

For the year Jan. 1-Dec. 31, 2016, or other tax year beginning 2016, ending 20

Your first name and initial: **PALATHI** Last name: **RAGHAVENDER** See separate instructions.
 Your social security number: **153-31-6146**
 If a joint return, spouse's first name and initial: **MURKI** Last name: **SWATHI** Spouse's social security number: _____
 Home address (number and street): **300 LEGACY DR** Apt. no.: **836** Make sure the SSN(s) above and on line 6c are correct.
 City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions): **PLANO** State: **TX** ZIP: **75023**

Foreign country name: _____ Foreign postal code: _____
INTERNAL REVENUE SERVICE
W & I - FIELD ASSISANCE
FARMERS BRANCH, TX 75244

Filing Status
 1 Single
 2 Married filing jointly (even if only one had income) **NOV 8 2017**
 3 Married filing separately. Enter spouse's SSN above and full name here. _____
 4 Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. _____

Exemptions
 6a Yourself. This is not a dependent. **PROOF OF DELIVERY ONLY THIS IS NOT AN OFFICIAL RECEIPT**
 6b Spouse. **31207**
 6c Dependents:
 (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) Chk if child under age 17 qualifying for child tax credit (see instructions)
 If more than four dependents, see instructions and check here
 Boxes checked on 6a and 6b: **2**
 No. of children on 6c who:
 • lived with you _____
 • did not live with you due to divorce or separation (see instructions) _____
 Dependents on 6c not entered above _____
 Add numbers on lines above **2**

Income	7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	41,789
Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.	8a	Taxable interest. Attach Schedule B if required	8a	
	b	Tax-exempt interest. Do not include on line 8a	8b	
If you did not get a W-2, see instructions.	9a	Ordinary dividends. Attach Schedule B if required	9a	
	b	Qualified dividends	9b	
	10	Taxable refunds, credits, or offsets of state and local income taxes	10	
	11	Alimony received	11	
	12	Business income or (loss). Attach Schedule C or C-EZ	12	
	13	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13	
	14	Other gains or (losses). Attach Form 4797	14	
	15a	IRA distributions	15a	
	b	Taxable amount	15b	
	16a	Pensions and annuities	16a	
	b	Taxable amount	16b	
	17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	
	18	Farm income or (loss). Attach Schedule F	18	
	19	Unemployment compensation	19	
	20a	Social security benefits	20a	
	b	Taxable amount	20b	
	21	Other income	21	
	22	Combine the amounts in the far right column for lines 7 through 21. This is your total income	22	41,789

Adjusted Gross Income	23	Educator expenses	23	
	24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
	25	Health savings account deduction. Attach Form 8889	25	
	26	Moving expenses. Attach Form 3903	26	
	27	Deductible part of self-employment tax. Attach Schedule SE	27	
	28	Self-employed SEP, SIMPLE, and qualified plans	28	
	29	Self-employed health insurance deduction	29	
	30	Penalty on early withdrawal of savings	30	
	31a	Alimony paid b Recipient's SSN	31a	
	32	IRA deduction	32	
	33	Student loan interest deduction	33	
	34	Tuition and fees. Attach Form 8917	34	
	35	Domestic production activities deduction. Attach Form 8903	35	
	36	Add lines 23 through 35	36	
	37	Subtract line 36 from line 22. This is your adjusted gross income	37	41,789