# **Personal Details:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Particulars*** | ***Primary Taxpayer******(as per SSN)*** | ***Spouse*** ***(as per SSN/Passport)*** | ***Child 1*** | ***Child 2*** | ***Any other dependent*** |
| First Name  | NIRANJAN | SUBHASHREE | PREETI PRIYANSHI |  |  |
| Middle Name |  |  |  |  |  |
| Last Name | NAYAK | NAYAK | NAYAK |  |  |
| Date of Birth *(mm/dd/yy)* | 07/02/78 | 09/05/86 | 03/21/2012 |  |  |
| SSN/ITIN | 746-59-1706 | 941-97-8103 | 941-97-8142 |  |  |
| How are you related to Primary Taxpayer? | SELF |  |  |  |  |
| Visa Type as on Dec 31, 2018 | H1B | H4 | H4 |  |  |
| Was there any change in the Visa Status during 2018? Mention dates | No | No | No |  |  |
| Marital Status as on Dec 31, 2018 | Married | Married |  |  |  |
| Date of Marriage*(mm/dd/yy)* | 04/23/2008 | 04/23/2008 |  |  |  |
| Current Address | 14048 BARKLEY ST , APT # 305 ,OVERLAND PARK,KANSAS - 66223 | 14048 BARKLEY ST , APT # 305 ,OVERLAND PARK,KANSAS - 66223 | 14048 BARKLEY ST , APT # 305 ,OVERLAND PARK,KANSAS - 66223 |  |  |
| Previous Address | 7804 ARBORETUM DRIVE , APT # 203, CHARLOTTE , NC - 28270 | 7804 ARBORETUM DRIVE , APT # 203, CHARLOTTE , NC - 28270 | 7804 ARBORETUM DRIVE , APT # 203, CHARLOTTE , NC - 28270 |  |  |
| First Port of Entry Date into US *(mm/dd/yy)* | 12/21/13 | 05/09/14 | 05/09/14 |  |  |
| No. of months stayed in US during 2018 | Full year | Full year | Full year |  |  |
| Will you stay in US for more than 6 months in 2018? (*Write***Yes***or* **No**) | Yes | yes | yes |  |  |
| Home Number | 617-792-3790 | 617-792-3790 |  |  |  |
| Cell Number | 913-575-2958 | 913-575-2958 |  |  |  |
| Work Number *(With Extension)* |  |  |  |  |  |
| Email Id | niranjan.nayak@rediffmail.com | niranjan.nayak@rediffmail.com |  |  |  |

# **Residency Details:**

|  |  |  |
| --- | --- | --- |
| ***Tax Year*** | ***Taxpayer (mm/dd/yy)*** | ***Spouse (mm/dd/yy)*** |
| ***States Resided*** | ***Period of Stay****(From Date & To Date/Till Date)* | ***States Resided*** | ***Period of Stay****(From Date & To Date/Till Date)* |
| ***2018*** | ***KS*** | ***Apr 3rd 2018 to Till Date***  | ***KS*** | ***Apr 3rd 2018 to Till Date*** |
| ***2018*** | ***NC*** | ***Sep 30th 2017 to Mar 31st 2018***  | ***NC*** | ***Sep 30th 2017 to Mar 31st 2018*** |
|  |  |  |  |  |
|  |  |  |  |  |

**Note:** Please provide the residency details properly for ALL the tax years listed above. This will help our Tax Experts to determine your correct "Residential Status" and check if we can go back and work on your previous year tax returns to get you any additional refund that you missed out. If you have not stayed in US in any of the above years, please write "N/A" which means "Not Applicable".

# **For Iowa/Massachusetts Residents Only:**

|  |  |  |
| --- | --- | --- |
|  | **Taxpayer (Yes/No)** | **Spouse (Yes/No)** |
| Did you or your Spouse file an Iowa Income Tax Return last year? If YES - Provide last year federal tax return | NO |  |
| Are you or your Spouse covered by Massachusetts Health Insurance? If YES - Provide Form 1099-HC | NO |  |

**Note:**Ignore this section if you were never a Resident of Iowa/Massachusetts

# **Employment Details:**

|  |  |  |
| --- | --- | --- |
|  | **Taxpayer** | **Spouse** |
| **Current Employer** | Sprint/United Management Company |  |
| Employer Location (City, State) | 6391 Sprint Parkway , Overland Park , KS - 66251 |  |
| Designation | Application Support Analyst III |  |
| Occupation/Domain | Telecommunication and Mobile Networking Services / Telecom Domain |  |
| Employment Start Date  | Apr 03rd 2018 |  |
| Employment End Date  | Till Date |  |
| Visa Status  | H1B – Petition Extended till 20th Dec 2019  | H4 – Petition Extended till 20th Dec 2019 |
|  |  |  |
| **Previous Employer** | Randstad Technologies |  |
| Employer Location (City, State) | 150 Presidential Way, 3rd Floor, Woburn , MA - 01801 |  |
| Designation | Senior Computer Systems Engineer |  |
| Occupation/Domain | Banking and Financial Services |  |
| Employment Start Date  | Oct 10th 2016 |  |
| Employment End Date  | Feb 02nd 2018 |  |
| Visa Status  | H1B – Petition Extended till 20th Dec 2019  | H4 – Petition Extended till 20th Dec 2019 |
| Do you work at ***Employer Location*** (or) at ***Client Location*** on projects/assignments?  | Employer Location  |  |

**Note:** Copy & paste the above table if you have more than one employer during Tax Year (TY) 2018.

# **Details of Expenses Incurred While Working on Client Project:**

(Fill this only if you/your spouse are/were working at **C**lient **L**ocation and NOT **E**mployer **L**ocation)

|  |  |  |
| --- | --- | --- |
| ***Particulars***  | ***Taxpayer*** | ***Spouse*** |
| ***Employer*** | ***Client Project***  | ***Client Project 1*** | ***Client Project 2*** |
| *Client/Employer Name* | *Sprint / United Management Company* | Bank of America |  |  |
| *Client Project Location (City, State)* | *6220 Sprint Parkway , Overland Park , KS - 66211* | 200 , North College Street , Charlotte, NC - 28202 |  |  |
| *Project Start Date in US (mm/dd/yy)* | Apr 03rd 2018 | Oct 2nd 2017 |  |  |
| *Project End Date in US (mm/dd/yy)* | Till Date | Feb 02nd 2018 |  |  |
| *Monthly Rent (including utilities)* | Rent $10271.17Utilities- $624.76 | Total Paid Yearly *$11435.93* |  |  |
| *Daily Meal Expense* |  |  |  |  |
| *Monthly Transport Charges (if not using own car)* | Own Car   |  |  |  |
| ***One-way*** *distance between your Home & Client Location* | 15 miles |  |  |  |
| ***One-way*** *distance between your Employer Location & Client Location* | NA | NA |  |  |
| *Expenses incurred to visit your Employer Location* | Vehicle - $478.44Other - $1083.10 Total Expenses = 1561.54 |  |  |  |
|  |  |  |  |  |

**Note: Project Start Date** is the date you exactly commenced the project. This can be found from the **Deputation Letter/Transfer Memorandum** issued by your Employer while deputing you on this project. **Project End Date** is the date you completed the project. If you are still working, please write ‘**Till Date’** in the Project End Date. As regards Rent, enter only the amount paid by **you**.Enter expenses amount only to the extent **not reimbursed** by your Employer. If your Annual Pay/Wages is so structured that your Employer pays Deputation Allowance towards your Conveyance, Mealsand Lodging& Other Incidental Expenses during the period of your deputation at the Client Project in US, then it is not permissible for you to claim the above Employee Business Expenses on your Tax Return. Any Unreimbursed Job Related Expenses can be claimed only on **Temporary Assignments** (which is expected to last for 12 Months or Less). For any clarifications, you can talk to us or go through IRS Publication 463 # [**http://www.irs.gov/pub/irs-pdf/p463.pdf**](http://www.irs.gov/pub/irs-pdf/p463.pdf)

# **Relocation Expenses:**

(Enter Airfare + Transportation Charges + Onward Meals & Tips + Boarding & Lodging (up to 7 days) + Packing Charges **to the extent not reimbursed by your Employer** though incurred by you)

|  |  |
| --- | --- |
| ***Type of Relocation*** | ***Amount of Expense Incurred (Only for Yourself)*** |
| *a) Have you moved/relocated from one CL to another CL during the TY 2018?* | *$1500* |
| *b) Have you moved/relocated from EL to CL during the TY 2018?* |  |
| *c) Have you moved/relocated from one EL to another EL during the TY 2018?* | *$2726* |
| *d) Have you moved/relocated from India to US during the TY 2018 for the purpose of employment?* |  |

**Note:** The moving distance between the two locations must be **at least 50 Miles** as per the IRS. **EL** stands for **Employer Location** and **CL** stands for **Client Location**.Enter expenses amount only to the extent not reimbursed by your Employer.

# **Other Professional/Job Related Expenses:**

(Enter only expenses incurred **during 2018**to the **extent not reimbursed** by your Employer)

|  |  |  |
| --- | --- | --- |
| ***Expense Type*** | ***Taxpayer $ Amount*** | ***Spouse*** ***$ Amount*** |
| *a) Cost of Professional Books & Supplies* |  |  |
| *b) Cost of Professional Membership Subscription* |  |  |
| *c) Cost of Professional Magazines* |  |  |
| *d) Uniform Expenses (For Attorneys/Doctors/similar professionals)* |  |  |
| *e) Name, Cost & Month you bought the asset for work purposes*  |  *$600* |  |
| *f) Internet Charges* ***per month*** | *$45* |  |
| *g) Cell Phone Charges* ***per month*** | *$40* |  |
| *h) Job Training or Higher Education Expenses* |  |  |
| *i) Parking and Toll Fees, if any paid on Client Locations* |  |  |
| *j) Employment Visa Processing Fees (including Attorney Fees)* |  |  |
| *k) Last Year Tax Preparation Fees* |  *$119* |  |
| *l) Job Hunting Expenses* |  |  |
| *m) Home Mortgage Interest & Points (For property in US) - Provide Form 1098 - Enter only the Interest Amount not your EMI* |  |  |
| *n) Property Taxes (For property in US)* |  |  |
| *o) Home Mortgage Interest (For property in India/Foreign Country) - Please mention Bank Name, Bank Address & Interest Amount in USD - Provide only Interest Amount not your EMI* |  |  |
| *p) Property Taxes (For property in India)* |  |  |
| *q) Student Loan Interest Paid in US - Provide Form 1098-E*  |  |  |
| *r) Tuition Fees Paid in US - Provide Form 1098-T* |  |  |
| *s) Contributions to Traditional IRA (Individual Retirement Account) - This is not 401K provided by your Employer. If Roth IRA, please mention Roth IRA* |  |  |
| *t) Contributions to HSA (Health Savings Account) - Provide Supporting Doc* |  |  |
| *u) Safe Deposit Box Rental / Margin Interest on Stocks*  |  |  |
| *v) Educator Expenses (if you/your spouse is a Teacher/Faculty)* |  |  |
| *w) Medical Expenses (Read Note Below)* |  *$1025* |  |
| *x) State Income Taxes Paid at the time of filing your* ***2014 Tax Return****- Provide 2014 Tax Return* |  |  |
| *y) Cost of Energy Saving Equipment (E.g. Solar Water Heater, Boiler, Skylights, Electric Heat Pump, Natural Gas Propane, Metal Roofing, Wooden Furnace, etc.) - Mention Equipment Purchased & Cost* |  |  |
| *z) Any other expenses not listed above* |  |  |

**Note:**If you are married and spouse was due for maternity during 2018, recollect if there was any trip made by your parents or in-laws or (or other relative) for maternity purposes. If **Yes** - Please fill the Visa Processing Fees, Round Trip Airfare Fees and Visitor Medical Insurance incurred for only **ONE Person** who assisted in your Spouse maternity. You may also claim this person as Dependent on your tax return if her stay in US was more than 6 months during 2018 and apply for her ITIN if she did not have a valid SSN.

# **Vehicle Information:**

|  |  |
| --- | --- |
|  |  |
| *a) Have you owned any Vehicle during the Tax Year 2018?* |  *Yes* |
| *b) Is this a Hybrid or Alternative Motor Vehicle or Electric Vehicle?* | *Alternative Motor Vehicle* |
| *c) Was the Vehicle used for travel to* ***Client Locations?*** | *Yes* |
|  *If used at Client Locations - Please provide the following information:* |  |
| *1) Make & Model of the Vehicle* | *2012 Nissan Sentra* |
| *2) Purchase Date* |  |
| *3) Cost Price* |  |
| *4) Total Mileage during Tax Year 2018(See Car Odometer)* |  |
| *5) One-way commuting distance between Home & Client Location* |  |
| *6) Sales & Excise Tax paid on the vehicle bought in Tax Year 2018* | *$241.59* |

# **Child & Dependent Care Expenses:**

|  |
| --- |
| **(Example: Day Care Expenses, Preschool/Nursery Expenses, etc. if Spouse WORKING or FULL TIME STUDENT)** |
| *a. Name of the Dependent for whom these expenses were incurred* |  *Preeti Priyanshi Nayak* |
| *b. Name of the Institution/Person to whom the amount was paid* |  *Elizabeth Elementary School & Overland Trail Elementary School* |
| *c. Federal ID/SSN of the Institution/Person to whom the amount was paid* |  |
| *d. Address of the Institution (Street Address, City, State, Zip code)* | *121 Elizabeth Lane, Matthews, NC 28105**6225 W 133rd St, Overland Park, KS 66209* |
| *e. Amount of Expenditure Incurred* | *$558.75* |
| *f. Amount reimbursed by the Employer, if any* |  |

# **Charitable Contributions**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sno** | **Name of the Charitable Institution** | **Amount Donated** | **Property Donated & its Fair Market Value (FMV) on the date of contribution** | **No. of Trips in the year X One way distance Home and the Charitable Institution** |
| **1** |  |   |  |  |
| **2** |  |  |  |  |

**Note:** Please maintain Receipts to support your claims.

# **Investments – Sale & Purchase of Stocks (ISOs, ESPPs, & Securities)**

|  |  |
| --- | --- |
| **Purchase Details** | **Sale Details** |
| Date Purchased | Stock Description | Quantity | Rate per Unit | Total = Qty \* Rate | Date Sold | Stock Description | Quantity | Rate per Unit | Total = Qty \* Rate |
|   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |

**Note:** If you have more than 20 Transactions, please send us the sale & purchase details in an excel sheet with columns listed above. Please note that you may be charged $5 for each extra page of your Schedule D while the first page is FREE. We can also help you in planning the timing of exercise of your Incentive Stock Options (ISOs) or Employee Stock Purchase Plan (ESPPs). Unplanned exercise of ISOs may greatly impact your AMT!

# **First Time Home Buyer Credit:**

|  |  |
| --- | --- |
|  | ***(Yes/No)*** |
| *a. Have you purchased (or) entered into a binding contract to buy a home* ***in US*** *after April 8th, 2009 but before May 1st, 2010?*  |  |
| *b. Is this the first home that you bought in US?* |  |
| *c. Is this home used for* ***your*** *principal residence purposes?* |  |
| *d. Have you owned a main home at any time during the three years immediately preceding the date of purchase of current home?* |  |
| *e. Enter the cost price of such home* |  |
| *f. Did you claim any First Time Home Buyer Credit on 2008 return? If yes, please mention the amount you claimed. Some taxpayers are required to repay the credit claimed in 15 tax years.*  |  |

# **Rental Income (If Any):**

**Note:** Please fill in these details if you had any Rental Income from your Residential/Commercial Property **in US**

|  |  |
| --- | --- |
| ***Particulars*** | ***Details*** |
| 1. *Property Type? (Residential/Commercial)*
 |  |
| 1. *Location/Address*
 |  |
| 1. *Specify the following:*
2. *No. of months rented in year 2018*
3. *No. of months* ***you*** *used for personal purpose*
 |  |
| 1. *Property is owned by (Taxpayer/Spouse/Joint)*
 |  |
| 1. *Date this property was purchased (mm/dd/yy)*
 |  |
| 1. *Cost of the property*
 |  |
| 1. *Rental Income received*
 |  |
| 1. *Rental Expenses incurred to earn Rent, if any*
 |  |

# **Foreign Income & Expenses (If Any):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Particulars*** | ***Salary Income*** | ***Dividend Income*** | ***Interest Income*** | ***Rental Income*** |
| 1. *Foreign Income from which source*
 |  |  |  |  |
| 1. *Amount of Foreign Income*
 |  |  |  |  |
| 1. *Foreign Taxes (if any) withheld*
 |  |  |  |  |