2016 Income Tax Return

Prepared For:

Ravinder Sathu and Saraswathi Jakkam 3620 146th PL NE Apt. D14 Bellevue, WA 98007

Prepared By:

TaxPreparerUSA 1290 Hartland Troy, MI 48083 Telephone: (586)201-9012 Email: filetaxwithgopi@gmail.com

1040		rtment of the Treasury–Interna 5. Individual Inco			201	6	OMB No. 1545-0074	IRS Us	e Only–Do	not write or staple in this space
For the year Jan. 1-Dec.		r other tax year beginning			, end					ate instructions.
Your first name and in	nitial		Last name						· · ·	al security number
Ravinder			Sathu						15	8-19-6036
If a joint return, spous	e's first na	ame and initial	Last name							social security number
Saraswath	i		Jakka	m					97	1-86-1723
Home address (numb	er and str	eet). If you have a P.O. box, se	ee instructions	s.			Apt. no.		▲ Mał	ke sure the SSN(s) above
3620 146t	h PL	NE					D14		🔺 an	d on line 6c are correct.
City, town or post offic	ce, state, a	and ZIP code. If you have a for	eign address,	also complete	spaces belo	ow (see	instructions).		Preside	ntial Election Campaign
Bellevue,	WA 9	8007								e if you, or your spouse if filing t \$3 to go to this fund. Checking
Foreign country name)		Fore	eign province/s	tate/county		Foreign postal c	ode	a box below refund.	will not change your tax or You Spouse
Filing Status	1	Single				4	Head of household (with qua	alifying pe	rson). (See instructions.) If
i iiiig otatus	- <u>-</u>			,					ild but not	your dependent, enter this
Check only one	3	Married filing separately	. Enter spou	ise's SSN ab			child's name here.	·		
box.		and full name here.					Qualifying widow(er)		·	child
Exemptions		X Yourself. If someone		-					• }	Boxes checked
	b	X Spouse		<u></u>		<u> </u>			. J	on 6a and 6b <u>2</u> No. of children
	С	Dependents:			Dependent's		(3) Dependent's	under	if child r age 17	on 6c who:
				social	security num	iber	relationship to you	child t	ying for ax credit	 lived with you <u>2</u> did not live with
If more than four	(1) First	name Last name sha Sathu		760		2755	aughter	(see	e instr.)	you due to divorce
dependents, see		nal Sathu			- <u>02-28</u> -49-41				X	(see instructions)
instructions and check here ►		akka Sathu			- <u></u> -97-94					Dependents on 6c
		ojana Jakkam			-98-81				⊣	not entered above
	<u>d</u>	Total number of exemptio	ns claimed							Add numbers on lines above ► 6
	7	Wages, salaries, tips, etc								127,067.
Income	8a	Taxable interest. Attach		· · /					-	
Attach Form(s)	b	Tax-exempt interest. Do		•						
W-2 here. Also	9a	Ordinary dividends. Attac	h Schedule	B if required.					. 9a	
attach Forms	b	Qualified dividends				. 91	6			
W-2G and 1099-R if tax	10	Taxable refunds, credits,	or offsets of	f state and loc	al income t	axes.			. 10	
was withheld.	11	Alimony received							. 11	
If you did not	12	Business income or (loss	s). Attach Sc	hedule C or C	C-EZ			· · <u>·</u>	. 12	
get a W-2,	13	Capital gain or (loss). Att	ach Schedul	le D if require	d. If not req	uired, (check here		13	
see instructions.	14	Other gains or (losses).								
	15a	IRA distributions	. 15a			b Tax	able amount		. 15b	
	16a	Pensions and annuities					able amount			
	17	Rental real estate, royalti								
	18	Farm income or (loss). A								
	19 20a	Unemployment compens								
	20a 21	Social security benefits . Other income. List type a				DIAX	able amount		. 20b 21	
	21	Combine the amounts in			es 7 throug	h 21 -	Chis is your total i	ncome	_	127,067.
	23	Educator expenses								12//00/
Adjusted	23	Certain business expens					-			
Gross		fee-basis government off		•	•		4			
Income	25	Health savings account of								
	26	•	Moving expenses. Attach Form 3903 .							
	27	Deductible part of self-en					7			
	28	Self-employed SEP, SIM	PLE, and qu	alified plans .		. 28	3			
	29	Self-employed health inst	urance dedu	ction		. 29	9			
	30	Penalty on early withdraw	-				D			
	31a	Alimony paid b Recipi								
	32	IRA deduction								
	33	Student loan interest ded							_	
	34	Tuition and fees. Attach				-			_	
	35	Domestic production acti								
	36 27	Add lines 23 through 35								0. 127,067.
	37	Subtract line 36 from line	; ZZ. THIS IS)	your aujuste	u yross inc	Joine	<u></u>		37	

Form 1040 (2016	⁵⁾ Ra	avinder Sathu						<u>58-1</u>	9-6036 Page 2
Tax and	38	Amount from line 37 (adjus	ted gross income)				<u></u> .	38	127,067.
Credits	39a	Check f You were bo	rn before January 2	, 1952,	Blind		es		
		if:) Spouse was	born before Januar	ry 2, 1952, 🗌	Blind	∫ checked	▶ 39a 0		
\frown	b	If your spouse itemizes on a	a separate return or	you were a du	al-status	alien, check h	ere 🕨 39b 🗌		
Standard Deduction	40	Itemized deductions (fror	n Schedule A) or yo	our standard	deductio	n (see left ma	rgin)	40	12,600.
for-	41	Subtract line 40 from line 3							114,467.
People who	42	Exemptions. If line 38 is \$1							24,300.
check any box on line	43	Taxable income. Subtract		-					90,167.
39a or 39b or	44	Tax (see instructions). Che				-		44	14,086.
who can be claimed as a	44 45	Alternative minimum tax							14,000.
dependent, see	-	Excess advance premium t							
instructions.	46								14 096
 All others: Single or 	47	Add lines 44, 45, and 46 .					🕨	47	14,086.
Married filing	48	Foreign tax credit. Attach F				48		_	
separately, \$6,300	49	Credit for child and depend	•			49		_	
Married filing	50	Education credits from For				50		_	
jointly or Qualifying	51	Retirement savings contribution				51		_	
widow(er), \$12,600	52	Child tax credit. Attach Sch				52	1,100	•	
Head of	53	Residential energy credits.				53			
household, \$9,300	54	Other credits from Form: a	3800 b 88	01 ° 🗌 _		54			
(\$0,000	55	Add lines 48 through 54. Th	hese are your total	credits				55	1,100.
	56	Subtract line 55 from line 4	7. If line 55 is more	than line 47, e	nter -0-			56	12,986.
	57	Self-employment tax. Attac	h Schedule SE					57	
Other	58	Unreported social security	and Medicare tax fro	om Form: a	413	7 b 8	919	58	
Taxes	59	Additional tax on IRAs, othe	er qualified retireme	nt plans, etc. A	ttach Fo	rm 5329 if requ	uired	59	
Takes	60a	Household employment tax	es from Schedule H	1				60a	
	b	First-time homebuyer credi	t repayment. Attach	Form 5405 if 1	required			60b	
	61	Health care: individual resp	onsibility (see instru	uctions) Full-ye	ear cover	age X		61	
	62	Taxes from: a Form 8	3959 b Form 8	1960 c 🗌 Ins	structions	; enter code(s	3)	62	
	63	Add lines 56 through 62. T						63	12,986.
Payments		Federal income tax withhele				64	16,149		
	65	2016 estimated tax paymer				65		-	
If you have a	66a	Earned income credit (El				66a			
qualifying	b	Nontaxable combat pay ele						-	
child, attach Schedule EIC.	67	Additional child tax credit.		12		67			
	68	American opportunity credit				68		-	
	69	Net premium tax credit. Att				69		-	
	70	Amount paid with request f				70		-	
	-					70		-	
	71	Excess social security and						-	
	72	Credit for federal tax on fue				72			
	73	Credits from Form: a 2439				73		_	
	74	Add lines 64, 65, 66a, and					<u></u> •	74	16,149.
Refund	75	If line 74 is more than line 6					· _	75	3,163.
	76a	Amount of line 75 you want						76a	3,163.
Direct deposit?	▶ b		00339		c Type:	X Checking	Savings		
See instructions.	► d		14736089						
	77	Amount of line 75 you want	applied to your 2	2017 estimated	d tax 🕨	77			
Amount	78	Amount you owe. Subtra				o pay, see inst	ructions	78	0.
You Owe	79	Estimated tax penalty (see	instructions)			79			
Third Party		you want to allow another pe			e IRS (se	ee instructions		omplete	e below. X No
Designee	na	signee's me		Phone no.			Personal identi number (PIN)	lication	
Sign	Unc	er penalties of periurv. I declare that I ha urately list all amounts and sources of inc	ave examined this return and ome I received during the ta	accompanving schedu x year. Declaration of	ules and state f_preparer (ot	ements. and to the b her than taxpayer) is	est of mv knowledge ar based on all informatio	nd belief. th n of which	ev are true. correct. and preparer has any knowledge.
Here	Yo	ur signature		Date	Your occ	cupation		Daytime	phone number
Joint return? See instr.									
Keep a copy for your	Sp	ouse's signature. If a joint returr	n, both must sign.	Date	Spouse's	s occupation			S sent you an Identity Protection
records.								PIN, ente here (se	
Paid	Pri	nt/Type preparer's name	Preparer's signature	9	Date		Check X if	PTIN	
		opi Neelam					self-employed	P	00654535
Preparer		m's name TaxPrep	arerUSA		•		Firm's EIN 🕨		605216
Use Only		, 1200 Ua					Phone no.		-
	FIL		II 48083				(58)	5)20	1-9012

.

Department of the Treasury Internal Revenue Service

Paid Preparer's Due Diligence Checklist Earned Income Credit (EIC), Child Tax Credit (CTC), and American Opportunity Tax Credit (AOTC)

► To be completed by preparer and filed with Form 1040, 1040A, 1040EZ, 1040NR, 1040SS, or 1040PR. ▶ Information about Form 8867 and its separate instructions is at www.irs.gov/form8867. OMB No. 1545-1629

20 6 Attachment 177 Sequence No.

Taxpayer identification number

Ravinder Sathu and Saraswathi Jakkam Enter preparer's name and PTIN

158-19-6036

Gopi Neelam P00654535

Due Diligence Requirements

Taxpayer name(s) shown on return

Please complete the appropriate column for all credits claimed on this return	EIC	CTC/ACTC	АОТС
(check all that apply).			7010
1 Did you complete the return based on information for tax year 2016			
provided by the taxpayer or reasonably obtained by you?	Yes No	X Yes No	Yes No
2 Did you complete the applicable EIC and/or CTC/ACTC worksheets found in the			
Form 1040, 1040A, 1040EZ, or 1040NR instructions, and/or the AOTC			
worksheet found in the Form 8863 instructions, or your own worksheet(s) that			
provides the same information, and all related forms and schedules for each			
credit claimed?	Yes No	X Yes No	Yes No
3 Did you satisfy the knowledge requirement? Answer "Yes" only if you can			
answer "Yes" to both 3a and 3b. To meet the knowledge requirement, did you:	☐Yes ☐No	X Yes No	☐Yes ☐No
a Interview the taxpayer, ask adequate questions, and document the taxpayer's			
responses to determine that the taxpayer is eligible to claim the credit(s)?	☐Yes ☐No	X Yes No	☐Yes ☐ No
b Review adequate information to determine that the taxpayer is eligible to claim			
the credit(s) and in what amount?	Yes No	X Yes No	Yes No
4 Did any information provided by the taxpayer, a third party, or reasonably known			
to you in connection with preparing the return appear to be incorrect,			
incomplete, or inconsistent? (If "Yes," answer questions 4a and 4b. If "No," go			
to question 5.)	Yes No	Yes X No	Yes No
a Did you make reasonable inquiries to determine the correct or complete			
information?	Yes No	Yes No	Yes No
b Did you document your inquiries? (Documentation should include the			
questions you asked, whom you asked, when you asked, the information that			
was provided, and the impact the information had on your preparation of the			
return.)	Yes No	Yes No	Yes No
5 Did you satisfy the record retention requirement? To meet the record retention			
requirement, did you keep a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility or to compute the amount for the			
credit(s)?	YesNo	X Yes No	YesNo
In addition to your notes from the interview with the taxpayer, list those		A Tes INO	
documents, if any, that you relied on.			
	-		
6 Did you ask the taxpayer whether he/she could provide documentation to			
substantiate eligibility for and the amount of the credit(s) claimed on the return?	☐Yes ☐No	X Yes No	☐Yes ☐ No
7 Did you ask the taxpayer if any of these credits were disallowed or reduced in a			
previous year?			
(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)	YesNo	X Yes No	□Yes□No
a Did you complete the required recertification form(s)?	☐Yes ☐No	☐Yes ☐No	Yes No
8 If the taxpayer is reporting self-employment income, did you ask adequate			
questions to prepare a complete and correct Form 1040, Schedule C?	Yes No	Yes No	Yes No
For Paperwork Reduction Act Notice, see separate instructions.		F	orm 8867 (2016)

aperwork Reduction Act Notice, see separate instructions. or UYA

158-19-6036

Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go to question 10.)

		EIC	CTC/ACTC	AOTC
9 a	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tie-breaker rules), and have you determined that this taxpayer is, in fact, eligible to claim the EIC for the number of children for whom the EIC is claimed?	Yes No		
b	Did you explain to the taxpayer that he/she may not claim the EIC if the taxpayer has not lived with the child for over half the year, even if the taxpayer has supported the child?	Yes No		

Due Diligence Questions for Returns Claiming CTC and/or additional CTC (If the return does not claim CTC or Additional CTC, go to question 11.)

10 a	Does the child reside with the taxpayer who is claiming the CTC/ACTC? (If		
	"Yes," go to question 10c. If "No," answer question 10b.)	X Yes No	
b	Did you ask if there is an activeForm 8332, Release/Revocation of Claim to		
	Exemption for Child by Custodial Parent, or a similar statement in place and,		
	if applicable, did you attach it to the return?	Yes No	
С	Have you determined that the taxpayer has not released the claim to another		
	person?	X Yes No	

Due Diligence Questions for Returns Claiming AOTC (If the return does not claim AOTC, go to Credit Eligibility Certification.)

11	Did the taxpayer provide substantiation such as a Form 1098-T and receipts for						
	the qualified tuition and related expenses for the claimed AOTC?			Yes No			
	▶ You have complied with all due diligence requirements with respect to the credits claimed on the return of the						
	taxpayer identified above if you:						
	A Operation of the Former 2007 to the fully and a second show of a second state the section	الالمنا المحالية معاليه الا	the sheathlatten .	- 11			

- A. Complete this Form 8867 truthfully and accurately and complete the actions described in this checklist for all credits claimed:
- B. Submit Form 8867 in the manner required;
- C. Interview the taxpayer, ask adequate questions, document the taxpayer's responses on the return or in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) and in what amount(s); and
- D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 8867 instructions under Document Retention.
 - 1. A copy of Form 8867,
 - 2. The applicable worksheet(s) or your own worksheet(s) for any credits claimed,
 - 3. Copies of any taxpayer documents you may have relied upon to determine eligibility for and the amount of the credit(s),
 - 4. A record of how, when, and from whom the information used to prepare this form and worksheet(s) was obtained, and
 - 5. A record of any additional questions you may have asked to determine eligibility for and amount of the credits, and the taxpayer's answers.

▶ If you have not complied with all due diligence requirements for all credits claimed, you may have to pay a \$510 penalty for each credit for which you have failed to comply.

Credit Eligibility Certification

12	Do you certify that all of the answers on this Form 8867 are, to the best of your		
	knowledge, true, correct and complete?		X Yes No
UYA		F	Form 8867 (2016)