Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

Submission Identification Number (SID)						
Taxpayer's name	Social securit	y number		—		
NARESH PADAKANTI	675-52-	-5785				
Spouse's name	Spouse's soc	Spouse's social security number				
RAJESHWARI GUDALA	695-69	-3520				
Part I Tax Return Information — Tax Year Ending December 31, 2023	L (Enter year you a	re autho	rizing.)			
Enter whole dollars only on lines 1 through 5.						
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1 Adjusted gross income		1	2,917			
 Total tax		3) .		
4 Amount you want refunded to you		4	1 046			
5 Amount you want refunded to you		5	1,846	•		
Part II Taxpayer Declaration and Signature Authorization (Be sure you go	et and keep a cop		r return)	_		
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amy knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Pareturn (original or amended) I am now authorizing. I consent to allow my intermediate service provide to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reast for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I author Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution ack payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financia authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancella business days prior to the payment (settlement) date. I also authorize the financial institutions involv taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or ame Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only	amended) I am now autart I above are the amor, transmitter, or electron for rejection of the trize the U.S. Treasury are count indicated in the tall institution to debit the terminate the authorization requests must be ed in the processing of to the payment. I furthed I am now authorise enerate my PIN	norizing, and punts from ansmission and its design at preparation. To represent the electric her acknowing and, its entire the digital the electric her acknowing and, its enter all ang. Check	nd to the best the income to originator (ER n, (b) the rease gnated Finance tion software the count. The evoke (cancel) no later than onic payment wheledge that to if applicable, results, but zeros	tax RO) son cial for this l) a c of the my		
Your signature ►	Date			_		
Spouse's PIN: check one box only						
▼ I authorize GLOBAL TAXES LLC to enter or g	enerate my PIN 9	3 5 2	2 0 as m	ny		
ERO firm name		er five digit				
signature on the income tax return (original or amended) I am now authorizing.						
I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner P below.						
Spouse's signature ►	oate ►					
Practitioner PIN Method Returns Only—continue	e 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.		8 6 1 er all zeros	9 8 9			
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Prov	am submitting this retu	rn in acco	ordanće with t			
ERO's signature ▶	oate ►					
ERO Must Retain This Form — See Instruct				_		
Don't Submit This Form to the IRS Unless Request	ed To Do So					

E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly uchecked the MFS box, enter the non is a child but not your dependent	- ame of	ed filing separately (your spouse. If you	,	_			_			
Your first name	and mi	ddle initial	Last na	ame					Your so	cial security	number	
NARESH			PAD	AKANTI					675-	52-5785		
If joint return, s	pouse's	first name and middle initial	Last na	ame					Spouse'	s social secu	rity number	
RAJESHWA	ARI		GUD	ALA					695-	69-3520		
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.				Apt. no.	Preside	ntial Election	Campaign	
12700 RI	[DGE]	LINE BLVD						10208	Check here if you, or your			
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete :	spaces below.	Sta	te	ZIP	code	if filing jointly this fund. Cl			
CEDAR PA	ARK				T	X	78	613	0	ow will not cl	0	
Foreign country	/ name			Foreign province/state	coun	ty	Fore	eign postal code		or refund.	Spouse	
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of ar	y fina	ancial interest i	n an	y virtual currer	ncy?	Yes	⊠ No	
Standard Deduction	_	eone can claim: You as a de Spouse itemizes on a separate retur				•						
Age/Blindness	You:	☐ Were born before January 2, 1	957 [Are blind Sp	ouse	: Was bor	rn be	fore January 2	, 1957	☐ Is blin	d	
Dependents	s (see	instructions):		(2) Social securit	y	(3) Relationsh	nip	(4) ✓ if qu	alifies fo	r (see instructi	ions):	
If more	(1) F	rst name Last name	number to you		to you	Child tax of		edit	Credit for other	r dependents		
than four	ASHR	ITA LEHARIKA PADAKANTI		957-95-489	4	Daughter				X]	
dependents, see instructions	AKS	SHAJ SAI PADAKANTI		505-83-181		Son		×]	
and check	,]	
here ▶ □]	
	1_	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1		2,917.	
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		2b			
Sch. B if required.	3a	Qualified dividends	3a		b C	Ordinary divide	nds		3b			
required.	4a	IRA distributions	4a		b T	axable amoun	t.		4b			
	5a	Pensions and annuities	5a		b T	axable amoun	t.		5b			
Standard	6a	Social security benefits	6a		b T	axable amoun	t.		6b			
Deduction for—	7	Capital gain or (loss). Attach Scheo	dule D	if required. If not req	uired	, check here		▶ [7			
 Single or Married filing 	8	Other income from Schedule 1, lin	e 10						8			
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	ome)	▶ 9	2	2,917.	
Married filing	10	Adjustments to income from Sche	dule 1,	line 26					10			
jointly or Qualifying	11_	Subtract line 10 from line 9. This is	your a	djusted gross inco	me)	11	2	2,917.	
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedule	(A e	12	а	25,100).			
Head of	b	Charitable contributions if you take	the sta	ndard deduction (see	instr	ructions) 12	b					
household, \$18,800	С	Add lines 12a and 12b							120	25	5,100.	
If you checked	13	Qualified business income deducti	on fror	n Form 8995 or Forn	า 899	95-A			13			
any box under Standard	14	Add lines 12c and 13							14	25	5,100.	
Deduction, see instructions.	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less	ente	er -0			15		0.	

	16	Tax (see instructions). Check if any	from Form(s	s): 1 🗌 8814	4 2 🗌 4972	3 🗌			16	0.
	17	Amount from Schedule 2, line 3							17	ı .
	18	Add lines 16 and 17							18	0.
	19	Nonrefundable child tax credit or o	credit for otl	her dependen	its from Schedule	8812			19	
	20	Amount from Schedule 3, line 8							20	1
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If zer	ro or less, e	nter -0					22	0.
	23	Other taxes, including self-employ	ment tax, fr	rom Schedule	2, line 21 .				23	0.
	24	Add lines 22 and 23. This is your t						•	24	0.
	25	Federal income tax withheld from:								
	а	Form(s) W-2				25a		46.		1
	b	Form(s) 1099				25b				1
	С	Other forms (see instructions) .				25c				1
	d	Add lines 25a through 25c							25d	46.
	26	2021 estimated tax payments and							26	
If you have a lqualifying child,	27a	Earned income credit (EIC)	•	•		27a				
attach Sch. EIC.		Check here if you were born a								1
		January 2, 2004, and you sati	sfy all the	other requir	rements for					1
		taxpayers who are at least age 18		1 1	structions ► 🔲					1
	b	Nontaxable combat pay election				-				1
	С	, , , , , , , , , , , , , , , , , , , ,								1
	28	Refundable child tax credit or addit				28	1,8	00.		1
	29	American opportunity credit from				29				1
	30	Recovery rebate credit. See instru				30				1
	31	Amount from Schedule 3, line 15				31				1 000
	32	Add lines 27a and 28 through 31.							32	1,800.
	33	Add lines 25d, 26, and 32. These a							33	1,846.
Refund	34	If line 33 is more than line 24, subt				•	-	·	34	1,846.
Di	35a	Amount of line 34 you want refunc Routing number 1 1 1 9 0							35a	1,846.
Direct deposit? See instructions.	►b	Account number 2 2 9 9 8			▶ c Type: 🔀	Check	ing ∐ Sav	rings		1
	▶ d 36				d tax ▶	00				1
A	37	Amount of line 34 you want applie				36			07	1
Amount You Owe	38	Amount you owe. Subtract line 3				38	ructions .		37	
		Estimated tax penalty (see instruc								
Third Party Designee		you want to allow another persecutions					Yes. Com	olete b	elow	X No
Designee		signee's		Phone			Personal			
-		ne ►		no. ▶			number			
Sign		der penalties of perjury, I declare that I ha								
Here		ef, they are true, correct, and complete. I	1		. , ,	ased on a	all information o			, ,
	You	ur signature		Date	Your occupation					nt you an Identity IN, enter it here
Joint return?					ASSOCIATE CONSULTANT				nst.) ▶	I I I I I I I I I I I I I I I I I I I
See instructions.	Spo	ouse's signature. If a joint return, both m	ust sign.	Date	Spouse's occupat		0	If the	IRS ser	nt your spouse an
Keep a copy for								Identity Protection PIN, enter it her		
your records.					HOME MAKE	ξ		(see ii	nst.) ►	
		one no. (737)333-2765		Email address	NARESH.PADAK			F15.1		
Paid		,	arer's signatu			Date		ΓIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAN		RAM SAGAR	GUPTA TALLAM	04/1	.5/2022 PC	2082		Self-employed
Use Only		n's name ► GLOBAL TAXES						Phone	e no. (678)965-9522
	Firr	n's address ▶ 2530 Pebble C	reek Lr	n Cumming	g GA 30041			Firm's	s EIN ▶	
Go to www.irs.go	ov/Form	1040 for instructions and the latest infor	mation.		BAA	REV 04	/09/22 PRO			Form 1040 (2021)

Form 1040 (2021)

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SCHEDULE 8812 (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

Credits for Qualifying Children and Other Dependents

► Attach to Form 1040, 1040-SR, or 1040-NR.

1040-SF 1040-NR 8812 ▶ Go to www.irs.gov/Schedule8812 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. 47

Name(s) shown on return Your social security number NARESH PADAKANTI & RAJESHWARI GUDALA 675-52-5785 Child Tax Credit and Credit for Other Dependents Part I-A 1 Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR. 1 2,917. Enter the amounts from lines 45 and 50 of your Form 2555 b 2h 0. c Enter the amount from line 15 of your Form 4563 2c 2d 0. d 3 3 2,917. Number of qualifying children under age 18 with the required social security number 4a 4a Number of children included on line 4a who were under age 6 at the end of 2021. 1 \mathbf{c} 0. 5 If line 4a is more than zero, enter the amount from the Line 5 Worksheet; otherwise, enter -0-. 5 3,600. 6 Number of other dependents, including any qualifying children who are not under age 18 or who do not have the required social security number Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4a. 7 7 500. 8 8 4,100. Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 9 400,000. Subtract line 9 from line 3. 10 • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 10 0. 11 11 0. 12 12 4,100. 13 Check all the boxes that apply to you (or your spouse if married filing jointly). A Check here if you (or your spouse if married filing jointly) had a principal place of abode in the United States B Check here if you (or your spouse if married filing jointly) were a bona fide resident of Puerto Rico for 2021 🗌 Part I-B Filers Who Check a Box on Line 13 Caution: If you did not check a box on line 13, do not complete Part I-B; instead, skip to Part I-C. 14a 500. 14b 3,600. If line 14a is zero, enter -0-; otherwise, enter the amount from the **Credit Limit Worksheet A** 14c c 0._ 14d 0. Add lines 14b and 14d . 14e 3,600. Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments 14f 1,800. Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed. Subtract line 14f from line 14e. If zero or less, enter -0- on lines 14g through 14i and go to Part III 14g 1,800. Enter the smaller of line 14d or line 14g. This is your credit for other dependents. Enter this amount on line 14h

Subtract line 14h from line 14g. This is your refundable child tax credit. Enter this amount on line 28 of

1,800.

Schedule 8812 (Form 1040) 2021 Page **2**

Part	I-C Filers Who Do Not Check a Box on Line 13		
Cautio	on: If you checked a box on line 13, do not complete Part I-C.		
15a	Enter the amount from the Credit Limit Worksheet A	15a	
b	Enter the smaller of line 12 or line 15a	15b	
	Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items.		
	1. You are not filing Form 2555.		
	2. Line 4a is more than zero.		
	3. Line 12 is more than line 15a.		
c	If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0	15c	
d	Add lines 15b and 15c	15d	
e	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0	15e	
	filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.		
f	Subtract line 15e from line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III	15f	
g	Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax credit and credit for other dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR	15g	
h	Subtract line 15g from line 15f. This is your additional child tax credit. Enter this amount on line 28 of your		
	Form 1040, 1040-SR, or 1040-NR	15h	
Part	II-A Additional Child Tax Credit (use only if completing Part I-C)		
Cautio	on: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.		
Cautio	on: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child ta	x credit.	
16a	Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27	16a	
b	Number of qualifying children under 18 with the required social security number: $x $1,400$.		
	Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27	16b	
	TIP: The number of children you use for this line is the same as the number of children you used for line 4a.		
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
••	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result	20	
	No. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27. Otherwise, go to line 21.		
Part	II-B Certain Filers Who Have Three or More Qualifying Children		
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see instructions		
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22		
23	Add lines 21 and 22		
24	1040 and		
	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27a, and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	
26	Enter the larger of line 20 or line 25	26	
	Next, enter the smaller of line 17 or line 26 on line 27.		
Part	II-C Additional Child Tax Credit		
27	Enter this amount on line 15c	27	

Schedule 8812 (Form 1040) 2021

Part	Additional Tax (use only if line 14g or line 15f, whichever applies, is zero)		
28a	Enter the amount from line 14f or line 15e, whichever applies	28a	
b	Enter the amount from line 14e or line 15d, whichever applies	28b	
29	Excess advance child tax credit payments. Subtract line 28b from line 28a. If zero, stop; you do not owe the		
	additional tax	29	
30	Enter the number of qualifying children taken into account in determining the annual advance amount you		
	received for 2021. See your Letter 6419 for this number. If you are missing your Letter 6419, you are filing a joint return, or you received more than one Letter 6419, see the instructions before entering a number on this line	30	
	Caution: If the amount on this line doesn't match the number of qualifying children reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.		
31	Enter the smaller of line 4a or line 30	31	
32	Subtract line 31 from line 30. If zero, skip to line 40 and enter the amount from line 29; otherwise, continue to		
	line 33	32	
33	Enter the amount shown below for your filing status.		
	• Married filing jointly or Qualifying widow(er)—\$60,000		
	• Head of household—\$50,000		
	• All other filing statuses—\$40,000	33	
34	Subtract line 33 from line 3. If zero or less, enter -0	34	
35	Enter the amount from line 33	35	
36	Divide line 34 by line 35. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or		
	more, enter 1.000	36	
37	Multiply line 32 by \$2,000	37	
38	Multiply line 37 by line 36	38	
39	Subtract line 38 from line 37	39	
40	Subtract line 39 from line 29. If zero or less, enter -0 This is your additional tax. If more than zero, enter		
	this amount on Schedule 2 (Form 1040), line 19	40	

BAA

REV 04/09/22 PRO

Schedule 8812 (Form 1040) 2021

(Rev. December 2021)

Department of the Treasury Internal Revenue Service

Taxpayer name(s) shown on return

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional 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

Attachment Sequence No. 70

Taxpayer identification number

Part I 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 or the benefit(s) claimed (beat all that apply). Did you complete the return based on information for the applicable tax year provided by the taxpayer or reasonably obtained by you? (See instructions if relying on prior year earned income). 1 Did you complete the return based on information for the applicable tax year provided by the taxpayer or reasonably obtained by you? (See instructions in frelying on prior year earned income). 2	NARI	ISH PADAKANII & RAUESHWARI GUDALA	0/5-52-	0/85		
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 or the benefit(s) claimed (check all that apply).	Enter pr	eparer's name and PTIN				
Please check the appropriate box for the credit(s) and/or HOH filling status claimed on the return and complete the related Parts I-V or the benefit(s) claimed (check all that apply). 1 Did you complete the return based on information for the applicable tax year provided by the taxpayer or reasonably obtained by you? (See instructions if relying on prior year earned income.) 2 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, 1040-SS, or Schedule 8812 (Form 1040) 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? 3 Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following. • Interview the taxpayer is eligible to claim the credit(s) and/or HOH filing status. • Review information to determine that 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," 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, when you asked, whe	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	P0208270	03		
or the benefit(s) claimed (check all that apply). □ Did you complete the return based on information for the applicable tax year provided by the taxpayer or reasonably obtained by you? (See instructions if relying on prior year earned income.) □ 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-SR, or Schedule 8812 (Form 1040) instructions, and/or the ACTC 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? □ 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. □ Peview information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of any credit(s). □ Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonable inquiries to determine the correct, incomplete, or inconsistent? (if "Yes," answer questions 4a and 4b. If "No," go to question 5.) □ Did you contemporaneously document your inquiries? (Documentation should include the questions 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 question 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), areas obtained, and a copy of this Form 8867, a copy of any applicable worksheet(s), areas obtained, and a copy of this Form 8867, a copy of the credit(s) and/or HOH filing status and the amount(s) of the credit(s) and/or HOH filin	Part	Due Diligence Requirements				
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correct Schedule C (Form 1040)?	а					
	8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a co	mplete and			
	or Pa	perwork Reduction Act Notice, see separate instructions. REV 04/09/22 PRO		Form 886	7 (Rev.	12-2021)

orm 88	867 (Rev. 12-2021)			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 eligible to claim the EIC for the number of qualifying children	Yes	No	N/A
	claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC			
	and does not have a qualifying child, go to question 10.)			
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?			
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)?			
Part	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer 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 return?	X		
Part	<u> </u>		Part \	/.)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the quatuition and related expenses for the claimed AOTC?	alified 	Yes	No
Part	Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing statu	s, go to	o Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax	year	Yes	No
Part	and provided more than half of the cost of keeping up a home for the year for a qualifying person? VI Eligibility Certification		Ш	
rait	You will have complied with all due diligence requirements for claiming the applicable credit(s) are status on the return of the taxpayer identified above if you:	nd/or H	OH fili	ng
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responsin your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) status and to figure the amount(s) of the credit(s);			
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checkl credit(s) claimed and HOH filing status, if claimed;	ist for a	ny app	licable
	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 886 Document Retention.	37 instru	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).	's eligib	ility for	the
	A record of how, when, and from whom the information used to prepare this form and the applical obtained.	ble worl	ksheet(s) was
	5. A record of any additional information you relied upon, including questions you asked and the taxp determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amountain the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amountain the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amountain the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amountain the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amountain the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amountain the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amountain the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amountain the taxpayer's eligibility for the credit(s).			
	▶ If you have not complied with all due diligence requirements, you may have to pay a penalty for ecomply related to a claim of an applicable credit or HOH filing status (see instructions for more in			
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct complete?		Yes	No

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