

Department of the Treasury - Internal Revenue Service

Form **9325** (January 2017)

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you	for participating in IRS e-file.			
Taxpayer n	ame			
Tashib 2	Alam	_		
Taxpayer a	ddress (optional)			
13910 T	ukla Intl Blvd	_		
Seattle	, WA 98168	_		
1 .	Your federal income tax return for 2019	was filed electronically with the	IRS	Submission
1. x	Processing Center. The electronic filing services were pro	•		
2. x	signature. You entered a PIN or authorized the Electronic	a Personal Identification Number (Retum Originator (ERO) to enter or xxxxxxx2020288p1dyr1t	, ,	С
3.	Your return was accepted on . Allo	ow 4 to 6 weeks for the processing	of your return.	
	The Earned Income Credit or a dependent's exemption on child's name and social security number mismatch.	your return may be reduced or disa	llowed due to a	
4.	Your electronic funds withdrawal payment request was acc	epted for processing.		
5.	Your electronic funds withdrawal payment request was not	accepted for processing. Refer to	the "If You Owe Tax" :	section.
6.	Your Form 4868, Application for Automatic Extension of Til	me to File U.S. Individual Income Ta	ax Return, was	
	accepted on The Submiss is	sion ID assigned to your extension		

DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at www.irs.gov, or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to *www.irs.gov* and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to www.irs.gov/e-pay.

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to www.irs.gov. You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. **If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.**

Instructions for Electronic Return Originators

Line 2 - PIN Presence Indicator - Check box 2 if the taxpayer entered a PIN or authorized the ERO to enter or generate the PIN for the taxpayer, and the Acknowledgement File PIN Presence Indicator is a "Practitioner PIN," "Self-Select PIN" or "Online Filer PIN." Form 8879, IRS *e-file* Signature Authorization, is required if the ERO enters or generates the PIN or if the Practitioner PIN method is used. Use Form 8453, U.S. Individual Income Tax Transmittal for an IRS *e-file* Return, to send required paper forms or supporting documentation listed next to the form check boxes (do not send Forms W-2, W-2G, or 1099R).

- Line 3 Exception Processing Check box 3 if the Acknowledgement File Acceptance Code equals "Exception." The acceptance code indicates that this return has been previously rejected and this subsequent submission still has invalid data.
- **Line 4** Payment Acknowledgement Literal Check box 4 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field equals "Payment Request Received."
- Line 5 Payment Acknowledgement Literal Check box 5 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field does not equal "Payment Request Received." If box 5 is checked, inform the taxpayer that he/she must pay by check, money order, debit card, or credit card.

Note: EROs can use the Acknowledgement File information, translated by the transmitter, to complete Form 9325.

Tashib Alam

		nent of the Treasury-Internal Revenue Service . Individual Income Tax	k Return	201	9	OMB No. 154	15-0074	IRS Use Or	lly-Do not	write	or staple in	ı this s	pace.
Filing Status Check only one ox.	☐ If yo	Single Head of household (HOH) u checked the MFS box, enter the if the qualifying person is a chi	Qualine name of sp	-	ow(e	er) (QW) ecked the H		Married fili				-S)	
Your first name			Last name	паоропас	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>			Yours	social	I security n	numbe	ar .
Tashib	o ana i	Thouse Initial	Alam								X-XXXX		
	spouse	e's first name and middle initial	Last name								ocial secu		ımher
ii joiiit rotaiii, c	podoc	o mot hame and middle middle	Laornamo						Орош		oolal ocoal	ity iic	bci
	•	ber and street). If you have a P.O. bo	ox, see instructio	ns.				Apt. no.	Check h	nere if y	tial Election	pouse i	
City, town or p	ost off	fice, state, and ZIP code. If you have	a foreign addres	ss, also com	plete	spaces belo	w (see	instructions).			ox below will n		ge your
Seattle,	WA 9	98168	· ·		•		`	,	tax or re	efund.	You	ı 🔲	Spouse
Foreign countr	y nam	е	Foreign pro	ovince/state	e/coun	ty	Foreig	n postal code			an four de check he		
Standard	Som	neone can claim: 🗌 You as	s a dependent	: <u> </u>	our sp	ouse as a	deper	ndent	•				
eduction		Spouse itemizes on a separate re	eturn or you w	ere a dua	l-stat	us alien							
	You	: Were born before January	y 2, 1955	☐ Aı	e blir	nd							
ge/Blindness	Spo	use: Was born before Janu	ary 2, 1955	☐ Is	blind								
Dependents	s (see	instructions):	(2) Social appl	rity number	(2)	Dalationahin te		(4) chec	k if qual	ifies	for (see	inst.)):
(1) First name)	Last name	(2) Social secu	anty number	(3)	Relationship to	you	Child tax	credit	С	Credit for oth	ner de	pendents
											[
	1	Wages, salaries, tips, etc. Attac	ch Form(s) W-	.2						1		2	2,646
	2 a	Tax-exempt interest	. 2a			b Taxable	intere	st	2	2b			
Standard Deduction	3a	Qualified dividends	. 3a			b Ordinary	divide	ends	3	3b			
	4a	IRA distributions	. 4a			b Taxable	amou	nt	4	4b			
 Single or Married filing separately, \$12,200 	C	Pensions and annuities						nt		1d 			
Married filing	5a	Social security benefits	. 5a 			b Taxable				5b 			
jointly or Qualifying	6	Capital gain or (loss). Attach So Other income from Schedule 1,		-		•				6 7a			0 006
widow(er), \$24,400	7a b	Add lines 1, 2b, 3b, 4b, 4d, 5b,				 income		• • • • • •		7b			9,006 1,652
 Head of household, 	8a	Adjustments to income from So					 			Ba			0
\$18,350	b	Subtract line 8a from line 7b. The								3b		4	1,652
If you checked any box under	9	Standard deduction or itemiz	-				9	12,	,200				
Standard Deduction, see instructions.	10	Qualified business income deductio	n. Attach Form 8	8995 or For	m 899	95-A 1	0		,801				
	11a	Add lines 9 and 10							1	l1a		1	6,001

b Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-

	12a	Tax (see instructions). Check if a	ny from:							
		1 ☐ Form(s) 8814 2 ☐ Form	4972 3 □		12a		2,	887		
	b	Add Schedule 2, line 3, and line 1	2a and enter	the total .				▶ 12	2b	2,887
	13a	Child tax credit or credit for other	dependents		13a					
	b	Add Schedule 3, line 7, and line 1	3a and enter	the total .				▶ 13	3b	1,323
	14	Subtract line 13b from line 12b. If	zero or less,	enter -0				1	4	1,564
	15	Other taxes, including self-employ	yment tax, fror	n Schedul	e 2, line 1	0		1	5	
	16	Add lines 14 and 15. This is your	•					_	6	1,564
	17	Federal income tax withheld from	Forms W-2 a	nd 1099 .				1	7	1,112
	18	Other payments and refundable of	redits:							
 If you have a qualifying 	a	Earned income credit (EIC)			18a					
child, attach Sch. EIC.	b	Additional child tax credit. Attach								
 If you have nontaxable combat pay, 	С	American opportunity credit from	Form 8863, lir	ne 8	18c			882		
see instructions.	d	Schedule 3, line 14								
	е	Add lines 18a through 18d. These are you			-	credits		▶ 18	3e	882
	19	Add lines 17 and 18e. These are						▶ 1	9	1,994
Refund	20	If line 19 is more than line 16, subtract line			mount you c	verpa	id	2	0	430
	21 a	Amount of line 20 you want refunded	d to you. If For	m 8888 is a	ttached, cl	neck h	ere ►	☐ 2 1	la	430
Direct deposit?			0 1 0 5	▶ c Type:			Savin			
See instructions.	► d	Account number X X X X X		4 8 1	$\overline{1}$					
	22	Amount of line 20 you want applied to yo			▶ 22					
Amount	23	Amount you owe. Subtract line 19 from I	ine 16. For details	s on how to p	ay, see inst	ruction	s	▶ 2	3	
You Owe) 24	Estimated tax penalty (see instruc	ctions)		▶ 24					
Third Party	Do	you want to allow another person (other than you				S? See	instruction		=	es.Complete below.
Designee (Other than	De	signee's	Р	hone		F	Personal ic		X N	lo
paid preparer)		me ► penalties of perjury, I declare that I have ex		o. ►	anving sche		number (Pl		nd to	the hest of
Sign Here	my kn	owledge and belief, they are true, correct, a			, ,					
		ch preparer has any knowledge. our signature	Date	Your occupa	ation					you an Identity
Joint return?	122	54	10-05-2020					(see inst.)		enter it here
Keep a copy for your records.	reep a copy for '							rotect	your spouse an ion PIN, enter it here	
	Ph	one no. 775-287-3272	Email address	-			-			
Paid	Pre	eparer's signature			Date 10-15-2	2020	PTIN	YYY Y	1	Check if: 3rd Party Designee
Preparer	Pre	parer's name Vivek Bhatia			Phone no.		XXXXX -636-6		- ½	Self-employed
Use Only	Firr	m's name ▶ Precise Bookkeeping	Services LI	ıC						
	Firr	n's address ▶ 1281 Terminal Way Su	ite 215							
		Reno, NV 89502						Firm's EIN	<u>ı ▶</u>	

Form 1040 (2019)

Tashib Alam

Page 2

xxx-xx-xxxx

SCHEDULE 1

(Form 1040 or 1040-SR)

Department of the Treasury

Internal Revenue Service

Tashib Alam

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

Additional Income and Adjustments to Income

▶ Attach to Form 1040 or 1040-SR.

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

OMB No. 1545-0074

2019

Attachment Sequence No. **01**

Your social security number

XXX-XX-XXXX

At any time during 2019, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any Part I Additional Income Taxable refunds, credits, or offsets of state and local income taxes **b** Date of original divorce or separation agreement (see instructions) 3 Other gains or (losses). Attach Form 4797 4 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 19,006 6 Farm income or (loss). Attach Schedule F 6 7 7 8 Other income. List type and amount > 8 19,006 Part II Adjustments to Income Educator expenses Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach 11 12 12 13 Moving expenses for members of the Armed Forces. Attach Form 3903 13 14 Deductible part of self-employment tax. Attach Schedule SE 15 16 Self-employed health insurance deduction Date of original divorce or separation agreement (see instructions) 19 19 Student loan interest deduction 21 Add lines 10 through 21. These are your adjustments to income. Enter here and on Form 1040 or

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

Schedule 1 (Form 1040 or 1040-SR) 2019

EEA

SCHEDULE 3 (Form 1040 or 1040-SR)

Additional Credits and Payments

OMB No. 1545-0074 **2019**

2019 Attachment

Department of the Treasury Internal Revenue Service

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

► Attach to Form 1040 or 1040-SR.

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

Sequence No. 03
Your social security number

Tash	nib Alam	xxx-xx-xxx	ζ
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	1,323
4	Retirement savings contributions credit. Attach Form 8880	4	
5	Residential energy credits. Attach Form 5695	5	
6	Other credits from Form: a 3800 b 8801 c	6	
7	Add lines 1 through 6. Enter here and include on Form 1040 or 1040-SR, line 13b	7	1,323
Part I	Other Payments and Refundable Credits		
8	2019 estimated tax payments and amount applied from 2018 return	8	
9	Net premium tax credit. Attach Form 8962	9	
10	Amount paid with request for extension to file (see instructions)	10	
11	Excess social security and tier 1 RRTA tax withheld	11	
12	Credit for federal tax on fuels. Attach Form 4136	12	
13	Credits from Form: a 2439 b Reserved c 8885 d .	13	
_14	Add lines 8 through 13. Enter here and on Form 1040 or 1040-SR, line 18d	14	0

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

Schedule 3 (Form 1040 or 1040-SR) 2019

EEA

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

Tas	hib Alam							XXX	x-xx-xxx	X
Cau	tion: The IRS compares amo	unts reported	on your tax re	eturn with amounts	s showr	n on S	chedule(s) K-1.			
Pa	rt II Income or Loss	From Par	tnerships	and S Corpor	ation	s - No	ote: If you report a loss, re	ceive	a distributio	n, dispose of
	stock, or receive a lo	oan repaymen	t from an S co	orporation, you m u	ust che	ck the	box in column (e) on line 2	28 and	d attach the	required basis
							s not at risk, you must che			
	line 28 and attach Fo	•		•	,		, , ,			. ()
		,	,							
27	Are you reporting any loss r									
	passive activity (if that loss v	•		,.				red "Y	· —	П.,
	see instructions before comp	pleting this sec	tion						. L Yes	x No
28	l:	a) Name		(b) Enter P for partnership; S		heck if eign	(d) Employer identification) Check if is computation	(f) Check if any amount is
		a) Name		for S corporation		ership	number	is	s required	not at risk
ABr	others Union Inc			s			81-4202020			
В										
C D										
D					1 7				Ti I	
	Passive Income	and Loss		T		No	onpassive Income and Lo			
							•	33		
	(g) Passive loss allowed	1 ' '	sive income hedule K-1	(i) Nonpassive lo		d	(j) Section 179 expense			ssive income
	(attach Form 8582 if required)	IIOIII SCI	nedule K-1	(see Schedu	lie K-1)		deduction from Form 4562		Hom Scn	edule K-1
Α										19,006
В										
С										
C D										
29a	Totals									19,006
b	Totals									25,000
	Add columns (h) and (k) of li	ina 20a						30		10.006
30	() ()								 ,	19,006
31	Add columns (g), (i), and (j)							31	()
32	Total partnership and S c				30 and	3.1		32		19,006
Pa	rt III Income or Loss	From Est	ates and T	rusts						
33			(a) Nom	_					(b) Employ	/er
33			(a) Nam	е					identification nu	umber
Α										
В										
	Pas	sive Income	and Loss				Nonpassive Inc	ome a	and Loss	
	(c) Passive deduction or loss allow (attach Form 8582 if required)			Passive income n Schedule K-1			(e) Deduction or loss from Schedule K-1		(f) Other incor Schedule	
	(attacin i orini ocoz ii requirea)	'	11011	- Concadio IX I			TOTAL CONTINUE TO T		Concaule	
Α										
В										
34a	Totals									
b	Totals									
35	Add columns (d) and (f) of li	ne 34a						35		
36	Add columns (c) and (e) of li	ine 34b						36	()
37	Total estate and trust inco		Combine line	as 35 and 36				37	\	
							nduits (REMICs) - R		ual Hold	
ıa	it iv income or Loss			(c) Excess inclus		11 00	` '	Colu		
38	(a) Name	(b) Employer id		Schedules Q,			(d) Taxable income (net loss)		(e) Income	
	. ,	num	ber	(see instruct	tions)		from Schedules Q , line 1b		Schedules Q,	line 3b
39	Combine columns (d) and (e) only. Enter t	he result here	and include in the	total on	line 4	1 below	39	<u> </u>	
Pa	rt V Summary									
40	Net farm rental income or (I	oss) from For	m 4835 . Also	, complete line 42	below			40		
41	Total income or (loss). Combine	,		•				41		19,006
							,	71		10,000
42	Reconciliation of farming	•		, .						
	farming and fishing income	•	· ·	•						
	(Form 1065), box 14, code E	3; Schedule K	-1 (Form 1120)-S), box 17, code						
	AC; and Schedule K-1 (Forr	m 1041), box	14, code F (se	e instructions)		42				
43	Reconciliation for real estate	professionals.	If you were a re	eal estate profession	al					
	(see instructions), enter the net	income or (loss) you reported a	nvwhere on Form						

43

1040, 1040-SR, or Form 1040-NR from all rental real estate activities in which

you materially participated under the passive activity loss rules

8863

Education Credits (American Opportunity and Lifetime Learning Credits) ► Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

Attachment 50 Sequence No.

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

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

Your social security number XXX-XX-XXXX

CAUTION

Tashib Alam

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.

	T D (111 A 1 D (1 D))				
Par					
1	After completing Part III for each student, enter the total of all amounts from all Part	ts III, li	ne 30	1	2,205
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household,				
	qualifying widow(er)	2	90,000		
3	Enter the amount from Form 1040 or 1040-SR, line 8b. 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	41,652		
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education				
	credit	4	48,348		
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or				
	qualifying widow(er)	5	10,000		
6	If line 4 is:				
	• 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	>		6	1.000
	at least three places)]			
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year a	and me	et the		
	conditions described in the instructions, you can't take the refundable American or	portun	ity credit;		
	skip line 8, enter the amount from line 7 on line 9, and check this box		▶ 🗌	7	2,205
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter th	e amou	unt here and		
	on Form 1040 or 1040-SR, line 18c. Then go to line 9 below			8	882
Par	t II Nonrefundable Education Credits				
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see ins	structions)	9	1,323
10	After completing Part III for each student, enter the total of all amounts from all Pal	ts III, li	ne 31. If		
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19			10	0
11	Enter the smaller of line 10 or \$10,000			11	
12	Multiply line 11 by 20% (0.20)			12	
13	Enter: \$136,000 if married filing jointly; \$68,000 if single, head of household, or				
	qualifying widow(er)	13			
14	Enter the amount from Form 1040 or 1040-SR, line 8b. 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			
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			
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or				
	qualifying widow(er)	16			
17	If line 15 is:				
	• 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 (round	ed to at	least three		
	places)			17	
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (18	0
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Lim		•		
	instructions) here and on Schedule 3 (Form 1040 or 1040-SR), line 3		•	19	1,323

Name(s) shown on return

Your social security number

Tashib Alam XXX-XX-XXXX

!	
CAUTION	

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	on. See instructions.							
20 Student name (as shown on page 1 of your tax return)	21 Student social security number (as shown on page 1 of							
	your tax return)							
Tashib Alam	xxx-xx-xxxx							
22 Educational institution information (see instructions)								
a. Name of first educational institution	b. Name of second educational institution (if any)							
Bellevue College								
 (1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 3000 Landerholm Circel SE Bellevue, WA 98007 	(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.							
(2) Did the student receive Form 1098-T x Yes No	(2) Did the student receive Form 1098-T Yes No No							
(3) Did the student receive Form 1098-T	(3) Did the student receive Form 1098-T							
from this institution for 2018 with box \mathbf{x} Yes \square No	from this institution for 2018 with box							
7 checked?	7 checked?							
 (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. (4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution. 								
91-0819265								
23 Has the Hope Scholarship Credit or American opportunity	Vec Cton!							
credit been claimed for this student for any 4 tax years	Yes - Stop! Go to line 31 for this student.							
before 2019?	Go to line 31 for this student.							
24 Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2019 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	Yes - Go to line 25. No - Stop! Go to line 31 for this student.							
25 Did the student complete the first 4 years of postsecondary	Yes - Stop!							
education before 2019? See instructions.	Go to line 31 for this No - Go to line 26. student.							
26 Was the student convicted, before the end of 2019, of a felony for possession or distribution of a controlled substance?	Yes - Stop! Go to line 31 for this student. No - Complete lines 27 through 30 for this student.							
CAUTION you complete lines 27 through 30 for this student, don't	lifetime learning credit for the same student in the same year. If complete line 31.							
American Opportunity Credit								
27 Adjusted qualified education expenses (see instructions). Don't								
28 Subtract \$2,000 from line 27. If zero or less, enter -0								
29 Multiply line 28 by 25% (0.25)								
30 If line 28 is zero, enter the amount from line 27. Otherwise, add								
enter the result. Skip line 31. Include the total of all amounts fro	m all Parts III, line 30, on Part I, line 1 30 2,205							
Lifetime Learning Credit	de the tetal of all accounts from all D							
31 Adjusted qualified education expenses (see instructions). Includ III, line 31, on Part II, line 10								

Form **8995**

Qualified Business Income Deduction Simplified Computation

► Attach to your tax return.

OMB No. 1545-0123

2019

Department of the Treasury Internal Revenue Service Name(s) shown on return

► Go to www.irs.gov/Form8995 for instructions and the latest information.

Attachment Sequence No. **55**

Your taxpayer identification number

Tash	ib Alam		xxx-	-xx-xxx
1		xpayer ion number	(c) Qualified business income or (loss)	
i_	K1S: Brothers Union Inc 81-42	02020		19,006
ii				
iii				
iv				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v,			
_	column (c)	19,006		
3	Qualified business net (loss) carryforward from the prior year)		
4	Total qualified business income, Combine lines 2 and 3. If zero or less, enter -0	19,006		
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	3,801
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)			
	(see instructions)	0		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior			
•	year)		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero			
•	or less, enter -0	0		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	0
10	Qualified business income deduction before the income limitation. Add lines 5 and 9		10	3,801
11	Taxable income before qualified business income deduction	29,452		2,002
12	Net capital gain (see instructions)	0		
13	Subtract line 12 from line 11. If zero or less, enter -0	29,452		
14	Income limitation. Multiply line 13 by 20% (0.20)		14	5,890
15	Qualified business income deduction. Enter the lesser of line 10 or line 14. Also enter this amount on			
	the applicable line of your return	•	15	3,801
16	Total qualified business (loss) carryforward Combine lines 2 and 3. If greater than zero, enter -0		16	(0)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than			·
	zero, enter -0	<u></u> .	17	(0)
Fan D.	ives. Ast and Denominal Reduction Act Nation and instructions			F 900E (0040)

For Privacy Act and Paperwork Reduction Act Notice, see instructions. $_{\mathsf{EEA}}$

Form 8995 (2019)

Amount from Form 1040, line 9...... 12,200

Line 11 above is the difference between these amounts 29,452

Form **8867**

Department of the Treasury

Internal Revenue Service

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC), Child Tax Credit (CTC) (including the Additiona Child Tax Credit (ACTC) and Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.
 Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074

2019

Attachment Sequence No. **70**

Taxpayer name(s) shown on return

Tashib Alam
Enter preparer's name and PTIN

Vivek Bhatia XXXXXXXX **Due Diligence Requirements** Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I-V for the benefit(s) claimed (check all that apply). ☐ EIC ☐ CTC/ ACTC/ODC HOH Did you complete the return based on information for tax year 2019 provided by the taxpayer or Yes No N/A x reasonably obtained by you? If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS 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? \mathbf{x} Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following. • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status. • Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to compute the amount(s) of any credit(s) X Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes," X answer questions 4a and 4b. If "No," go to question 5.) a Did you make reasonable inquiries to determine the correct, complete, and consistent information? b Did you contemporaneously 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.) Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to \mathbf{x} List those documents, if any, that you relied on. 1098T Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her return is selected for audit? (If credits were disallowed or reduced, go to question 7a; if not, go to question 8.) If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and

Form 8	867 (2019) Tashib Alam XXX-XX-XX	X.		Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go to Part III.)			
9a	Have you determined that the taxpayer is, in fact, eligible to claim the EIC for the number of qualifying	Yes	No	N/A
	children claimed, or is eligible to claim the EIC without a qualifying child? (Skip 9b and 9c if the taxpayer			
	is claiming the EIC and does not have a qualifying child.)	x		
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer			
	has supported the child the entire year?	x		
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of			
	more than one person (tiebreaker rules)?	x		
Part	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not claim CTC	, ACTC	, or OD	C, go
	to Part IV.)			
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is	Yes	No	N/A
	a citizen, national, or resident of the United States?			
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the taxpayer has not lived			
	with the child for over half of the year, even if the taxpayer has supported the child, unless the child's			
	custodial parent has released a claim to exemption for the child?			
12	DId you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or			
	separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar			
	statement to the retum?			
Part		art V.)		
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qualified		Yes	No
	tuition and related expenses for the claimed AOTC?		x	
Part				
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax year		Yes	No
	and provided more than half of the cost of keeping up a home for the year for a qualifying person?			
Part	VI Eligibility Certification			
	▶ You will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filin	g		
	status on the return of the taxpayer identified above if you:			
	A. Interview the taxpayer, ask adequate questions, contemporaneously 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/or HOH fili	ng		
	status and to compute the amount(s) of the credit(s);			
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checklist for any applical	ole		
	credit(s) claimed and HOH filing status, if claimed;			
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 8867 instructions ur	ıder		
	Document Retention.			
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for th	Э		
	credit(s) and/or HOH filing status and to compute the amount(s) of the credit(s).			
	4. A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s)	was		
	obtained.			
	5. A record of any additional information you relied upon, including questions you asked and the taxpayer's reponses	, to		
	determine the taxpayer's eligibility for the credit(s) and/or, HOH filing status and to compute the amount(s) of the c			
	▶ If you have not complied with all due diligence requirements, you may have to pay a \$530 penalty for each failu			
	comply related to a claim of an applicable credit or HOH filing status.			
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and		Yes	No
	complete?			

2019 Form 4868 Extension Voucher and Filing Instructions Tashib Alam

Filing method:

Your extension will be e-filed.

Due date:

NOTE

07-15-2020

Detach this entire note (cut on dotted lines) and enclose with the payment and the 4868 voucher (below) <u>ONLY</u> if Form 4868 was e-filed and ACCEPTED; otherwise, detach the 4868 voucher (cut on the *lower* dotted line) and submit only the voucher with the payment.

The extension request was originally filed electronically.

▼ DETACH HERE ▼

Form 4868	Application for A	utomat	ic Exten	sion of Time	OMB No. 1545-0074
Department of the Treasury Internal Revenue Service (99)	To File U.S. Indi			Tax Return	2019
Part I Identifica	tion	Part	II Indiv	vidual Income Tax	
·		4 E	stimate of tot	tal tax liability for 2019	\$ 1,564
		5 T	otal 2019 pay	yments	1,994
Tashib Alam 13910 Tukla In	tl Blvd	-		. Subtract line 5 from line 4	
Seattle	WA 98168	7 A	mount you're	e paying (see instructions)	•
2 Your social security numl	per 3 Spouse's social security number	9 C	itizen or resid heck here if y idn't receive v	you're "out of the country" and a l dent (see instructions) you file Form 1040NR or 1040NF wages as an employee subject to thholding	R-EZ and U.S.
For Privacy Act and Pape	rwork Reduction Act Notice, see page	4.			Form 4868 (2019)

Form **8879**

IRS e-file Signature Authorization

2040

Department of the Treasury Internal Revenue Service

Submission Identification Number (SID)

► ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

2019

OMB No. 1545-0074

XXXXXX2020288p1dyrlt					
Taxpayer's name	Social security	number			
Tashib Alam	XXX-XX-	x-xx-xxx			
Spouse's name	Spouse's socia	I security number			
Part I Tax Return Information - Tax Year Ending December 31, 2019 (Whole doll	ars onlv)				
, ,		1	41,652		
2 Total tax (Form 1040 or 1040-SR, line 16; Form 1040-NR, line 61)		2	1,564		
3 Federal income tax withheld from Forms W-2 and 1099 (Form 1040 or 1040-SR, line 17; Form	m 1040-NR,				
line 62a)		3	1,112		
4 Refund (Form 1040 or 1040-SR, line 21a; Form 1040-NR, line 73a; Form 1040-SS, Part I, line	e 13a) .	4	430		
5 Amount you owe (Form 1040 or 1040-SR, line 23; Form 1040-NR, line 75)		5			
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of your retu	urn)		
statements for the tax year ending December 31, 2019, and to the best of my knowledge and belief, they are true, declare that the amounts in Part I above are the amounts from my electronic income tax retum. I consent to allow transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) and for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) eaccount indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a pay financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I now Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial inscancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also involved in the processing of the electronic payment of taxes to receive confidential information necessary to answerelated to the payment. I further acknowledge that the personal identification number (PIN) below is my signature frand, if applicable, my Electronic Funds Withdrawal Consent.	my intermediat acknowledge of any refund entry to the finament of estimatify the U.S. Tragent at 1-886 a authorize the ver inquiries ar	te service providement of receipt or . If applicable, I a ancial institution ted tax, and the easury Financial 3-353-4537. Paym financial institution d resolve issues	r reason uthorize nent ns		
Taxpayer's PIN: check one box only Refund will be deposited to: RTN=125000	105 Acct	=1535684054	81		
X authorize Precise Bookkeeping Services LLC to enter or generate m		2254	as my		
ERO firm name	Ent	er five digits, but	,		
signature on my tax year 2019 electronically filed income tax return.	dor	't enter all zeros			
I will enter my PIN as my signature on my tax year 2019 electronically filed income tax retuentering your own PIN and your return is filed using the Practitioner PIN method. The ERC Your signature ▶ Date ▶					
Ou annual a DIN a chaola ann hann an h					
Spouse's PIN: check one box only	v DIN				
I authorize to enter or generate m	-	er five digits, but	as my		
signature on my tax year 2019 electronically filed income tax return.		't enter all zeros			
I will enter my PIN as my signature on my tax year 2019 electronically filed income tax retuentering your own PIN and your return is filed using the Practitioner PIN method. The ERC					
Spouse's signature ▶ Date ▶					
Practitioner PIN Method Returns Only - continue below					
Part III Certification and Authentication - Practitioner PIN Method Only					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	XXXX-7576				
		nter all zeros			
I certify that the above numeric entry is my PIN, which is my signature for the tax year 2019 electronically filed incoindicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitione Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.)		
ERO's signature ▶ Date ▶	10-15-2	020			
ERO Must Retain This Form - See Instructions	10-13-2	020			
Don't Submit This Form to the IRS Unless Requested To Do	So				