IRS e-file Signature Authorization

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		Social security number					
SAROJ KUMAR SINGH		691-04-2	2830				
Spouse's name		Spouse's socia	I security number				
PRIYANKA KUMARI LNU		882-43-	1810				
Part I Tax Return Information – Tax Year Ending December 31, 202	22 (Enter	year you are	e authorizing.)				
Enter whole dollars only on lines 1 through 5.							
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1 Adjusted gross income			1 100,507.				
2 Total tax			2 6,533.				
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3 8,537.				
4 Amount you want refunded to you			4 2,004.				
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 periury. 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 dutrion20			ERO firm name	to enter of generate my ring	En
X	Lauthorize	GLOBAL TA	AXES	LLC	to enter or generate my PIN	4

	4	2	8	3	0	20				
Enter five digits, but don't enter all zeros										

0

as mv

3 1 8 1

Enter five digits, but don't enter all zeros

my

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 lauthorize GLOBAL TAXES LLC to enter or generate my PIN 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 🕨	Da	te 🕨	•				 		
Practitioner PIN Method Returns Only—	continue	bel	ow						
Part III Certification and Authentication – Practitioner PIN Method	d Only								
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected	d PIN.	2	2			6 all zer	 9	89)

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 🕨		
	Don't S	ERO Must Retain This Form — Submit This Form to the IRS Unle			
				 0070 /=	04.0004

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

1040	· ·	artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn d	202	2	OMB No. 1545	-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 na son is a child but not your dependent	ame of y	-					. ,	spo	use (QSS)	•
Your first name	and mi	iddle initial	Last na	me						Your so	cial securi	ty number
SAROJ KU	MAR		SING	Н						691-	04-283	0
If joint return, sp	ouse's	s first name and middle initial	Last na	me						Spouse	's social se	curity numbe
PRIYANKA	KUN	MARI	LNU							882-	43-181	0
-		er and street). If you have a P.O. box, see	instructio	ons.				A	Apt. no.			on Campaigr
2201 GRA	SSLA	AND AVENUE									here if you,	
-		ce. If you have a foreign address, also co	mplete s	paces belov	w.	Sta	ite	ZIP c	ode			ntly, want \$3
MELISSA						T	ζ	754	54		o mis iuna. Iow will not	Checking a change
Foreign country	name		F	oreign pro	vince/state/o	coun	ty	Foreig	gn postal code		x or refund	
Digital		ny time during 2022, did you: (a) rece						-				
Assets		ange, gift, or otherwise dispose of a					-	asset)	? (See Instru	ictions.)	Yes	X No
Standard Deduction	_	eone can claim:			•		a dependent					
Age/Blindness	You:	Were born before January 2, 1	958	Are blin	d Spo	ouse	: 🗌 Was bor	n befo	ore January 2	2, 1958	Is b	lind
Dependents	(see	instructions):		(2) So	cial security	,	(3) Relationsh	in (4	I) Check the b	ox if quali	ifies for (see	instructions):
If more		irst name Last name		nu			to you	Child tax		redit	Credit for ot	her dependents
than four	ANA	AIKA SINGH		883-	22-979	9	Daughter		X			
dependents,							Daagnool					
see instructions and check												
here												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instructi	ons)					. 1a	1	12,956.
mcome	b	Household employee wages not re	eported	on Form(s	s) W-2					. 1b		
Attach Form(s)	с	Tip income not reported on line 1a	(see ins	structions))					. 10	;	
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep								. 10	1	
W-2G and	е	Taxable dependent care benefits f	rom For	m 2441, li	ne 26					. 1e	•	
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	n Form 88	39, line 29					. 1f	:	
If you did not	g	Wages from Form 8919, line 6 .								. 19	1	
get a Form	h	Other earned income (see instruction	ons) .							. 1h	1	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	uctions)			1 i					
	z	Add lines 1a through 1h								. 1z	. 1	12,956.
Attach Sch. B	2a	Tax-exempt interest	2a			bΤ	axable interest	: .		. 2b)	
if required.	3a	Qualified dividends	3a		61.	b	Ordinary divider	nds .		. 3b)	61.
	4a	IRA distributions	4a			bΤ	axable amoun	t		. 4b)	
Standard	5a	Pensions and annuities	5a			bΤ	axable amoun	t		. 5b)	
Deduction for – Single or	6a	Social security benefits	6a			bΤ	axable amoun	t		. 6b)	
Married filing	с	If you elect to use the lump-sum e	lection r	nethod, cl	heck here	(see	instructions)		[
separately, \$12,950	7	Capital gain or (loss). Attach Schee	dule D if	required.	If not requ	iired	, check here		[7		-387.
 Married filing 	8	Other income from Schedule 1, lin	e10.							. 8		12,123.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is you	ur total inc	com	e			. 9	1	00,507.
surviving spouse, \$25,900	10	Adjustments to income from Sche	dule 1, l	ine 26						. 10)	
Head of	11	Subtract line 10 from line 9. This is	your ad	djusted g	ross incor	ne				. 11	1	00,507.
household, \$19,400	12	Standard deduction or itemized	deducti	i ons (from	Schedule	A)				. 12		25,900.
If you checked	13	Qualified business income deducti	on from	Form 899	95 or Form	899	5-A			. 13		
any box under Standard	14	Add lines 12 and 13								. 14		25,900.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0	This is y	our	taxable incom	е.		. 15		74,607.

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

Form **1040** (2022)

Form 1040 (202	2)										Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		. 16	;	8,	532.
Credits	17	Amount from Schedule 2, lir	ne3					. 17	,		
	18	Add lines 16 and 17						. 18	3	8,	532.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			. 19)	2,	000.
	20	Amount from Schedule 3, lir	ne8					. 20)		
	21	Add lines 19 and 20						. 2		2,	000.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. 22	2		532.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			. 23	3		1.
	24	Add lines 22 and 23. This is	your total tax					. 24		6,	533.
Payments	25	Federal income tax withheld									
	а	Form(s) W-2				25a	8,5	37.			
	b	Form(s) 1099				25b					
	с	Other forms (see instruction	s)			25c					
	d	Add lines 25a through 25c						. 25	d	8,	537.
	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return			. 26	;		
If you have a qualifying child,	27	Earned income credit (EIC)			No	27					
attach Sch. EIC.	28	Additional child tax credit from				28					
	29	American opportunity credit	from Form 8863	8, line 8		29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lir				31					
	32	Add lines 27, 28, 29, and 31				Indable	credits .	. 32	2		
	33	Add lines 25d, 26, and 32. T	,	-	-			. 33	3	8,	537.
Defund	34	If line 33 is more than line 24	· ·					. 34	,	2,	004.
Refund	35a	Amount of line 34 you want					-	35	a	2,	004.
Direct deposit?	b	Routing number 3 2 5				Checkir					
See instructions.	d	Account number 8 2 9						J •			
	36	Amount of line 34 you want			ed tax	36	2				
Amount	37	Subtract line 33 from line 24									
You Owe	0.	For details on how to pay, g						. 37	,		
	38	Estimated tax penalty (see in				38					
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See					
Designee			•] Yes. Comp	olete belov	v. 🗙	No	
-		signee's		Phone				identificatio	n		
	na			no.			number (
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com									
Here		· · ·	ipiete. Declaration (,		Information of			-	U
	YO	ur signature		Date	Your occupation			If the IRS Protection			2
Joint return?					SOFTWARE E	ENGINE	ER	(see inst.)	<u> </u>		
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupati	on		If the IRS			
Keep a copy for your records.					-			Identity Pi (see inst.)	otection	n PIN, ent	er it here
your rocordo.					HOME MAKEF			(See Inst.)			
		one no. (503) 388-135		Email address	DGPSAROJ@G			-16.1		1.10	
Paid		eparer's name	Preparer's signat			Date		TN		eck if:	
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	03/10	/2023 P0	208270		Self-em	
Use Only		m's name GLOBAL TAX						Phone no			
	Fin		Y CT E BRU	NSWICK N	J 08816			Firm's EIN	1 8	4-317	
Co to wayny iro a	ou/Eorr	a 10.40 for instructions and the late	at information		D 4 4					Farm 10	10 (0000)

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

BAA REV 03/02/23 PRO

Form **1040** (2022)

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 20

2 Attachment Sequence No. **01** Your social security number

691-04-2830

Name(s) shown on Form 1040, 1040-SR, or 1040-NR						
SAROJ	KUMAR	SINGH	&	PRIYANKA	KUMARI	LNU

Par	t I Additional Income	·		
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	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. Atta		5	-12,128.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
	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	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	<u>8m</u>	-	
n	Section 951(a) inclusion (see instructions)	8n	-	
0	Section 951A(a) inclusion (see instructions)	80	-	
р	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t	-	
u	Wages earned while incarcerated	<u>8u</u>		
Z	Other income. List type and amount:			
•	Qual State Tuition Prgm from 1099-Q 5.	8z 5.		F
9	Total other income. Add lines 8a through 8z		9 10	<u> </u>
10 For Pa	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR		-	-12, 123.

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

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	e-basi	s gov	rernment		
	officials. Attach Form 2106				12	1
13	Health savings account deduction. Attach Form 8889				13	1
14	Moving expenses for members of the Armed Forces. Attach Form 3903				14	1
15	Deductible part of self-employment tax. Attach Schedule SE				15	1
16	Self-employed SEP, SIMPLE, and qualified plans				16	1
17	Self-employed health insurance deduction				17	1
18	Penalty on early withdrawal of savings				18	1
19a	Alimony paid				19a	1
b	Recipient's SSN	• •				
С	Date of original divorce or separation agreement (see instructions):					
20	IRA deduction				20	
21	Student loan interest deduction				21	
22	Reserved for future use				22	
23	Archer MSA deduction				23	
24	Other adjustments:					
а	Jury duty pay (see instructions)	24a				
b	Deductible expenses related to income reported on line 8I from the					
	rental of personal property engaged in for profit	24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					
	and USOC prize money reported on line 8m	24c				
d	Reforestation amortization and expenses	24d				
е	Repayment of supplemental unemployment benefits under the Trade					
	Act of 1974	24e				
f	Contributions to section 501(c)(18)(D) pension plans	24f				
g	Contributions by certain chaplains to section 403(b) plans	24g				
h	Attorney fees and court costs for actions involving certain unlawful					
	discrimination claims (see instructions)	24h			_	
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 violations	24i			_	
j	Housing deduction from Form 2555	24j			_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
	1041)	24k			_	
Z	Other adjustments. List type and amount:					
•-		24z				
25	Total other adjustments. Add lines 24a through 24z				25	
26	Add lines 11 through 23 and 25. These are your adjustments to income	e. Ent	er here	e and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA	REV	03/02/23 F	PRO	Schedu	ıle 1 (Form 1040) 2022

SCHEDULE	2
(Form 1040)	

Department of the Treasury

Additional Taxes

OMB No. 1545-0074 2 · ((

Attach to Forn	n 1040, 1040-SR, or 1040-NR.	
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Departr Internal		Attachment Sequence No. 02		
	()	rm 1040, 1040-SR, or 1040-NR		al security number
		NGH & PRIYANKA KUMARI LNU	691-04-	-2830
Pa	rt I Tax			
1	Alternative r	ninimum tax. Attach Form 6251		1
2	Excess adva	ance premium tax credit repayment. Attach Form 8962		2
3	Add lines 1 a	and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	7	3
Par	t II Other	Taxes		
4	Self-employ	ment tax. Attach Schedule SE		4
5	Social secu Attach Form	rity and Medicare tax on unreported tip income.		
6	Uncollected Form 8919	social security and Medicare tax on wages. Attach		
7	Total addition	onal social security and Medicare tax. Add lines 5 and 6		7
8	Additional ta	ax on IRAs or other tax-favored accounts. Attach Form 5329 if requ	uired.	
	If not require	ed, check here		8 1.
9	Household e	employment taxes. Attach Schedule H		9
10	Repayment	of first-time homebuyer credit. Attach Form 5405 if required	1	0
11	Additional M	Iedicare Tax. Attach Form 8959	1	1
12	Net investm	ent income tax. Attach Form 8960	1	2
13		social security and Medicare or RRTA tax on tips or group-ter om Form W-2, box 12		3
14	Interest on and timesha	tax due on installment income from the sale of certain residentia		4
15		he deferred tax on gain from certain installment sales with a sales		5
16	Recapture o	of low-income housing credit. Attach Form 8611	1	6
			(con	tinued on page 2)

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

Schedule 2 (Form 1040) 2022

Par	t II Other Taxes (continued)			
17	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount:	17a		
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b	-	
с	Additional tax on HSA distributions. Attach Form 8889	17c		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
I	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
z	Any other taxes. List type and amount:			
		17z		
18	Total additional taxes. Add lines 17a through 17z		18	
19	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your total other taxe on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b.		21	1.
	BAA	REV 03/02/23 PRO	Schedu	ule 2 (Form 1040) 2022

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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.

Attachment Sequence No. 12

20

Internal Revenue Service Name(s) shown on return

Department of the Treasury

SAROJ KUMAR SINGH & PRIYANKA KUMARI LNU

Your social security number 691-04-2830

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

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	See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. (d) (e) (e) (cost (or other basis) (amounts to enter on the lines of the dollars. (d) (e) (cost (or other basis) (amounts to enter on the lines of the dollars. (b) (conter basis) (conter basis) (
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 Box A checked						
2	Totals for all transactions reported on Form(s) 8949 with Box B checked						
3	Totals for all transactions reported on Form(s) 8949 with Box C 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 Worksheet in the instructions	Carryover	6	()			
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7		

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, f line 2, colum	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	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.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	705.	1,092.			-387.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	-	14	()		
15	Net long-term capital gain or (loss). Combine lines 8a on the back	•	.,	o to Part III	15	-387.
E a se F	Demonstrate Deduction Act Nation and construction terms in the state					

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 -387.
	• If line 16 is a gain , 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 loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is zero , 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 both gains?	
	No. Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. 	
	□ 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:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 (387.)
	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 Form 1040, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 03/02/23 PRO

Schedule D (Form 1040) 2022

Form 8949 (2022)		 		Allaci	hment S	equenc	12A	Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SAROJ KUMAR SINGH & PRIYANKA KUMARI LNU

Social security number or taxpayer identification number 691-04-2830

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

1 (a) Description of property	(b) Date acquired	Date sold of		(e) Cost or other basis See the Note below	Adjustment, i If you enter an enter a c See the sep	(h) 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 Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	705.	1,092.			-387.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	705.	1,092.			-387.		

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.

SCHEDULE E Supplemental In											OMB No	. 1545-0074
(Form	1040)	(From	rental real estate, royalti	es, partnersl	hips, S	corporat	ions, es	states,	trusts, REMICs	s, etc.)	20	22
	ent of the Treasury Revenue Service		Attach to Go to <i>www.irs.gov/S</i>	o Form 1040, <i>cheduleE</i> for					nformation.		Attachm Sequend	ent ce No. 13
Name(s)	shown on return									our soci	al security r	number
SARO	J KUMAR SI	NGH &	PRIYANKA KUMARI	LNU						691-0	4-2830	
Part			s From Rental Real									
	Note: If yo	u are in to	the business of renting per ss from Form 4835 on pag	rsonal proper	ty, use	Schedule	e C. See	e instru	ctions. If you are	e an indiv	/idual, repo	ort farm
Α			ents in 2022 that would		to file	Form(s) 1	10992 5	See ins	structions		∏ Ye	s 🛛 No
			ou file required Form(s									
1 a	Physical addr	ess of e	each property (street, cit	ty, state, ZIF	code	e)						
Α	28/12, DAY	ANAND	ROAD, A-ZONE DUR	GAPUR WE	EST E	BENGAL	IN 7	1320	4			
В												
С												
1b	Type of Prope	rtv 2	For each rental real e	state prope	ertv list	ted		Fa	air Rental	Person	al Use	
	(from list below		above, report the nur						Days	Da		QJV
Α	3	<u> </u>	personal use days. C	heck the Q	JV bo>	c only	Α		365		0	
В		_	if you meet the requir				B					
С		_	qualified joint venture	e. See instru	ictions	3.	C					
Type	of Property:						-		I			
	Single Family R	esidenc	e 3 Vacation/Shor	t-Term Ren	tal	5 Lanc	4	7	Self-Rental			
	Multi-Family Re			t ronn non	tui i	6 Roya			Other (descril	ne)		
		Slached				- O Hoye	antico	0				
									Propertie	s:		
Incom							Α		В			С
3	Rents received	1			3		8	51.				
4	Royalties receipt	ved.			4							
Exper												
5	Advertising .				5							
6	Auto and trave	l (see in	structions)		6							
7	Cleaning and r	nainten	ance		7		2,5	96.				
8					8							
9	Insurance				9							
10			sional fees		10							
11					11		2.4	33.				
12			d to banks, etc. (see ins		12		,					
13				,	13							
14	Repairs				14		2,9	08.				
15					15			87.				
16					16		,					
17					17		2,7	55.				
18			or depletion		18		,					
19	Other (list)	•			19							
20			nes 5 through 19		20		12,9	79				
21	-		line 3 (rents) and/or 4 (r				15					
21			nstructions to find out i									
					21	.	-12,1	28.				
22			estate loss after limitat				, _					
22			structions)		22	(12,12	28 1	()	()
23a			ported on line 3 for all r				<u></u> , <u>_</u> _	23a	\	, 851.	()
zsa b			ported on line 3 for all r					23a				
			ported on line 4 lor all	• • • •				230 23c				
c d			•									
d			ported on line 18 for all					23d	1.0	070		
e			ported on line 20 for all					23e	12,	979.		
24 25		•	amounts shown on line					· ·	••••••••••••••••••••••••••••••••••••••	24	1 -	10 100 1
25			sses from line 21 and ren								(12,128.)
26			te and royalty income									
			/, and line 40 on page									10 100
			0), line 5. Otherwise, inc					11e 4 I	-12,128.	26		-12,128.
For Pa	nerwork Reduct	ion Act M	Notice, see the separate	instructions		NE	- A		-iz,izö.	Sch	adula E (Er	orm 1040) 2022

edule E (Form 1040)

Form **5329** Department of the Treasury Internal Revenue Service

Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

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

D	ur social security number
	Attachment Sequence No. 29
	2022
	OMB No. 1545-0074

Go to www.irs.gov/Form5329 for instructions and the latest information.

							umber
SAR	OJ KUMAR SINGH		O hav if mail is not delivered	l to vour homo	691-0	4-2830	
		Home address (number and street), or F	2.0. box if mail is not delivered	to your nome		Apt. no.	
	Your Address Only	City, town or post office, state, and ZIP	code. If you have a foreign ad	dress, also complete the spaces	;		
	u Are Filing This by Itself and Not	below. See instructions.			If this is	an amended	
	Your Tax Return					heck here	
		Foreign country name	Foreign province/s	tate/county	Foreign p	ostal code	
Schee	dule 2 (Form 1040), line	nal 10% tax on the full amount 8, without filing Form 5329. See		ns, you may be able to	report thi	s tax direc	tly on
Par	t I Additional Ta	ix on Early Distributions. Co	omplete this part if you	took a taxable distributi	on (other	than a qua	alified
		ution) before you reached age					
		ntract (unless you are reporting					
		te this part to indicate that you A distributions. See instructions.	quality for an exception	n to the additional tax or	early di	stributions	or for
			na) Far Dath IDA diatrib	utiona and instructions	1		
1 2	-	cludible in income (see instruction cluded on line 1 that are not subje					
2	•	e exception number from the inst		. ,	2		
3		ditional tax. Subtract line 2 from			3		
4	•	r 10% (0.10) of line 3. Include this			4		
		of the amount on line 3 was a di					
	include 25% of that a	amount on line 4 instead of 10%.	See instructions.				
Part		x on Certain Distributions F					
		an amount in income, on Scheo fied tuition program (QTP), or on				savings ac	count
5	Distributions included	d in income from a Coverdell ESA	A, a QTP, or an ABLE ad	count	5		5.
6		d on line 5 that are not subject to			6		
7	Amount subject to ac	dditional tax. Subtract line 6 from	line 5		7		5.
8		r 10% (0.10) of line 7. Include this			8		1.
Part		x on Excess Contributions t				ted more to) your
		for 2022 than is allowable or you					
9	-	ntributions from line 16 of your 202			5 9		
10		A contributions for 2022 are le					
11		n, see instructions. Otherwise, er distributions included in income (_		
12		prior year excess contributions (_		
13	Add lines 10, 11, and				13		
14	, ,	ntributions. Subtract line 13 from	line 9. If zero or less, er	nter -0	14		
15	•	for 2022 (see instructions) .			15		
16		utions. Add lines 14 and 15			16		
17	Additional tax. Enter	6% (0.06) of the smaller of line 16	6 or the value of your tra	ditional IRAs on Decembe	r		
		22 contributions made in 2023). Inc			17		
Part		x on Excess Contributions			ibuted m	ore to your	Roth
40		nan is allowable or you had an an					
18	•	ntributions from line 24 of your 202			3 18		
19		tributions for 2022 are less than ructions. Otherwise, enter -0-					
20		om your Roth IRAs (see instructio					
21	Add lines 19 and 20		-		21		
22		ntributions. Subtract line 21 from			22		
23		for 2022 (see instructions)			23		
24		utions. Add lines 22 and 23			24		
25	Additional tax. Enter	6% (0.06) of the smaller of line 2	4 or the value of your R	oth IRAs on December 31	,		

2022 (including 2022 contributions made in 2023). Include this amount on Schedule 2 (Form 1040), line 8

25

Form 53	329 (202	2)						Page 2			
Part				ributions to Coverdell ESAs. C han is allowable or you had an amoun	•	•		•			
26	Enter	the excess c	ontributions from line 32 o	f your 2021 Form 5329. See instruction	s. If zero, go	o to line 31	26				
27	If the	e contributio	ns to your Coverdell E	SAs for 2022 were less than the							
				uctions. Otherwise, enter -0	27						
28	2022	distributions	from your Coverdell ESA	s (see instructions)	28						
29	Add I	ines 27 and 2	28				29				
30	Prior	year excess	contributions. Subtract lir	ne 29 from line 26. If zero or less, ente	er-0		30				
31	Exces	ss contributio		31							
32	Total	excess cont		32							
33	Addit	tional tax. E	nter 6% (0.06) of the sr	naller of line 32 or the value of you	ur Coverdel	I ESAs on					
				butions made in 2023). Include this a							
	(Form	n 1040), line 8	3				33				
Part V				ibutions to Archer MSAs. Comple			ır emp	oloyer contributed			
		more to your	Archer MSAs for 2022 th	nan is allowable or you had an amoun	t on line 41	of your 2021	Form	า 5329.			
34	Enter	the excess c	ontributions from line 40 o	f your 2021 Form 5329. See instructior	ns. If zero, g	o to line 39	34				
35			5	or 2022 are less than the maximum							
				herwise, enter -0	35						
36	2022	distributions	from your Archer MSAs f	from Form 8853, line 8	36						
37							37				
38				ne 37 from line 34. If zero or less, ente		1	38				
39				ions)			39				
40				nd 39			40				
41				maller of line 40 or the value of y							
				butions made in 2023). Include this a							
Dent	(⊢orm	1040), line 8	<u> </u>	· · · · · · · · · · · · · ·			41				
Part \				tributions to Health Savings A	•		•				
		amount on li	ne 49 of your 2021 Form				owab	le or you had an			
42	Enter	the excess of	contributions from line 48	of your 2021 Form 5329. If zero, go t	o line 47		42				
43				2022 are less than the maximum herwise, enter -0	43						
44	2022	distributions	from your HSAs from For	rm 8889, line 16	44						
45	Add I	ines 43 and 4	44				45				
46	Prior	year excess	contributions. Subtract lir	ne 45 from line 42. If zero or less, ente	er-0		46				
47	Exces	ss contributio	ons for 2022 (see instructi	ions)			47				
48	Total	excess cont	ributions. Add lines 46 an	d 47			48				
49				aller of line 48 or the value of your H							
_		·		2023). Include this amount on Schedule			49				
Part V			Tax on Excess Contr 2022 were more than is al	ibutions to an ABLE Account. C	omplete thi	s part if con	tributi	ons to your ABLE			
50				iowable. ions)			50				
51			`	maller of line 50 or the value of yo			50				
51				n Schedule 2 (Form 1040), line 8			51				
Part I				nulation in Qualified Retirement				Complete this part			
		if you did no	t receive the minimum rec	quired distribution from your qualified	retirement	plan.	-				
52				e instructions)			52				
53			•				53				
54				, enter -0			54				
55	Addit	tional tax. Er		Include this amount on Schedule 2 (F	1.		55				
Are Fil	ling Tl	only if You his Form	belief, it is true, correct, and com	lare that I have examined this form, including acc plete. Declaration of preparer (other than taxpayer) i	s based on all ir	nformation of which	ch prepa	arer has any knowledge and			
		Not With									
Your 1	ax Re	eturn	Your signature	F		Date					
Paid		Print/Type prep	oarer's name	Preparer's signature	Date	Check self-emp		PTIN			
Prepa		Firm's name		1		Firm's EIN					
Use (Only Firm's name Firm's Ein Firm's address Phone no.										

SCHEDULE 8812 (Form 1040)

Department of the Treasury

Credits for Qualifying Children and Other Dependents

OMB No. 1545-0074

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

2022 Attachment

Internal	Revenue Service		Sec	
Name(s)	shown on return	Your s	ocial se	curity number
SARO	J KUMAR SINGH & PRIYANKA KUMARI LNU	691-	04-2	830
Par	t I 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	100,507.
2a	Enter income from Puerto Rico that you excluded			
b	Enter the amounts from lines 45 and 50 of your Form 2555 . . 2b	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	100,507.
4	Number of qualifying children under age 17 with the required social security number 4	1		
5	Multiply line 4 by \$2,000	. [5	2,000.
6	Number of other dependents, including any qualifying children who are not under age17 or who do not have the required social security number6	0		
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resi alien. Also, do not include anyone you included on line 4.	dent		
7	Multiply line 6 by \$500	- E	7	
8	Add lines 5 and 7	-	8	2,000.
9	Enter the amount shown below for your filing status.	•		2,0000.
	• 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)	. [11	0.
12	Is the amount on line 8 more than the amount on line 11?	. [12	2,000.
	○ No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.	edit.		
	Yes. Subtract line 11 from line 8. Enter the result.			
13	Enter the amount from the Credit Limit Worksheet A	. [13	8,532.
14	Enter the smaller of line 12 or 13. This is your child tax credit and credit for other dependents	. [14	2,000.
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.			
	If the amount on line 12 is more than the amount on line 14, you may be able to take the additio	nal ch	ild tax	credit

on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/02/23 PRO Schedule 8812 (Form 1040) 2022

Schedu	le 8812 (Form 1040) 2022		Page 2
Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lin	e 27	🔲
16a	Subtract line 14 from line 12. If zero, stop here ; you cannot take the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27	16a	0.
b 17 18a b 19	Number of qualifying children under 17 with the required social security number: x \$1,500. Enter the result. If zero, stop here; you cannot claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0 on line 27 Enter -0 on line 27 . . TIP: The number of children you use for this line is the same as the number of children you used for line 4. Enter the smaller of line 16a or line 16b . Earned income (see instructions) . Is the amount on line 18a more than \$2,500? No. No. Leave line 19 blank and enter -0 on line 20.	16b 17	
20	 ❑ Yes. Subtract \$2,500 from the amount on line 18a. Enter the result	20	Puorto Pioo
Part		IS OT I	Juerto Rico
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		
24	1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27, and Schedule 3 (Form 1040), line 11. 1040-NR filers: Enter the amount from 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	
Dort	Next, enter the smaller of line 17 or line 26 on line 27.		
	II-C Additional Child Tax Credit	27	
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	L
	BAA REV 03/02/23 PRO Sci	nedule 8	3812 (Form 1040) 2022

	R867 Paid Preparer's Due Diligence Checkli	ist	OMB	No. 1545	-0074				
	Rev. November 2022) Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC), Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status								
	To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 104 Revenue Service Go to www.irs.gov/Form8867 for instructions and the latest inform		Attach Seque	nment ence No.	70				
Taxpaye	er name(s) shown on return	Taxpayer identificatio	n number						
SAR	OJ KUMAR SINGH & PRIYANKA KUMARI LNU	691-04-283	C						
Prepare	r's name	Preparer tax identifica	ation num	oer					
SYAI	M PRIYA RAM SAGAR GUPTA TALLAM	P02082703							
Part	Due Diligence Requirements								
	e check the appropriate box for the credit(s) and/or HOH filing status claimed on the ret benefit(s) claimed (check all that apply).		the rel		arts I–\ HOH				
1	Did you complete the return based on information for the applicable tax year provided or reasonably obtained by you? (See instructions if relying on prior year earned income.)		Yes X	No	N/A				
2	If credits are claimed on the return, did you complete the applicable EIC and/or 0 worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Scher 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instruction worksheet(s) that provides the same information, and all related forms and schedules claimed?	dule 8812 (Form is, or your own	X						
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you the following.Interview the taxpayer, ask questions, and contemporaneously document the taxpayer determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.	r's responses to							
	• Review information to determine that the taxpayer is eligible to claim the credit(s) are status and to figure the amount(s) of any credit(s)		X						
4	Did any information provided by the taxpayer or a third party for use in preparing information reasonably known to you, appear to be incorrect, incomplete, or inconsist answer questions 4a and 4b. If " No ," go to question 5.)	stent? (If "Yes,"		X					
а	Did you make reasonable inquiries to determine the correct, complete, and consistent in	formation? .							
b	Did you contemporaneously document your inquiries? (Documentation should includ you asked, whom you asked, when you asked, the information that was provided, and information had on your preparation of the return.)	the impact the							
5	Did you satisfy the record retention requirement? To meet the record retention require keep a copy of your documentation referenced in question 4b, a copy of this Form 886 applicable worksheet(s), a record of how, when, and from whom the information used to 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing st the amount(s) of the credit(s)	7, a copy of any to prepare Form provided by the atus or to figure	X						
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate								
Ŭ	credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return is selected for audit?	return if his/her	×						
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous	s year?	×						
	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)								
а	Did you complete the required recertification Form 8862?								
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare	a complete and							
	correct Schedule C (Form 1040)?								

For Paperwork Reduction Act Notice, see separate instructions.

REV 03/02/23 PRO

Form 8867 (Rev. 11-2022)

Form 88	367 (Rev. 11-2022)			Page 2
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?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?			
Part	III Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	claim (CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes 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?	X		
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	Due Diligence Questions for Returns Claiming AOTC (If the return does not claim AOT)	, go to	Part \	/.)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qu tuition and related expenses for the claimed AOTC?	alified	Yes	No
Part	V Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing state	is, go t	o Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the ta and provided more than half of the cost of keeping up a home for the year for a qualifying person?		Yes	No
Part	VI Eligibility Certification			
	You will have complied with all due diligence requirements for claiming the applicable credit(s) and on the return of the taxpayer identified above if you:	l/or HO	H filing	status
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responsion 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);	nses or (s) and/o	n the ret or HOH	turn or filing
	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	any 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.

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- 3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).
- 4. A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s) was obtained.
- 5. A record of any additional information you relied upon, including questions you asked and the taxpayer's responses, to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).

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).

15	Do you certify	/ that	all	of t	he	ans۱	wers	or	n this	Fo	rm	886	7 a	re, t	o th	e b	est	of	you	r kı	now	ledg	ge, t	rue	, co	rrec	rt, an	nd	Yes	No
	complete?																												X	

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