1959 [] Is blind

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Check the box if qualifies for (see instructions): Child tax credit, Credit for other dependents.

Income section table with rows 1a through 1z. Total amount from Form(s) W-2, box 1: 104,542.

Table with rows 2a through 15. Includes tax-exempt interest, qualified dividends, IRA distributions, pensions and annuities, social security benefits, capital gain or (loss), additional income from Schedule 1, line 10, adjustments to income, and taxable income: 60,142.

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

Tax and Credits	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	6,775.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	6,775.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	6,775.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	6,775.

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	16,284.
	b	Form(s) 1099	25b	
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	16,284.
	26	2023 estimated tax payments and amount applied from 2022 return	26	
	27	Earned income credit (EIC)	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
	31	Amount from Schedule 3, line 15	31	
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	16,284.

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	9,509.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	9,509.
Direct deposit? See instructions.	b	Routing number 3 2 1 1 8 0 3 7 9	c Type:	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings
	d	Account number 9 3 4 6 5 3 0 0 4 2		
	36	Amount of line 34 you want applied to your 2024 estimated tax	36	

Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions.	37	
	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.)
<i>[Signature]</i>		SOFTWARE ENGINEER	
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.)
<i>[Signature]</i>	04/08/2024	COLLEGE LECTURER	
Phone no. (469) 769-9088	Email address KALYANA.SHARAFF@GMAIL.COM		

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if:
VENKATA SAI PAVAN KUMAR DUDIPALLI	VENKATA SAI PAVAN KUMAR DUDIPALLI		P02470833	<input type="checkbox"/> Self-employed
Firm's name	Firm's address		Phone no.	Firm's EIN
GLOBAL TAXES LLC	245 ROONEY CT E BRUNSWICK NJ 08816		(678) 965-9522	88-2145487

Application for IRS Individual Taxpayer Identification Number

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

OMB No. 1545-0074

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

Application type (check one box):

Before you begin:

- Apply for a new ITIN
 Renew an existing ITIN

• 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) ► KALYANA SHARAFF 837-78-3292
- 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	Middle name	Last name
	SREEVANI		JARUDODLA
Name at birth if different	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.
	5008 WOLFDAL DR City or town, state or province, and country. Include ZIP code or postal code where appropriate. MCKINNEY TX USA 75071

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)	Country of birth	City and state or province (optional)	5 <input type="checkbox"/> Male
	08/04/1977	INDIA		<input checked="" type="checkbox"/> Female

Other Information	6a Country(ies) of citizenship	6b Foreign tax I.D. number (if any)	6c Type of U.S. visa (if any), number, and expiration date
	INDIA		
	6d Identification document(s) submitted (see instructions) <input checked="" type="checkbox"/> Passport <input type="checkbox"/> Driver's license/State I.D. <input type="checkbox"/> USCIS documentation <input type="checkbox"/> Other _____ Issued by: INDIA No.: U5379735 Exp. date: 09/01/2030 Date of entry into the United States (MM/DD/YYYY): _____		
	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).		
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 Keep a copy for your records.	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
	<u>Sreevani</u>	04/08/2024	
	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
	Name and title (type or print)	Name of company	Fax
		EIN	PTIN
		Office code	