Internal Revenue Service

IRS e-file Signature Authorization

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

Submission Identification Number (SID)

Taxpayer's name	Social security number								
NAVEEN KUMAR REDDY POREDDY	007-57-7252								
Spouse's name	Spouse's social security number								
RAKSHITHA TUMMALAPALLI	971-91-7092								
Part I Tax Return Information – Tax Year Ending December 31, 2022 (Enter year you are 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 90,660.								
2 Total tax	2 5,356.								
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 7,594.								
4 Amount you want refunded to you	4 2,238.								
5 Amount you owe									

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

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

	radifionizo			30 firm name	to ontor or generate my rint	Er
X	Lauthorize	GLOBAL TA	XES LI	C	to enter or generate my PIN	

7	7	2	5	2	00 mV
Ent don	er fiv n't er	ve di nter a	gits, all ze	but	as my

7 1

0 9 2

Enter five digits, but don't enter all zeros

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 lauthorize 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 ►	
	Returns Only—continue below	
Part III Certification and Authentication – Practition	ner PIN Method Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five	-digit self-selected PIN. 2 2 2 4 9 6 6 1 9 8 9 Don't enter all zeros	

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 >		
	n This Form — See Instructions to the IRS Unless Requested To Do So	
		E 9970 (D 01 0001)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 01/28/23 PRO

Date

to enter or generate my PIN

E1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn 20 2	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 on is a child but not your dependent	ame of y	ed filing separately (l vour spouse. If you c					spo	lifying survi use (QSS) s name if the	U
Your first name	and mi	ddle initial	Last nar	me					Your so	cial security	number
NAVEEN K	UMAI	R REDDY	PORE	DDY					007-	57-7252	
If joint return, sp	ouse's	first name and middle initial	Last nar	me					Spouse	's social secu	urity number
RAKSHITH	A		TUMM	ALAPALLI					971-	91-7092	
Home address (numbe	r and street). If you have a P.O. box, see	instructio	ons.			A	Apt. no.	Preside	ntial Election	n Campaigr
8083 STO	NEBI	ROOK PKWY					3	310		here if you, o	,
City, town, or po	ost offic	ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	ate	ZIP c	ode	•	if filing joint this fund. C	
FRISCO					T	X	750	34	0	ow will not a	•
Foreign country	name		F	oreign province/state/	coun	ty	Foreig	n postal code	your ta:	x or refund.	-
										You	Spouse
Digital Assets		ny time during 2022, did you: (a) reco ange, gift, or otherwise dispose of a								Yes	🗙 No
Standard	Som	eone can claim: 🗌 You as a de	pendent	t 🗌 Your spous	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alier	ı					
Age/Blindness	You	Were born before January 2, 1	958 [Are blind Sp	ouse	• 🗌 Was bor	n hefr	ore January 2	1958	Is blir	hd
Dependents				(2) Social security		(3) Relationsh) Check the bo	,		
-		irst name Last name	number		to you			Child tax cr		Credit for othe	,
lf more than four		THIKA REDDY POREDDY		884-06-137	1	Daughter		X	oun		7
dependents,		IIIKA KEDDI POKEDDI		004 00 137	Daugiteer					1	
see instructions and check										1	
here											1
Incomo	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions)					. 1a	10	 1,471.
Income	b	Household employee wages not re		,							
Attach Form(s)	с	Tip income not reported on line 1a	•						. 10	;	
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep							. 10	1	
W-2G and	е	Taxable dependent care benefits f				· · · ·			. 16	•	
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	n Form 8839, line 29					. 1f		
If you did not	g	Wages from Form 8919, line 6 .							. 1g	1	
get a Form	h	Other earned income (see instruction	ions) .						. 1 h	1	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		1 i					
	z	Add lines 1a through 1h							. 1z	10	1,471.
Attach Sch. B	2a	Tax-exempt interest	2a		bΤ	axable interest			. 2b)	
if required.	3a	Qualified dividends	3a	19.	bC	Ordinary divide	nds .		. 3b)	19.
	4a	IRA distributions	4a		bΤ	axable amoun	t		. 4b)	
Standard	5a	Pensions and annuities	5a		bΤ	axable amoun	t		. 5b)	
Beduction 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, check here	(see	instructions)		[
separately, \$12,950	7	Capital gain or (loss). Attach Schee	dule D if	required. If not requ	uired	, check here		L	7		
 Married filing jointly or 	8	Other income from Schedule 1, lin	e10 .						. 8	-1	0,830.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,			com	е			. 9	9	0,660.
surviving spouse, \$25,900	10	Adjustments to income from Sche							. 10)	
Head of bousebold	11	Subtract line 10 from line 9. This is	•						. 11	-	0,660.
household, \$19,400	12	Standard deduction or itemized							. 12		5,900.
 If you checked any box under 	13	Qualified business income deduction	ion from	Form 8995 or Form	1 899	95-A			. 13		
Standard	14	Add lines 12 and 13							. 14		5,900.
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	6 6	4,760.

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

Form 1040 (2022)

Form 1040 (2022	2)								Page
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	7,356
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	7,356
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	2,000
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	2,000
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	5,356
	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 total tax					24	5,356
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a 7	,594.		
	b	Form(s) 1099				25b		1	
	с	Other forms (see instructions	s)			25c		1	
	d	Add lines 25a through 25c						25d	7,594
lf	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return .			26	
If you have a qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit fror				28		1	
	29	American opportunity credit	from Form 8863	3, line 8		29		1	
	30	Reserved for future use .				30		1	
	31	Amount from Schedule 3, lin				31		1	
	32	Add lines 27, 28, 29, and 31.				undable credits		32	
	33	Add lines 25d, 26, and 32. T						33	7,594
Defund	34	If line 33 is more than line 24						34	2,238
Refund	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	is attached, che	ck here	. 🗆	35a	2,238
Direct deposit?	b	Routing number 1 2 5					Savings		
See instructions.	d	Account number 1 3 8					9		
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24							
You Owe	01	For details on how to pay, ge						37	
	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another							
Designee							omplete b	oelow.	× No
J	De	signee's		Phone		Pers	onal identi	fication	
	nai	ne		no.		num	ber (PIN)		
Sign		der penalties of perjury, I declare t							
Here		ief, they are true, correct, and com	plete. Declaration of		,	ased on all information			, ,
	Yo	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE	ENGINEER		inst.)	
See instructions.	Sp	ouse's signature. If a joint return, k	oth must sian.	Date	Spouse's occupat	-	If the	e IRS ser	nt your spouse an
Keep a copy for	- 1-	,	5				Ident	tity Prote	ection PIN, enter it h
your records.					HOME MAKE	R	(see	inst.)	
		one no. (408)921-789	8	Email address	NAVEENREDDY	2701@GMAIL.CO	M		
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer	VENK	ATA SAI PAVAN KUMAR DUDIPALLI	VENKATA SAI	PAVAN KUM	AR DUDIPALLI	02/08/2023	P0247	0833	Self-employed
Use Only	Fir	m's name GLOBAL TAX	XES LLC				Phor	ie no. (678)965-952
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm	's EIN	88-214548
Go to www.irs.go	ov/Form	n1040 for instructions and the late	st information.		BAA	REV 01/28/23 PRO			Form 1040 (20

BAA

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

2022 Attachment Sequence No. 01 social security number

Name(s) shown on For	m 1040, 1040-SR, or 1040-NR	Your social securi
N POREDDY & R T	UMMALAPALLI	007-57-7252

Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes			1	
2 a	Alimony received		t (* 1	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. Att	ach Schedule	E .	5	-10,830.
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			
1	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)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
ο	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	8u			
z	Other income. List type and amount:				
		8z			
9	Total other income. Add lines 8a through 8z			9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NR,	line 8	10	-10,830.
	and the second		_		

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

Schedule 1 (Form 1040) 2022

Par	II Adjustments to Income				
11	Educator expenses		 	11	
12	Certain business expenses of reservists, performing artists, and fee		rernmen	ıt 🗌	
	officials. Attach Form 2106		 	12	
13	Health savings account deduction. Attach Form 8889				
14	Moving expenses for members of the Armed Forces. Attach Form 3903		 	14	
15	Deductible part of self-employment tax. Attach Schedule SE				
16	Self-employed SEP, SIMPLE, and qualified plans				
17	Self-employed health insurance deduction		 	17	
18	Penalty on early withdrawal of savings				
19a	Alimony paid				
b	Recipient's SSN				
C	Date of original divorce or separation agreement (see instructions):			-	
20	IRA deduction				
21	Student loan interest deduction				
22	Reserved for future use				
23	Archer MSA deduction			23	
24	Other adjustments:		 		
 a	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l 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			
e	Repayment of supplemental unemployment benefits under the Trade				
•	Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f			
q	Contributions by certain chaplains to section 403(b) plans	24g			
·	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			
i	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				
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				
		· ·	 		

	CHEDULE E Supplemental Income and Loss								OMB No	. 1545-0074	
(Form	rm 1040) (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)										199
Departm	ent of the Treasury		Attach to Form 1040,							Attachm	
Internal	Revenue Service		Go to www.irs.gov/ScheduleE for	r instru	uctions and	d the la	atest ir			Sequen	ce No. 13
Name(s)	ame(s) shown on return Your social										number
N PC	I POREDDY & R TUMMALAPALLI 007-57-7252										
Part			s From Rental Real Estate an								
	Note: If yo	ou are in t	he business of renting personal proper	ty, use	Schedule	C . See	e instru	ctions. If you are	an indiv	idual, rep	ort farm
			s from Form 4835 on page 2, line 40.	1. Cl.	F =	0000	!				
			ents in 2022 that would require you								
B			ou file required Form(s) 1099? .							. 🗌 Ye	s 🗌 No
1a	Physical addr	ess of e	ach property (street, city, state, ZIF	code	e)						
Α	PLOT NO:1	33,SRI	RAMNAGAR VANASTHALIPURA	AM HY	DERABA	D,TE	LANG	ANA IN 500	070		
В						,	_				
1b	Type of Prope	rty 2	For each rental real estate prope	rtv liet	bo		Fa	air Rental	Dorson	al Use	
10	(from list below		above, report the number of fair				10	Days	Da		QJV
A	2	- /	personal use days. Check the Q			Α		365		0	
B		_	if you meet the requirements to f			B		505		0	
C		_	qualified joint venture. See instru	ictions	s	C					
	of Property:					0					
	Single Family R	aaidana	e 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental			
	Multi-Family Re			lai							
2	миш-гатшу ке	sidence	4 Commercial		6 Roya	lilles	0	Other (describ	e)		
								Properties	s:		
Incom	ne:					Α		В			С
3	Rents received	1		3		4	80.				
4				4							
Exper											
5				5							
6	-		structions)	6							
7				7		1 1	50.				
8	•			8		т, т	50.				
				9							
9				-							
10	•	•	sional fees	10		1 0	0.0				
11	•			11		Ι,Ο	00.				
12			to banks, etc. (see instructions)	12							
13				13							
14				14			50.				
15				15		2,9	00.				
16				16							
17	Utilities			17		3,1	10.				
18	Depreciation e	xpense	or depletion	18							
19	Other (list)			19							
20	Total expense	s. Add lir	nes 5 through 19	20		11,3	10.				
21	Subtract line 2	0 from li	ne 3 (rents) and/or 4 (royalties). If								
			structions to find out if you must								
				21	-	-10,8	30.				
22			estate loss after limitation, if any,								
-			tructions)	22	(10,83	30.)	()	()
23a			ported on line 3 for all rental prope				23a		480.		/
b			ported on line 4 for all royalty prop				23b				
c			ported on line 12 for all properties				23c				
d			ported on line 18 for all properties				23d				
			ported on line 20 for all properties				23u	11	310.		
е 24			amounts shown on line 21. Do no				-				
24 25					-				24	(10 020 \
25			ses from line 21 and rental real estat							(-	10,830.)
26			te and royalty income or (loss).								
	nere. It Parts	11, 111, TV	, and line 40 on page 2 do not	apply	ιο you, a	aiso ei	ner tr	is amount on			

For Paperwork Reduction Act Notice, see the separate instructions.

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26

-10,830.

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

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.

20 Attachment Sequence No. 47

Internal	Revenue Service Go to www.irs.gov/Schedule8812 for instructions and the latest information.		Se	quence No. 41
Name(s	s) shown on return	Your	social se	ecurity number
N PO	REDDY & R TUMMALAPALLI	007.	-57-7	252
Pa	rt 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	90,660.
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	90,660.
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 age			
	17 or who do not have the required social security number	0		
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. res	ident		
	alien. Also, do not include anyone you included on line 4.			
7	Multiply line 6 by \$500		7	
8	Add lines 5 and 7		8	2,000.
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)		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 c	redit.		
	Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.			
	Yes. Subtract line 11 from line 8. Enter the result.			
13	Enter the amount from the Credit Limit Worksheet A		13	7,356.
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 addition	onal ch	ild tax	credit
	on Form 1040, 1040 SP, or 1040 NP, line 29, Complete your Form 1040, 1040 SP, or 1040 J	ID the	angh li	no 27

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. REV 01/28/23 PRO Schedule 8812 (Form 1040) 2022 BAA

Schedu	le 8812 (Form 1040) 2022		Page 2
Part	II-A Additional Child Tax Credit for All Filers		
Cautio	n: 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	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	16b	
	TIP: The number of children you use for this line is the same as the number of children you used for line 4.		
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots$	20	
	Next. On line 16b, is the amount \$4,500 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. 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	, , , , , , , , , , , , , , , , , , ,	IS OT H	vuerto 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	-	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form		
22	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 22 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 27,)		
	and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	
23 26	Enter the larger of line 20 or line 25	26	
20	Next, enter the smaller of line 17 or line 26 on line 27.		
Part	II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	
	· · · · · · · · · · · · · · · · · · ·		812 (Form 1040) 2022

	8867	Paid Preparer's Due Dili	gence Checkl	ist	ОМВ	No. 1545	-0074
	ovember 2022)	Earned Income Credit (EIC), American Op Child Tax Credit (CTC) (including the Addition Credit for Other Dependents (ODC)), and Head	portunity Tax Credit (AO nal Child Tax Credit (AC]	TC), TC) and		For tax y 20	ear
Departn	nent of the Treasury Revenue Service	Credit for Other Dependents (ODČ)), and Head To be completed by preparer and filed with Form 1040, Go to www.irs.gov/Form8867 for instruction	, 1040-SR, 1040-NR, 104	0-PR, or 1040-SS.		nment ence No.	70
	er name(s) shown on			Taxpayer identificatio			
		TUMMALAPALLI		007-57-725			
	er's name			Preparer tax identifica	_	ber	
VEN	KATA SAI PA	VAN KUMAR DUDIPALLI		P02470833			
Part	Due Dili	gence Requirements		1			
Please	e check the app	ropriate box for the credit(s) and/or HOH filing stat ed (check all that apply).	tus claimed on the ref	·	e the rel AOTC		arts I–V HOH
1	. ,	ete the return based on information for the applica		by the taxpaver	Yes	No	N/A
-		obtained by you? (See instructions if relying on prior			×		
2	worksheets for 1040) instructi	claimed on the return, did you complete the appund in the Form 1040, 1040-SR, 1040-NR, 1040-P ons, and/or the AOTC worksheet found in the F hat provides the same information, and all related	R, 1040-SS, or Scher Form 8863 instructior	dule 8812 (Form ns, or your own	X		
3	Did you satisfy the following.	the knowledge requirement? To meet the knowled	dge requirement, you	must do both of			
	determine th	taxpayer, ask questions, and contemporaneously of at the taxpayer is eligible to claim the credit(s) and/o	or HOH filing status.	·			
	status and to	mation to determine that the taxpayer is eligible to figure the amount(s) of any credit(s)			X		
4	information rea	nation provided by the taxpayer or a third party asonably known to you, appear to be incorrect, ir ons 4a and 4b. If " No ," go to question 5.)	ncomplete, or inconsi	stent? (If "Yes,"		X	
а	Did you make	reasonable inquiries to determine the correct, comp	lete, and consistent ir	nformation? .			
b	Did you conte you asked, wh	mporaneously document your inquiries? (Docume om you asked, when you asked, the information th d on your preparation of the return.)	entation should includ hat was provided, and	le the questions d the impact the			
5	keep a copy of applicable wor 8867 and any taxpayer that y the amount(s)	v the record retention requirement? To meet the ref f your documentation referenced in question 4b, a d ksheet(s), a record of how, when, and from whom applicable worksheet(s) was obtained, and a copy you relied on to determine eligibility for the credit(s) of the credit(s)	copy of this Form 886 the information used / of any document(s)) and/or HOH filing st	7, a copy of any to prepare Form provided by the atus or to figure	X		
		uments provided by the taxpayer, if any, that you re					
6	credit(s) and/o	e taxpayer whether he/she could provide documen r HOH filing status and the amount(s) of any created for audit?	dit(s) claimed on the	return if his/her	X		
7	Did you ask the	e taxpayer if any of these credits were disallowed or	r reduced in a previou	s year?	×		
	(If credits wer	e disallowed or reduced, go to question 7a; if no	t, go to question 8.)				
а	•	ete the required recertification Form 8862?					
8		is reporting self-employment income, did you ask ule C (Form 1040)?					

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For Paperwork Reduction Act Notice, see separate instructions.

REV 01/28/23 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?			
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)? Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not			
Part	or ODC, go to Part IV.)		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?	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?	X		
Part		, 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		s, go to	o Part	VI.)
14 Part	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax and provided more than half of the cost of keeping up a home for the year for a qualifying person? Eligibility Certification	k year	Yes	No
Fart	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: 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);	nses on	the ret	urn or
	 B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checkly credit(s) claimed and HOH filing status, if claimed; 	list for a	ny app	licable
	 C. Submit Form 8867 in the manner required; and D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 <i>Document Retention</i>. 1. A copy of this Form 8867. 2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed. 	67 instru	uctions	under
	2. The applicable worksheet(s) of your own worksheet(s) for any credit(s) claimed.			

- 3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for 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 the answers on this Form 8867 are, to the best of your knowledge, true, correct, and	Yes	No
	complete?	×	

REV 01/28/23 PRO

Form 8867 (Rev. 11-2022)

Form 8582
Department of the Treasury Internal Revenue Service

Passive Activity Loss Limitations

See separate instructions.

Attach to Form 1040, 1040-SR, or 1041.

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 20 Attachment Sequence No. 858

Identifying number

007-57-7252

Name(s) shown on return

Part I

N POREDDY & R TUMMALAPALLI

2022 Passive	Activity Loss	
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Caution: Complete Parts IV and V before completing Part I.

	al Real Estate Activities With Active Participation (For the definition of active participation, see Special ance for Rental Real Estate Activities in the instructions.)		
1a b c d	Activities with net income (enter the amount from Part IV, column (a))1a0.Activities with net loss (enter the amount from Part IV, column (b))1b(10,830.)Prior years' unallowed losses (enter the amount from Part IV, column (c))1c()Combine lines 1a, 1b, and 1c	1d	-10,830.
	her Passive Activities		
2a b c d	Activities with net income (enter the amount from Part V, column (a)) 2a Activities with net loss (enter the amount from Part V, column (b)) 2b Prior years' unallowed losses (enter the amount from Part V, column (c)) 2c Combine lines 2a, 2b, and 2c .	2d	
3	Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used	3	-10,830.

If line 3 is a loss and: • Line 1d is a loss, go to Part II.

• Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10.

Par	t II Special Allowance for Rei	ntal Real Estate	Activities With	Active Par	rticipa	tion		
	Note: Enter all numbers in Par	t II as positive amo	ounts. See instruct	ions for an e	exampl	e.		
4	Enter the smaller of the loss on line 1	d or the loss on lir	ne3				4	10,830.
5	Enter \$150,000. If married filing separ	ately, see instructi	ons	5	15	50,000.		
6	Enter modified adjusted gross income	e, but not less thar	n zero. See instruc	tions 6	10	01,490.		
	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	to line 5, skip line	s 7 and 8 and ent	er -0-				
7	Subtract line 6 from line 5			7	4	18,510.		
8	Multiply line 7 by 50% (0.50). Do not e	nter more than \$25	,000. If married filir	ng separately	/, see ir	structions	8	24,255.
9	Enter the smaller of line 4 or line 8						9	10,830.
Par								
10	Add the income, if any, on lines 1a an	d 2a and enter the	etotal				10	0.
11	Total losses allowed from all passiv	e activities for 20	22. Add lines 9 an	d 10. See in	structio	ons to find		
	out how to report the losses on your t	ax return					11	10,830.
Par	t IV Complete This Part Before	e Part I, Lines 1	a, 1b, and 1c. S	ee instructi	ions.			
	Name of activity	Currer	nt year	Prior yea	ars	Over	rall ga	ain or loss
	Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallov loss (line		(d) Gain	I	(e) Loss
PLO'	T NO:133,SRIRAMNAGAR	0.	10,830.					10,830.

10,830. Total. Enter on Part I, lines 1a, 1b, and 1c 0. For Paperwork Reduction Act Notice, see instructions.

Form 8582 (2022)

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REV 01/28/23 PRO

Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

Part V Complete This Part Be	fore Part I, Lines 2	a, 2b,	and 2c. S	See instruct	tions.			
	Curre	nt year		Prior ye	ars	Overa	ll gain or loss	
Name of activity	(a) Net income (line 2a)	(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)		(d) Gain	(e) Loss	
		、	/		- /			
otal. Enter on Part I, lines 2a, 2b, and 2d Part VI Use This Part if an Am		Part II.	Line 9. S	ee instruct	ions			
	Form or schedule							
Name of activity	and line number to be reported on (see instructions)	(a)) Loss	(b) Rat	io	(c) Special allowance	(d) Subtract column (c) from column (a).	
PLOT NO:133, SRIRAMNAGAR	E Ln 22		10,830.	1.00000	0000	10,83	0. 0	
	I						_	
otal Part VII Allocation of Unallowe	d Losses. See inst	uction	<u>10,830.</u> S	1.00		10,83	0. 0	
	Form or sch							
Name of activity	and line nu to be report (see instruc	mber ed on	(a) l	Loss	((b) Ratio	(c) Unallowed loss	
otal	<u></u>	• •				1.00		
	Form or sch	edule						
Name of activity	and line nu to be report (see instruc	mber ed on	(a) L	Loss	(b) Ur	nallowed loss	(c) Allowed loss	

REV 01/28/23 PRO

Form **8582** (2022)