Department of the Treasury Internal Revenue Service

Calendar Year -Due 04/18/2022

2022 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**. Write your social security number and '2022' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

305.

REV 03/07/22 PRO 1555

817-67-7656 276-79-6892 SREENATH REDDY VUTUKURU ASWINI ANKI REDDY 13154 THEDFORD DR FRISCO TX 75035

Department of the Treasury Internal Revenue Service

Calendar Year -Due 06/15/2022

2022 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**. Write your social security number and '2022' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

305.

REV 03/07/22 PRO 1555

817-67-7656 276-79-6892 SREENATH REDDY VUTUKURU ASWINI ANKI REDDY 13154 THEDFORD DR FRISCO TX 75035

Department of the Treasury Internal Revenue Service

Calendar Year -Due 09/15/2022

2022 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**. Write your social security number and '2022' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

305.

REV 03/07/22 PRO 1555

817-67-7656 276-79-6892 SREENATH REDDY VUTUKURU ASWINI ANKI REDDY 13154 THEDFORD DR FRISCO TX 75035

Department of the Treasury Internal Revenue Service

Calendar Year -Due 01/17/2023

# 2022 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**. Write your social security number and '2022' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order..... REV 03/07/22 PRO 1555

305.

817-67-7656 276-79-6892 SREENATH REDDY VUTUKURU ASWINI ANKI REDDY 13154 THEDFORD DR FRISCO TX 75035

#### Department of the Treasury Internal Revenue Service

## **IRS e-file Signature Authorization**

OMB No. 1545-0074

Social security number

817-67-7656

2021 (Enter year you are authorizing.)

Spouse's social security number 276-79-6892

ERO must obtain and retain completed Form 8879.
 Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name
SREENATH REDDY VUTUKURU
Spouse's name
ASWINI ANKI REDDY
Part I Tax Return Information — Tax Year Ending December 31,

Enter whole dollars only on lines 1 through 5.

Note:	Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income	1	156,964.					
2	Total tax	2	20,330.					
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	17,569.					
4	Amount you want refunded to you	4	489.					
5	Amount you owe	5						

### Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

#### Taxpayer's PIN: check one box only

•••	1 ddthon20			ERO firm name		E	ir
X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	Ŀ	/

Enter five digits, but don't enter all zeros							
	7	7	6	5	6		

9 6

2

9

8

Enter five digits, but don't enter all zeros

my

as mv

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) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

#### Spouse's PIN: check one box only

X I authorize GLOBAL TAXES LLC ERO firm name

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) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature 🕨	Date I					 			
Practitioner PIN Method Returns Only—continu	e be	ow							
Part III Certification and Authentication – Practitioner PIN Method Only									
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8	7		8 nter a		9	8 9	9

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS *e-file* Providers of Individual Income Tax Returns.

ERO's signature >	Date 🕨
	n This Form — See Instructions to the IRS Unless Requested To Do So
Experience and Destruction Astronomics and a state of the	

Date

to enter or generate my PIN

<b>1040</b>		rtment of the Treasury-Internal Revenue Serv S. Individual Income Tax		(99) <b>JI'N</b>	20	21	OMB No. 154	5-0074	IRS Use Only	—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly [ u checked the MFS box, enter the r on is a child but not your dependen	name of y	-			Head c					
Your first name	and mi	ddle initial	Last nar	ne						Your so	cial securi	ty number
SREENAT	I REI	YDC	VUTU	KURU						817-	67-765	6
If joint return, s	pouse's	first name and middle initial	Last nar	ne						Spouse	's social se	curity number
ASWINI			ANKI	REDD	Y					276-	79-689	2
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.					Apt. no.	Preside	ential Election	on Campaign
13154 TI	HEDFO	ORD DR								Check	here if you,	or your
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete s	aces belo	w.	Sta	te	ZIP c	ode			ntly, want \$3
FRISCO						T	Х	75	035		low will not	Checking a change
Foreign countr	/ name		F	oreign pro	vince/stat	e/coun	ty	Forei	gn postal code		x or refund.	•
											You	Spouse
At any time du	ring 20	21, did you receive, sell, exchange	, or othe	rwise dis	pose of a	ny fina	ancial interest	in any	virtual curre	ncy?	X Yes	No
Standard		eone can claim: 🗌 You as a de	•				a dependent					
Deduction		Spouse itemizes on a separate retur	n or you	were a d	lual-statu	s alien	1					
Age/Blindness	S You:	Were born before January 2, 1	957	Are blir	nd <b>S</b>	pouse	: 🗌 Was b	orn bef	ore January 2	2, 1957	🗌 ls bl	ind
Dependent	s (see i	instructions):		(2) So	ocial secur	ity	(3) Relations	ship	<b>(4) </b> if q	ualifies fo	or (see instru	uctions):
If more	(1) First name Last name			• • •	number	,	to you		Child tax c			her dependents
than four	NYS	HIKA REDDY VUTUKURU		873-	-55-78	00	Daughte	r	×		[	
dependents, see instruction											[	
and check	S ———											
here 🕨 🗌											[	
	1	Wages, salaries, tips, etc. Attach I	- orm(s) V	V-2 .						. 1	1	68,782.
Attach	2a	Tax-exempt interest	2a			bТ	axable intere	st .		. 2t	)	
Sch. B if	3a	Qualified dividends	3a			bС	Ordinary divid	ends .		. 3k	)	
required.	4a	IRA distributions	4a			bТ	axable amou	nt		. 4t	)	
	5a	Pensions and annuities	5a			bТ	axable amou	nt		. 5t	)	
Standard	6a	Social security benefits	6a			bТ	axable amou	nt		. 6k	)	
Deduction for –	7	Capital gain or (loss). Attach Sche	dule D if	required	. If not re	quired	l, check here		▶[	7		1,091.
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, lin	ie 10 .							. 8		12,682.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is you	ır <b>total in</b>	come				▶ 9	1!	57 <b>,</b> 191.
<ul> <li>Married filing</li> </ul>	10	Adjustments to income from Sche	dule 1, li	ine 26						. 10	)	227.
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your <b>ac</b>	ljusted g	ross inc	ome				▶ 11	1	56,964.
widow(er), \$25,100	12a	Standard deduction or itemized	deducti	ons (fron	n Schedu	le A)	1	2a	25,10	0.		
<ul> <li>Head of</li> </ul>	b	Charitable contributions if you take	the stan	dard ded	uction (se	e instr	ructions) 1	2b	60	0.		
household, \$18,800	с	Add lines 12a and 12b								. 12	c 2	25,700.
<ul> <li>If you checked</li> </ul>	13	Qualified business income deduct	ion from	Form 89	95 or For	m 899	95-A			. 13		
any box under <i>Standard</i>	14	Add lines 12c and 13								. 14	<u>ا</u>	25,700.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from line	e 11. lf ze	ero or less	s, ente	er-0			. 15	5 13	31,264.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2021)

Form 1040 (202	1)								Page 2
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	20,330.
	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	20,330.
	19	Nonrefundable child tax cree	dit or credit for c	other depende	nts from Schedul	e8812		19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	20,330.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>				. 🕨	24	20,330.
	25	Federal income tax withheld	from:						
	а	Form(s) W-2				<b>25a</b> 17	,569.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions				25c			
	d	Add lines 25a through 25c						25d	17,569.
If you have a	26	2021 estimated tax payment			37			26	
qualifying child,	27a	Earned income credit (EIC)			No	27a			
attach Sch. EIC.		Check here if you were b							
		January 2, 2004, and you taxpayers who are at least a	,		_				
	b	Nontaxable combat pay elec	-						
	с	Prior year (2019) earned inco	ome	. 27c					
	28	Refundable child tax credit or	additional child	tax credit from	Schedule 8812	<b>28</b> 3	,250.		
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Recovery rebate credit. See	instructions .			30			
	31	Amount from Schedule 3, lin	e15			31			
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments an	d refundable cred	lits 🕨	32	3,250.
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments			. 🕨	33	20,819.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amou	int you <b>overpaid</b>		34	489.
neruna	35a	Amount of line 34 you want	refunded to you	<b>J.</b> If Form 8888	3 is attached, che	eck here		35a	489.
Direct deposit?	►b	Routing number $1 1 1 9 0 0 6 5 9$ <b>C</b> Type: <b>X</b> Checking <b>Savings</b>							
See instructions.	►d	Account number 8 6 8	9 0 7 2	6 7 9					
	36	Amount of line 34 you want a	applied to your	2022 estimate	ed tax 🕨	36			
Amount	37	Amount you owe. Subtract	line 33 from line	24. For detail	s on how to pay,	see instructions	. 🕨	37	
You Owe	38	Estimated tax penalty (see ir	nstructions) .		🕨	38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?				_
Designee	ins	structions				. 🕨 🗌 Yes. Co	omplete k	below.	× No
		signee's me ►		Phone no.			onal identi ber (PIN) 🖡		
0:000		der penalties of perjury, I declare t	hat I have examine						of my knowledge and
Sign		ief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the	IRS sen	t you an Identity
		0							N, enter it here
Joint return?					EMPLOYED		`	inst.) 🕨	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>k</b>	ooth must sign.	Date	Spouse's occupa	tion			t your spouse an ction PIN, enter it here
your records.					EMPLOYED			inst.) 🕨	
	Ph	one no. (773)814-685	9	Email address		GP@GMAIL.CC	M		
		eparer's name	Preparer's signat		QI(1101111.1(	Date	PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM			GUPTA TALLAN	1 03/13/2022	P0208	2703	Self-employed
Preparer		m's name ► GLOBAL TAX		0.1.0111(					678)965-9522
Use Only		m's address ► 2530 Pebbl		n Cummin	q GA 30041			's EIN ►	
Go to www irs a		n1040 for instructions and the late			BAA	REV 03/07/22 PRO			Form <b>1040</b> (2021)
	5 ., i 0/11	ion inicia de la	et internation.		DAA	NEV 03/07/22 PRU			10111 10 10 (2021)

SCHEDULE 1	
(Form 1040)	

Department of the Treasury

Internal Revenue Service

# **Additional Income and Adjustments to Income**

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

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

OMB No. 1545-0074 2021 Attachment Sequence No. 01

Your social security number

817-67-7656

Name(s	) sho	wn on Fo	rm 1040, 1040	)-S	SR, or 1040	-NR	
SREEN	IATH	REDDY	VUTUKURU	&	ASWINI	ANKI	REDDY
Part	I	Additic	onal Incom	۱e	!		
1 -	Taxa	able refu	inds, credit	s,	or offsets	s of sta	ate and local income taxes

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions)		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-12,700.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
а	Net operating loss		
b	Gambling income		
С	Cancellation of debt		
d	Foreign earned income exclusion from Form 2555 8d (		
е	Taxable Health Savings Account distribution		
f	Alaska Permanent Fund dividends		
g	Jury duty pay		
h	Prizes and awards		
i	Activity not engaged in for profit income		
j	Stock options		
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such		
	property	-	
I	Olympic and Paralympic medals and USOC prize money (see instructions)       8I		
m	Section 951(a) inclusion (see instructions)	-	
n	Section 951A(a) inclusion (see instructions)	-	
0	Section 461(I) excess business loss adjustment	_	
р	Taxable distributions from an ABLE account (see instructions)     8p	_	
z	Other income. List type and amount ►		
•	Other Income from box 3 of 1099-Misc 18. 82 18.		
9	Total other income. Add lines 8a through 8z	9	18.
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10	-12,682.

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

Schedule 1 (Form 1040) 2021

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions)		
20	IRA deduction	20	
21	Student loan interest deduction	21	227.
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit <b>24b</b>		
С	Nontaxable amount of the value of Olympic and Paralympicmedals and USOC prize money reported on line 81 <b>24c</b>		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans 24f		
g	Contributions by certain chaplains to section 403(b) plans <b>24g</b>		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations24i		
j	Housing deduction from Form 2555		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)		
z	Other adjustments. List type and amount ►		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter		
	here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	227.
	BAA REV 03/07/22 PRO	Schedul	le 1 (Form 1040) 2021

# SCHEDULE D

(Form 1040)

# **Capital Gains and Losses**

OMB No. 1545-0074

20

Attachment

•	Attach to Form	1040, 1040-SR,	or 1040-NF
•	/0.//	A	and the second

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

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Your social security number

Internal Revenue Service (99) Name(s) shown on return

Department of the Treasury

SREENATH REDDY VUTUKURU & ASWINI ANKI REDDY

817-67-7656

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? 
Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

## Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, I line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	41,037.	41,106.	5	20.	451.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1		5			
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	-	6	( )		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	7	451.			

### Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions)

below. form may be easier to complete if you round off cents to	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked	2,474.	1,834.			640.
Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
				11	
Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
Capital gain distributions. See the instructions				13	
	14	( )			
	15	640.			
	<ul> <li>which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b</li> <li>Totals for all transactions reported on Form(s) 8949 with Box D checked</li> <li>Totals for all transactions reported on Form(s) 8949 with Box E checked</li> <li>Totals for all transactions reported on Form(s) 8949 with Box F checked</li> <li>Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824</li> <li>Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions</li> <li>Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions</li> <li>Net long-term capital gain or (loss). Combine lines 8a</li> </ul>	below.       (d)         form may be easier to complete if you round off cents to e dollars.       (d)         Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions).       For which you have no adjustments (see instructions).         However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b       2,474.         Totals for all transactions reported on Form(s) 8949 with       80x D checked       2,474.         Totals for all transactions reported on Form(s) 8949 with       80x E checked       2,474.         Totals for all transactions reported on Form(s) 8949 with       80x F checked       2,474.         Totals for all transactions reported on Form(s) 8949 with       80x F checked       2,474.         Totals for all transactions reported on Form(s) 8949 with       80x F checked       2,474.         Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; from Forms 4684, 6781, and 8824       5       5         Net long-term gain or (loss) from partnerships, S corporations, estates, and Capital gain distributions. See the instructions       1       1         Long-term capital loss carryover. Enter the amount, if any, from line 13 of y       Worksheet in the instructions       1         Net long-term capital gain or (loss). Combine lines 8a through 14 in combine lines 8a through 14 in combine lines 8a through 14 in combine lines 8a thro	below.       (d)       Proceeds (sales price)       (e)         form may be easier to complete if you round off cents to e dollars.       (d)       Proceeds (sales price)       Cost (or other basis)         Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b       1,834.         Totals for all transactions reported on Form(s) 8949 with Box D checked       2,474.       1,834.         Totals for all transactions reported on Form(s) 8949 with Box E checked       2,474.       1,834.         Totals for all transactions reported on Form(s) 8949 with Box F checked       2,474.       1,834.         Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain from Forms 4684, 6781, and 8824       .       .         Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schee Capital gain distributions. See the instructions       .       .       .         Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Worksheet in the instructions       .       .       .         Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, gain       .       .       .	below. form may be easier to complete if you round off cents to e dollars.(d) Proceeds (sales price)(e) Cost (or other basis)Adjustment to gain or loss Form(s) 8949, J line 2, columTotals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, Jeave this line blank and go to line 8b2,474.1,834.Totals for all transactions reported on Form(s) 8949 with Box D checked2,474.1,834.Totals for all transactions reported on Form(s) 8949 with Box E checked2,474.1,834.Totals for all transactions reported on Form(s) 8949 with Box E checked2,474.1,834.Totals for all transactions reported on Form(s) 8949 with Box F checked.2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824.Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 Capital gain distributions. See the instructionsLong-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover	below.       (c)       (e)       Adjustments         form may be easier to complete if you round off cents to       Proceeds       Cost       Cost       Corm(s) 8949, Part II,         e dollars.       Totals for all long-term transactions reported on Form       1099-B for which basis was reported to the IRS and for       Image: Cost with the set in the instructions).       Image: Cost with the set in the instructions in Form 8949, leave this line blank and go to line 8b       Image: Cost with the set in the

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	<b>16</b> 1,091.
	• If line 16 is a <b>gain</b> , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is <b>zero</b> , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 <b>both</b> gains?	
	<ul> <li>☑ Yes. Go to line 18.</li> <li>□ No. Skip lines 18 through 21, and go to line 22.</li> </ul>	
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	<ul> <li>Are lines 18 and 19 both zero or blank and are you not filing Form 4952?</li> <li>X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below.</li> </ul>	
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	<ul> <li>The loss on line 16; or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	21 ( )
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 03/07/22 PRO

Schedule D (Form 1040) 2021

Form	8949

Department of the Treasury

Internal Revenue Service

## **Sales and Other Dispositions of Capital Assets**

OMB No. 1545-0074

Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2021 Attachment Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number		
SREENATH REDDY VUTUKURU & ASWINI ANKI REDDY	817-67-7656		

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis. See the <b>Note</b> below	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		<b>(h)</b> Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see <i>Column (e)</i> in the separate instructions	<b>(f)</b> Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)	
Robinhood Securities LLC	05/05/21	12/12/21	11,040.	11,348.			-308.	
ETH	05/05/21	12/12/21	3,232.	3,010.			222.	
USDC	05/05/21	12/12/21	3,230.	3,230.			0.	
SHIB	05/05/21	12/12/21	2,577.	3,569.			-992.	
APEX CLEARING	05/05/21	12/12/21	19,121.	18,470.	W	520.	1,171.	
APEX CLEARING	05/05/21	12/12/21	1,837.	1,479.			358.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	41,037.	41,106.		520.	451.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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

Form 8949 (2021)	Attachment Sequence No. 12A	Page <b>2</b>
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Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SREENATH REDDY VUTUKURU & ASWINI ANKI REDDY

Social security number or taxpayer identification number 817-67-7656

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part II Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

**(D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

[] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis. See the <b>Note</b> below	Adjustment, i If you enter an enter a c See the sep	<b>(h)</b> Gain or (loss). Subtract column (e)		
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	disposed of (Mo., day, yr.) (see instructions) an		<b>(f)</b> Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)	
COINBASE	05/05/21	12/12/21	2,087.	1,708.			379.	
BTC	05/05/21	12/12/21	368.	108.			260.	
APEX CLEARING	05/05/20	12/12/21	19.	18.			1.	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶		2,474.	1,834.			640.		

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

	DULE E	(From	renta		Supplementa					trusts. BFM	ICs. etc.	. —	No. 1545-0074
							1 2	<b>021</b>					
Departme Internal F	ent of the Treasury Revenue Service (99)		►		.gov/ScheduleE f							Attacl	nment ence No. <b>13</b>
	shown on return				•						_	ocial securit	
SREE	NATH REDDY	VUTU	KURI	U & ASWIN	I ANKI REDDY	Y					817-	-67-765	6
Part	Income o	or Loss	Fro	m Rental Rea	al Estate and Ro	yaltie	s Note	: If you	are in th	e business of	f renting	personal p	roperty, use
	Schedule	C. See i	nstru	ctions. If you ar	e an individual, rep	ort far	m rental i	ncome	or loss f	rom Form 48	<b>35</b> on pa	ige 2, line 4	0.
A Dic	l you make any	paymer	nts in	2021 that wo	ould require you to	o file F	<sup>-</sup> orm(s) 1	099? S	ee insti	ructions .		🗆 `	Yes 🔀 No
<b>B</b> If "	Yes," did you o	r will yo	ou file	e required For	m(s) 1099?							🗆 <b>`</b>	Yes 🗌 No
1a					et, city, state, ZIF								
Α	DNO:1/95,	KRISH	NAM	GARI PALL	KADAPA ANI	DHRA	PRADE	ESH I	N 516	421			
В													
С													
1b	Type of Prop		2	For each ren	tal real estate prop	perty	listed		-	Rental		nal Use	QJV
	(from list be	low)		above, repor	t the number of fa days. Check the	ur rent <b>QJV</b> ł	al and			Days	Da	ays	
Α	3			if vou meet t	ne reauirements to	o file a	asa I	A		365		0	
B				qualified join	t venture. See inst	tructic	ons.	В					
С								С					
	of Property:												
-	gle Family Resid				ort-Term Rental				7 Self-				
	ti-Family Reside	ence	4	Commercial		6 Ro	oyalties		8 Othe	r (describe)			
Incom					Properties:			Α		В			С
3	Rents received					3			620.				
	Royalties recei	ived .				4							
Expen						_							
5	•					5							
6	Auto and trave	-		-		6							
7	Cleaning and n					7		2,	350.				
8	Commissions.					8							
9	Insurance					9							
10	Legal and othe					10							
11	Management fe					11		2,	650.				
12	Mortgage inter				,	12							
13	Other interest.					13							
14	Repairs					14			750.				
15	Supplies	• •	• •			15		2,	850.				
16	Taxes					16							
17						17		2,	720.				
18	Depreciation ex	xpense	or a	epletion .		18							
19 20	Other (list)					19		1 0	220				
20	Total expenses			0		20		±3,	320.				
21					or 4 (royalties). If								
	file Form 6198				l out if you must	21		-12,	700				
00						21		12,	/00.				
22	on Form 8582				imitation, if any,	22	(	10 7	, 00.)	(			١
23a		-			or all rental prope		N.	-	23a	(	620		)
20a b			-		or all royalty prop			• •	23b		020	•	
b D			-		for all properties				230 23c				
d			-		for all properties				23c				
e			-		for all properties				23e	1	3,320		
24			-		on line 21. <b>Do no</b>				200	<u>⊥</u>	. <b>2</b>		
25		•			d rental real estate					al losses here			12,700.)
					come or (loss).								<u> </u>
26					page 2 do not								
					se, include this a						. 20	6	-12,700.
For Pa					arate instructions			IPA		-12,70			(Form 1040) 2021

### 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.



OMB No. 1545-0074

2021 Attachment Sequence No. 47

► Go to www.irs.gov/Schedule8812 for instructions and the latest information.

( )		our social	security number	
SREE	NATH REDDY VUTUKURU & ASWINI ANKI REDDY 8	17-67-7656		
Part	I-A Child Tax Credit and Credit for Other Dependents			
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	1	156,964.	
2a	Enter income from Puerto Rico that you excluded			
b	Enter the amounts from lines 45 and 50 of your Form 2555	0.		
c	Enter the amount from line 15 of your Form 4563			
d	Add lines 2a through 2c	2d	0.	
3	Add lines 1 and 2d	3	156,964.	
4a	Number of qualifying children under age 18 with the required social security number 4a	1.		
b	Number of children included on line 4a who were under age 6 at the end of 2021 4b	1.		
с	Subtract line 4b from line 4a	0.		
5	If line 4a is more than zero, enter the amount from the <b>Line 5 Worksheet</b> ; otherwise, enter -0	-	3,250.	
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	0.		
	<b>Caution:</b> Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resider alien. Also, do not include anyone you included on line 4a.	nt		
7	Multiply line 6 by \$500	7		
8	Add lines 5 and 7		3,250.	
9	Enter the amount shown below for your filing status.			
	• Married filing jointly—\$400,000			
	• All other filing statuses—\$200,000 }	9	400,000.	
10	Subtract line 9 from line 3.			
	• 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	Multiply line 10 by 5% (0.05)		0.	
12	Subtract line 11 from line 8. If zero or less, enter -0-		3,250.	
13	Check all the boxes that apply to you (or your spouse if married filing jointly).		57230.	
10	<ul> <li>A Check here if you (or your spouse if married filing jointly) had a principal place of abode in the United State for more than half of 2021</li> </ul>			
	<b>B</b> Check here if you (or your spouse if married filing jointly) were a bona fide resident of Puerto Rico for 2021			
Part		-		
	<b>on:</b> If you did not check a box on line 13, do not complete Part I-B; instead, skip to Part I-C.			
14a	Enter the smaller of line 7 or line 12	14a	0.	
b	Subtract line 14a from line 12		3,250.	
c	If line 14a is zero, enter -0-; otherwise, enter the amount from the <b>Credit Limit Worksheet A</b>		0.	
	Enter the smaller of line 14a or line 14c	14d	0.	
e	Add lines 14b and 14d		3,250.	
	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) receive		5,230.	
f	for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see th instructions before entering an amount on this line. If you didn't receive any advance child tax credit payment for 2021, enter -0-	ne ts	0.	
	<b>Caution:</b> 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.	if		
g	Subtract line 14f from line 14e. If zero or less, enter -0- on lines 14g through 14i and go to Part III	14g	3,250.	
h	Enter the smaller of line 14d or line 14g. This is your credit for other dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR		0.	
i	Subtract line 14h from line 14g. This is your refundable child tax credit. Enter this amount on line 28 or your Form 1040, 1040-SR, or 1040-NR .	of 14i	3,250.	
For Pa			812 (Form 1040) 2021	

Part EQ       Filers Who Do Not Check a Box on Line 13         Cature: If you encleded a box on line 13, do not complete Part I-C.       15a         15a       Line: the amount from the Credit Linit Worksheet A       15a         16       Note the amount of hild income Credit Linit Worksheet A       15a         17       To wate are not fling From 2555.       15a         18       Line: the is more than file: 15a.       15d         19       To wate are not fling From 2555.       15d         19       To wate are not fling From 2555.       15d         19       The more than file: 15a       15d         10       To wate are not fling From 2555.       15d         10       To wate are not fling From 255.       15d         10       To wate are not fling From 25b and 15c.       15d         11       To wate are not fling From 25b and 15c.       15d         12       Catation: If the anount on this line densi't match the aggregate anounts reported to you (and your spous if fling jointly on your Litered) 4040.       15d         13       Stattract line 15c from line 15d. If zero or lines 15f through 15h and go to Part III       15f         14       Stattract line 15c from line 13. do not complete Parts II-A through II-C. you cannot claim the additional child tax credit.       15d         14       Stattract line 15f	Schedu	le 8812 (Form 1040) 2021	Page <b>2</b>
Iss       Encret the amount from the Credit Limit Worksheet A	Part	I-C Filers Who Do Not Check a Box on Line 13	
b       Enter the smaller of line 12 or line 15a       15b         Additional child at cerdit Complete Pars II. A through II. C if you meet each of the following items.       1         1. You are not tiling Horn 2555.       2. Line 4 is more than line 15a.       15c         2. Line 15 is more than line 15a.       15c       15d         3. Line 15 is more than line 15a.       15d       15d         4. Add lines 15b and 15c       15d       15d         6. Either the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(5) 4d+19 for the amounts to indiced on this line. If you are missing Letter 641, 90 see the instructions before entering an anount on this line. 3 you didt' receive any advance child tax credit payments for 2021. enter 4.       15d         7       Battering 16 the 15d for from 16n 15d. If zero of less, enter -0. on lines 15f through 15h and go to Part III       15d         9       Line the 5f form line 15d. If zero of less, enter -0. on lines 15f through 15h and go to Part III       15g         9       Line the 5f form line 15d. If zero of less, enter -0. on lines 21b through 11C: you cancell and recell for other dependents. Each enter 4.       15g         15h       Definition 12 and cort 20mb 11C: you cancell and recell for other dependents. Each enter 4.       15g         16a       Subtract line 15b from line 12, do not complete Parts II-A through II-C. you cancel child the additional child tax credit.       15g	Cautio	on: If you checked a box on line 13, do not complete Part I-C.	
Additional child us credit. Complete Parts II-A through II-C if you meet each of the following items. I. You are not films [Form 2555, 2]. Line 4: is more than zero. 3. Line 15 more than iten 155. c If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0. 4. Add lines 15 hand 156. c Four the agregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See you Terret(s) 6(4) for the amounts to include on this line. If you are missing Letter 6419, see the for 2021. See you Terret(s) 6(4) for the amounts to include on this line. If you are missing Letter 6419, see the for 2021. See you Terret(s) 6(4) for the amounts to include on this line. If you are missing Letter 6419, see the for 2021. See you Terret(s) 6(4) for the amounts to include on this line. If you are missing Letter 6419, see the for 2021. See you Terret(s) 6(4) for the amount on the 10 for 2001. See you on a norm of maxim of the 10 for 2001. See you and your spouse if filing jointly on your Letter(s) 6(4) for game cosing do your room will be (alseed). f Subtract line 156 from line 151. This is your amount of hald have credit. Latter this amount on line 20 gourt Form 1040, 104b-SR, or 104b-SR. If 104b	15a	Enter the amount from the Credit Limit Worksheet A	15a
<ol> <li>You are not filing Form 2555.</li> <li>Line 4 is more than 200.</li> <li>Line 12 is more than line 15a.</li> <li>If you completed Pars II. A through II.C. enter the amount from line 27; otherwise, enter -0.</li> <li>If you completed Pars II. A through II.C. enter the amount from line 27; otherwise, enter -0.</li> <li>If and the 15b and 15c.</li> <li>If and</li></ol>	b	Enter the smaller of line 12 or line 15a	15b
<ul> <li>2. Line 4 is more than zero.</li> <li>3. Line 12 is more than line 15a.</li> <li>c If you completed Pars II. A through II-C, enter the amount from line 27; otherwise, enter -0.</li> <li>15c</li> <li>15d</li> <li>15d&lt;</li></ul>		Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items.	
a. Line 12 k more than line 15a.       is         c If you completed Pars II. A through II.C, enter the amount from line 27; otherwise, enter -0.       is         d Add lines 15b and 15c       is         e Enter the aggregate amount of advance child tax credit payments you (and your spouse) if filing jointly) received the for 2021. See your Letter(s) 6419 (on the amounts to include on this line. If you (and your spouse) if filing jointly) near the desen't match the aggregate amounts repreted to you (and your spouse) if filing jointly) on your Letter(s) 6419. In the mount will be delayed.         g Funct the smaller of line 150. If iz zero or less, enter -0 on line 151 through 11k and got 0 part III.       if is         g Funct the smaller of line 157. This is your convertinghable child tax credit for other degendents. Enter this amount on line 19 d your Form 1040, 1040-SR, or 1040-SR.       if is         Part II-A       Additional Child Tax Credit (use only if completing Part I-C)       is         Caution: If you thebeda box on line 13. on ot complete Pars II-A through II-C; you cannot claim the additional child tax credit.       is         Caution: If you thebeda box on line 13. On ot complete Pars II-A and them and enter -0. on line 27.       id       id         b Number of qualifying children under 18 with the required social security number:       x \$1,400.       id       id         i Ba alto rece -0. on line 27.       id       id       id       id       id         b Number of qualifying children under 18 with the required social securit		1. You are not filing Form 2555.	
c       if you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0.       15c         d       Add lines IS to and ISc       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 hits line. If you damace child accordit payments for 2021, enter -0.       15c         Candion: If the amount on this line. Given it is 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.       15c         G       Subtract line 15c form line 15f. This is your nonrefundable child tax credit and credit for other dependents. Eatter this amount on line 19 of your Form 1400, 1400-SR, or 1040-SR.       15c         FartII-A       Additional Child Tax Credit (use only if completing Part I-C)       15d         Candion: If you checked a box on line 13. do not complete Parts II-A and II-B and enter -0- on line 27.       15d         Galton: If you checked a box on line 13. do not complete Parts II-A and II-B and enter -0- on line 27.       16d         There the smaller of line 16s or line 16b       17         Base amount on line 19 bits is the same as the number of children you use for line 4a.       17         IBa Earned income (see instructions).       18b         PartII-A       Additional Additional Met aggregate and the amount on line 17 on line 27.       16d         IDa the amount on		2. Line 4a is more than zero.	
d       Add thiss 15b and 15c       15d         e       Earcr the agregate amount of advance child tas credit payments you (add 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 for 2021, enter -0.       1sc         Caution: If the amount on this line, enter the amounts of include on this line. If you are missing Letter 6419, see the for 2021, enter -0.       1sc         Caution: If the amount on this line, descript much the aggregate amounts reported to you (add your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.       1sc         g       Enter the smaller of line 155 or this 157. This is your norefundable child tax credit accredit and credit for other the additional child tax credit. Caution: If you file form 1162.0 f your part 116 (1040-SR, or 1040-SR, or 1040-SR, or 1040-SR, or 1040-SR, or 1040, 1040-SR, or 1040-SR, in 15-S declare 2, 0 on line 27. <td></td> <td><b>3.</b> Line 12 is more than line 15a.</td> <td></td>		<b>3.</b> Line 12 is more than line 15a.	
<ul> <li>e Enter the aggregate amount of advance child tax credit payments you (and your spose if filing jointly) received for 2020. See your Exter(sel1), See your and the settor (sel1), 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.</li> <li>f subtract line 156 from line 150. If zero or less, enter -0 on lines 151 through 115 and go to Part III</li></ul>	c	If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0	15c
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 us credit payments for 2021, enter -0       15e         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.       15e         I Subtract line 156 form line 154. If zero or these, enter -0- on lines 15f frungs) filing and credit for other dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR.       15g         B Subtract line 155 from lise your additional child tax credit. Enter this amount on line 28 of your form 1040, 1040-SR, or 1040-NR.       15g         Caution: If you checked a box on line 13. do not complete Parts II-A through IL-C; you cannot claim the additional child tax credit.       16a         I as Subtract line 15h from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27       16a         I as Subtract line 15h from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27       16a         I as Subtract line 15h from line 12. Mit the required social security number:       \$1,000         Enter the smaller of line 16 you file floo - 0 line 27       16a         I as obstract line 15h from line 12. Mit the required social security number:       21,000         I as the amount on line 18a. Inter the result       19         I as the amount on line 18a. Inter the result       19 <td>d</td> <td>Add lines 15b and 15c</td> <td>15d</td>	d	Add lines 15b and 15c	15d
instructions before entering an anount on this line, If you didn't receive any advance child tax credit payments       15e         for 2021, enter -0-       instructions before entering an annount on this line, If you didn't receive any advance child tax credit payments       15e         filing jointly on your Letter(s) 6419, the processing of your return will be delayed.       15f       15f         g Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax credit and credit for other dependents. Futer this amount on line 19 of your Form 1040, 1040-SR, kor 1040-SR         Gasturet line 15h from line 12 if Zaro, skip Parts II-A and II-B and enter -0- on line 27       16a         Subtract line 15h from line 12 if Yaro, skip Parts II-A and enter -0- on line 27       16a         Nember of children yours 16 with the required social security number:       x \$1,4,400         There the result 1/2 ero, skip Parts II-A and II-B and enter -0- on line 27       16a         Next Lon line 16a or line 16b       17         Is the amount on line 18a more than \$2,5007       18b <t< td=""><td>e</td><td>Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received</td><td></td></t<>	e	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received	
for 2021, enter -0.       15e         Caution: If the anomuto no this line desn'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.       15f         f       Subtract line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III       15f         g       Enset the smaller of line 15b or line 157. This is your additional child tax credit. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR       15g         Part II-2       Additional Child Tax Credit (use only if completing Part II-2)       Caution: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.         Caution: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.       16a         Idea       Number of qualifying children under 18 with the required social scurity number:       x \$1,400.         Enter the smaller of line 16 or in line 10.       17         Idea       18a         b       Nontaxable combat pay (see instructions).       18b         19       Is the amount on line 19b 15%. (of 15) and enter the result.       19         20       Multiply the amount on line 19b 15%. (of 15) and enter the result.       19         21       Withithe scut and the additional child tax credit.       19         23       Multiply the amount on		for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the	
Cuttor: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing joint()) on your Letter(s) 6419, the processing of your return will be delayed.       Image: Cuttor in the instruction in the instruction will be delayed.         f       Subtract line 156 fm line 156. This is your nonrefundable child tax credit and credit for other dependents. Earch this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR.       Image: Cuttor in the instruction in the instruction in the instruction in the additional child tax credit.         PartUL-A       Additional Child Tax Credit (use only if completing Part I-C)       Image: Cuttor in the instruction in the additional child tax credit.         Caution: If you file Form 2555, do not complete Parts II-A and II-B and enter -0- on line 27       Image: Cuttor in the instruction in the instruction in the additional child tax credit.         Ida       Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27       Image: Cuttor in the instruction in the insthermal therestill if reco, instruction in the instruction in the i			150
filing jointly) on your Letterity 6419, the processing of your return will be delayed.       Image: Source of the so			150
f       Subtract line 15c from line 15c from line 15f. This is your nonrefundable child tax credit and credit for other dependents. Eater this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR       15g         PartIL-A       Additional Child Tax Credit (use only if Completing Part I-C)       15h         Caution: If you file Form 2555, do not complete Pars II-A through 1-C; you cannot claim the additional child tax credit.       16a         16a       Subtract line 15g from line 17. Trace, skip Pars II-A and II-B and enter -0- on line 27       16a         16a       Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27       16a         16b       Number of qualifying children under 18 with the required social security number:       x \$1,400.         17       17a       18a       17a         18a       19       18a       19         19       19 s the amount on line 18 nore than \$2,500?       19a         19       19 s the amount on line 18 nore than \$2,500?       19a         19       19 s the amount on line 18a more than \$2,500?       19a         19       19 s the amount on line 18a more than \$2,500?       19a         19       19a       19a       19a         20       Multiply the amount on line 18a. Enter the result       19a         21       20 nuine 27.       19a       20a <t< td=""><td></td><td></td><td></td></t<>			
g       Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax redit and credit for other dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-SR	f		15f
dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-SR.       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         PartII-A       Additional Child Tax Credit (use only if completing Part1-C)       15h         Caution: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.       16a         16a       Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27       16a         16a       Inter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27       16a         17       TiP: The number of children you use for this line is the same as the number of children you use for this line is a the same as the number of children you use for line 4a.       17         18a       Earned income (see instructions)       18a       17         19       Is the amount on line 18a, more than \$2,500?       18a       19         19       Is the amount on line 18a. Enter the result       19       20         Next. On line 16b, is the amount on line 18a. Enter the result       19       20         19       Is the amount on line 18a. There the result       19       20         19       Is the amount on line 17, skip Part II-B and enter the smaller of line 17 on line 27.       20			151
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-SR, or 1040-SR.       15h         PartULA       Additional Child Tax Credit (use only if completing Part I-C)       15h         Caution: If you checked a box on tomplete Parts II-A through II-C: you cannot claim the additional child tax credit.       16a         Lias 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 smaller of line 16a or line 16b       16a       16a         18a       Earned lincome (see instructions).       18b       17         18a       Earned lincome (see instructions).       18b       17         19       Is the amount on line 19b tifs (0.15) and enter the result       19       20         19       Is the amount 54,200 or more?       18a       19       20         19       No. Leave line 10b lank and enter the result       19       20       20         19       20 on line 27.       18b       19       20         20       Multiply the amount on line 19 by 15% (0.15) and enter the result       19       20         20       Next. On line 16b, is the amount 54,200 or more?       19 <td< td=""><td>g</td><td></td><td>15α</td></td<>	g		15α
Form 1040, 1040-SR, or 1040-SR.       15b         PartUPA       Additional Child Tax Credit (use only if completing Part I-C)         Caution: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.         Idea       13, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.         Idea       16a         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       16a         TIP: The number of children you used for this line is the same as the number of children you used for line 4a.       17         Is harmed income (see instructions).       18b       17         Is the amount on line 18 more than \$2,500?       18b       19         Is the amount on line 19 more than \$2,500?       18b       19         Multiply the amount on line 19 by 15% (0.15) and enter the result       19       20         Multiply the amount on line 19 by 15% (0.15) and enter the result       19       20         Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.       20         Vest. If line 20 is equal to or more than line 17, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.       21         21 Hest of the amount \$4,200 or more?       21 <td>h</td> <td></td> <td>135</td>	h		135
PartII-PA       Additional Child Tax Credit (use only if completing Part I-C)         Caution: If you file Form 255. do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.         Caution: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.         Ida       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       16a         TIP: The number of children you use for this line is the same as the number of children you used for line 4a.       17         Is a famed income (see instructions).       18a         b       Nontaxable combat pay (see instructions).       18b         commont on line 18a more than \$2,500?       18b       19         Commont on line 18a more than \$2,500?       19       19       19         No.       Leave line 19 blank and enter -0 on line 20.       19       20         Methody the amount on line 18a more than \$2,500?       19       19       19       20         Methody the amount on line 19 by 15% (0.15) and enter the result       19       20       20         Next. On line 16b, is the amount on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.       20       21       21 <tr< td=""><td>п</td><td></td><td>15h</td></tr<>	п		15h
Caution: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.         Caution: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.         Ioa       Distract line 156 from 1612. If zero, skip Parts II-A and II-B and enter -0- on line 27	Part	Additional Child Tax Credit (use only if completing Part I-C)	1.511
Caution: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.         16a         b Number of qualifying children under 18 with the required social security number:			
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.       16b         17       If a famed income (see instructions)       17         18a       Earned income (see instructions)       18b         19       Is the amount on line 18a more than \$2,500?       18a         19       Is the amount on line 19 bank and enter -0- on line 20.       Yes. Subtract S2,500 from the amount on line 18a. Enter the result       19         20       Multiply the amount on line 19 by 15% (0.15) and enter the result       19       20         20       Next. On line 16b, is the amount \$4,200 or more?       No. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 on line 27. Otherwise, go to line 21.       20         21       Withheld social security. Medicare, and Additional Medicare taxes from Form(s) W-2.       21         22       Enter the total of the amounts from Schedule 1 (Form 1040), line 15, Schedule 2 (Form 1040), line 13. and Schedule 2 (Form 1040), line 15, Schedule 2 (Form 1040), line 14.       22         23       Add lines 21 and 22.			x credit.
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       160         TIP: The number of children you used for hildren you used for line 4a.       17         If Enter the smaller of line 16a or line 16b       17         If Enter the smaller of line 16a or line 16b       17         If Enter the smaller of line 16a or line 16b       17         If Enter the smaller of line 16a or line 16b       18         If Enter the smaller of line 18a more than \$2,500?       18b         If Is the amount on line 18 more than \$2,500?       18         Multiply the amount on line 19 more than \$2,500 or more?       19         If Mex Subtract \$2,500 from the amount \$4,200 or more?       19         O Multiply the amount on line 19 by 15% (0.15) and enter the result       19         20       Multiply the amount \$4,200 or more?       20         No. If line 20 is equal to or more than line 17, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.       20         Otherwise, go to line 21.       21       21         If the 20 is equal to or more than line 17, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.       21         Otherwise, go to line 21.       21       21         If the 20 is equal to or more than line 17,			
Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27 160   TIP: The number of children you use for this line is the same as the number of children you used for line 4a. 17   If Enter the smaller of line 16 of 0. 17   I8a Earned income (see instructions) 18a   b Nontaxable combat pay (see instructions) 18b   19 Is the amount on line 18a more than \$2,500?   No. Leave line 19 blank and enter -0- on line 20.   Ves. Subtract \$2,500 from the amount on line 18a. Enter the result   19 No. Leave line 19 blank and enter -0- on line 20.   Ves. Subtract \$2,500 from the amount on line 18a. Enter the result   19 No. Leave line 19 blank and enter +0- on line 20.   Ves. Colline 16b, is the amount \$4,200 or more?   No. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 on line 27.   Otherwise, go to line 21. <b>20 21</b> Vitheld social security. Medicare, and Additional Medicare taxes from Form(s) W-2.   boxes 4 and 6. If married filling jointly, include your spouse's amounts with yours. If your employer withheld or you guid Additional Medicare Tax or tir 1 RRTA taxes, see instructions   1040, line 5; Schedule 3 (Form 1040), line 15.   23 Add lines 21 and 22   24   25 Subtract line 24 from line 23. If zero or less, enter -0-   26   27   28   29   20			
TIP: The number of children you use for this line is the same as the number of children you used for line 4a.         17         Barred income (see instructions)         18a         Barred income (see instructions)         18a         Is the amount on line 18 a 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          Yes. Subtract \$2,500 from the amount on line 18a. Enter the result          Yes. Subtract \$2,500 from the amount on line 18a. Enter the result          Yes. Subtract \$2,500 from the amount on line 18a. Enter the result          Yes. Subtract \$2,500 from the amount \$4,200 or more?          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.          Otherwise, go to line 21.         Otherwise, skip Part II-B and enter the amount from line 17 on line 27.          Otherwise, go to line 21.         Otherwise, skip Part II-B and enter the amount from line 17 on line 27.          Otherwise, go to line 21.         Otherwise, skip Part II-B and enter the smaller of line 17 on line 27.         Otherwise, skip Part II-B and enter the smaller of line 17 on line 2	~		16b
17 Enter the smaller of line 16a or line 16b 17   18a Earned income (see instructions) 18b   b Nontaxable combat pay (see instructions) 18b   19 Is the amount on line 18a more than \$2,500? 19   19 No. Leave line 19 blank and enter -0- on line 20. 19   20 Multiply the amount on line 19b up 15% (0.15) and enter the result 19   20 Multiply the amount on line 19b up 15% (0.15) and enter the result 20   Next. On line 16b, is the amount \$4,200 or more? 19   20 on line 27. 20   Ves. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 on line 27.   Otherwise, go to line 21.   21   22   23   24   24   25   26   27   27   28   29			
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   19 Is the amount on line 19 by 15% (0.15) and enter the result   20 Next. On line 16b, is the amount \$4,200 or more?     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.     Otherwise, go to line 21.   PartII-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   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 21 22 23 24 1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040, line 15. Schedule 2 (Form 1040), line 11. 24 25 26 Enter the larger of line 20 or line 25. Next, enter the angler of line 17 or line 26 on line 27. 26 27 26 27 27 27 27	17		17
b       Nontaxable combat pay (see instructions).       18b         19       Is the amount on line 18 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       19         20       Multiply the amount on line 19 by 15% (0.15) and enter the result       19         20       Multiply the amount on line 19 by 15% (0.15) and enter the result       19         20       Next. On line 16b, is the amount \$4,200 or more?       19         □       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.       20         Otherwise, go to line 21.       21         Part II-S       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       21         23       Add lines 21 and 22       23         24       10400 and       1040-SR filers: Enter the total of the amounts from Schedule 2 (Form 1040), line 13.       23         24       1040 and       14 of the amount from Schedule 3 (Form 1040), line 11.       24       25         25	18a		
19       Is the amount on line 18a more than \$2,500?			
□       No. Leave line 19 blank and enter -0- on line 20.       19       19         □       Yes. Subtract \$2,500 from the amount on line 18a. Enter the result       19       20         Next. On line 16b, is the amount \$4,200 or more?       20       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.       20         □       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.       21         Part II-B       Certain Filers Who Have Three or More Qualifying Children       21         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 taxe or tier 1 RRTA taxes, see instructions       21         22       Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 13       22         23       Add lines 21 and 22       23       23         24       1040-SR filers: Enter the total of the amount from Schedule 3 (Form 1040), line 11.       24       24         24       1040-SR filers: Enter the amount from Schedule 3 (Form 1040), line 11.       24       25         25       Subtract line 24 from line 25.       Schedule 3 (Form 1040), line 11.       24<			
20       Multiply the amount on line 19 by 15% (0.15) and enter the result       20         Next. On line 16b, is the amount \$4,200 or more?       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.       20         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.       21         Part II-B       Certain Filers Who Have Three or More Qualifying Children       21         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       21         23       Add lines 21 and 22       2       22         24       1040 and 1040, line 5; Schedule 2 (Form 1040), line 11.       23         25       Subtract line 24 from line 23. If zero or less, enter -0.       25         26       Next, enter the smaller of line 17 or line 26 on line 27.       26         Part II-C       Additional Child Tax Credit       27			
20       Multiply the amount on line 19 by 15% (0.15) and enter the result       20         Next. On line 16b, is the amount \$4,200 or more?       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.       20         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.       21         Part II-B       Certain Filers Who Have Three or More Qualifying Children       21         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       21         23       Add lines 21 and 22       2       22         24       1040 and 1040, line 5; Schedule 2 (Form 1040), line 11.       23         25       Subtract line 24 from line 23. If zero or less, enter -0.       25         26       Next, enter the smaller of line 17 or line 26 on line 27.       26         Part II-C       Additional Child Tax Credit       27		$\square$ Yes. Subtract \$2,500 from the amount on line 18a. Enter the result $$ 19	
Next. On line 16b, is the amount \$4,200 or more?         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 15; Schedule 2 (Form 1040), line 13.         23       Add lines 21 and 22         24       1040 and 1040-SR filers: Enter the total of the amounts from Schedule 3 (Form 1040), line 11.         24       1040-NR filers: Enter the add from Schedule 3 (Form 1040), line 11.         25       Subtract line 24 from line 23. If zero or less, enter -0-         26       Enter the larger of line 20 or line 25         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	20		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 6; and Schedule 2 (Form 1040), line 13       21         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.       24         25       Subtract line 24 from line 23. If zero or less, enter -0-         25         26       Enter the smaller of line 17 or line 26 on line 27.          26         Part II-G       Additional Child Tax Credit       27          27			
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       21         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       23         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.       24         25       Subtract line 24 from line 23. If zero or less, enter -0-       25         26       Enter the smaller of line 17 or line 26 on line 27.       25         26       Next, enter the smaller of line 17 or line 26 on line 27.       27		<b>No.</b> If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the <b>smaller</b> of line 17 or line	
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       1         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 5; Schedule 2 (Form 1040), line 13       21         23       Add lines 21 and 22       23       23         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.       23         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.       26         Part II-C       Additional Child Tax Credit       27         27       Enter this amount on line 15c       27			
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       21         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       23         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.       23         25       Subtract line 24 from line 23. If zero or less, enter -0-       25         26       Enter the smaller of line 17 or line 26 on line 27.       25         26       Next, enter the smaller of line 17 or line 26 on line 27.       27		<b>Yes.</b> 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.	
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       21         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 13       22         23       Add lines 21 and 22       23         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.       24         25       Subtract line 24 from line 23. If zero or less, enter -0-       25       26         Next, enter the smaller of line 17 or line 26 on line 27.       26       27         Part II-C       Additional Child Tax Credit       27		Otherwise, go to line 21.	
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	Part	II-B Certain Filers Who Have Three or More Qualifying Children	
<ul> <li>your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see instructions</li> <li>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</li> <li>23 Add lines 21 and 22</li> <li>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.</li> <li>24 1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.</li> <li>25 Subtract line 24 from line 23. If zero or less, enter -0-</li> <li>26 Enter the larger of line 20 or line 25</li> <li>Next, enter the smaller of line 17 or line 26 on line 27.</li> <li>Part III-C Additional Child Tax Credit</li> <li>27 Enter this amount on line 15c</li> </ul>	21		
instructions       1       21         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 13       22         23       Add lines 21 and 22       23         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.       24         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.         27       Enter this amount on line 15c       27		boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If	
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 13 .       22         23       Add lines 21 and 22			
1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13       22         23       Add lines 21 and 22       23         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.       23         25       Subtract line 24 from line 23. If zero or less, enter -0-       24         26       Enter the larger of line 20 or line 25       25         26       Next, enter the smaller of line 17 or line 26 on line 27.         27       Enter this amount on line 15c       27	22		-
23       Add lines 21 and 22       23       23         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.       23       24         25       Subtract line 24 from line 23. If zero or less, enter -0-       24       24         26       Enter the larger of line 20 or line 25       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			
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.       24       24         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         Part II-C       Additional Child Tax Credit         27       Enter this amount on line 15c             27	23		-
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-         26       Enter the larger of line 20 or line 25         27       Enter the smaller of line 17 or line 26 on line 27.         27       Enter this amount on line 15c         27       Enter this amount on line 15c			-
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	27		
1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.       24       25         25       Subtract line 24 from line 23. If zero or less, enter -0			
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			
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	25		25
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			
Part II-C       Additional Child Tax Credit         27       Enter this amount on line 15c       27	-		
27         Enter this amount on line 15c         27	Part		
			27
			edule 8812 (Form 1040) 2021

Schedu	le 8812 (Form 1040) 2021		Page <b>3</b>
Par	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	
	<b>Caution:</b> 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 03/07/22 PRO Sch	nedule 8812 (For	m 1040) 2021

Form <b>8867</b>		Paid Preparer's Due Diligence Checklist			OMB No. 1545-0074		
(Rev. December 2021)		Earned Income Credit (EIC), Americ Child Tax Credit (CTC) (including the A	additional Child Tax Credit (AOTC),	and			
Department of the Treasury Internal Revenue Service		Credit for Other Dependents (ODČ)), 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.			Attachment Sequence No. <b>70</b>		
	er name(s) shown or		structions and the latest informa	Taxpayer ident			
	( )	Y VUTUKURU & ASWINI ANKI REDDY		817-67-			
	reparer's name and			01/ 0/	1030		
		1 SAGAR GUPTA TALLAM		P020827(	13		
Part		gence Requirements		10200270			
Please	e check the app	propriate box for the credit(s) and/or HOH filir ned (check all that apply).	ng status claimed on the return		e the rela AOTC		arts I–V HOH
1		lete the return based on information for the a obtained by you? (See instructions if relying o		the taxpayer	Yes	No	N/A
2	worksheets fo 1040) instruct worksheet(s) t	claimed on the return, did you complete th und in the Form 1040, 1040-SR, 1040-NR, 1 ions, and/or the AOTC worksheet found in hat provides the same information, and all re	040-PR, 1040-SS, or Schedule the Form 8863 instructions,	e 8812 (Form or your own			
3	Did you satisfy the following.	/ the knowledge requirement? To meet the kr			X		
	determine th	taxpayer, ask questions, and contemporaned at the taxpayer is eligible to claim the credit(s)	and/or HOH filing status.	·			
		mation to determine that the taxpayer is elig o figure the amount(s) of any credit(s)			X		
4	information re	mation provided by the taxpayer or a third asonably known to you, appear to be incorr ons 4a and 4b. If " <b>No,</b> " go to question 5.)	ect, incomplete, or inconsister	nt? (If "Yes,"		×	
а	Did you make	reasonable inquiries to determine the correct,	complete, and consistent infor	mation? .			
b	you asked, wh	emporaneously document your inquiries? (Do nom you asked, when you asked, the informa d on your preparation of the return.)	tion that was provided, and th	e impact the			
5	keep a copy of applicable wor 8867 and any taxpayer that	y the record retention requirement? To meet f your documentation referenced in question or rksheet(s), a record of how, when, and from v applicable worksheet(s) was obtained, and a you relied on to determine eligibility for the ca	4b, a copy of this Form 8867, a vhom the information used to p a copy of any document(s) pro redit(s) and/or HOH filing status	copy of any prepare Form vided by the s or to figure			
	the amount(s) List those doc	of the credit(s)	you relied on:		X		
6	credit(s) and/c	e taxpayer whether he/she could provide doo or HOH filing status and the amount(s) of ar ted for audit?	ny credit(s) claimed on the reti	urn if his/her	×		
7	Did you ask th	e taxpayer if any of these credits were disallow	wed or reduced in a previous ye	ear?	×		
		e disallowed or reduced, go to question 7a					
а		ete the required recertification Form 8862?					
8	If the taxpayer correct Sched	is reporting self-employment income, did youle C (Form 1040)?	u ask questions to prepare a c	omplete and			
For Pa		ion Act Notice, see separate instructions.	REV 03/07/22 PRO		Form 886	67 (Rev.	12-2021)

Form 8	867 (Rev. 12-2021)			Page <b>2</b>				
Part	II 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 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.)	Yes	No	N/A				
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?							
c	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	III Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	ciaim (	JIC, 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 X	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?	×						
Part			Part \	/.)				
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the quituition and related expenses for the claimed AOTC?	alified	Yes	No				
Part		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		Yes	No				
	and provided more than half of the cost of keeping up a home for the year for a qualifying person?							
Part		., .,	<b>0</b> 11 CF					
	You will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filing status on the return of the taxpayer identified above if you:							
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's respo in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit( 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 check credit(s) claimed and HOH filing status, if claimed;	list for a	iny 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 88 Document Retention.	67 instr	uctions	under				
	1. A copy of this Form 8867.							
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.							
	<ol><li>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).</li></ol>	0	-					
	<ol><li>A record of how, when, and from whom the information used to prepare this form and the applica obtained.</li></ol>		,	,				
	5. A record of any additional information you relied upon, including questions you asked and the tax determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount							
	If you have not complied with all due diligence requirements, you may have to pay a penalty for each failure to comply related to a claim of an applicable credit or HOH filing status (see instructions for more information).							
4.5	Device and if the tall of the answer of this Fame 2007 and to the heat of some head along the same		Vaa					

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?	X	
	REV 03/07/22 PRO Form		12-2021)