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SHRIKANT SUHAS PATKI 385-29-9902 Hjort return, spose's first arme and middle initial Last name Spouse's social security number DEERALI SHIKRANT APL-RD APL-RD Hort return, spose's first mame and middle initial Last name APL-RD DEERALI SHIKRANT APL-RD Presidential Election Campaign City, town, or pool office. If you have a foreign address, also complete spaces below. State 29 code Foreign country name Foreign province/state/country Foreign postal code You is so refution. Digital At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, To is fund. Checking a Standard Someone can called miles: You are a dual-status allen Age/Bindness You: Yee is to is fund. Checking a Dependents, see instructions; If Part anne If a total amount from Form(9) W-2, box 1 (see instructions) Yee is to is fund. Checking a Hir Wire Area If is instructions; If a total amount from Form(9) W-2, box 1 (see instructions) If a total amount from Form(9) W-2, box 1 (see instructions) If a total amount from form (9) W-2, lose instructions) If a total amount from Form (9) W-2, lose instructions) If a total amount	Check only	lf yo	u checked the MFS box, enter the n	ame of y		,			. ,	spo	use (QSS)	lifying
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County name State ZP code spouse if filing jointly, want S3 Foreign country name Foreign province/state/country Foreign province/state/country spouse if filing jointly, want S3 Digital At any time during 2022, did your (a) receive (as a reward, or payment for property or service); or (b) sell, your tax or refund. You Spouse Digital At any time during 2022, did your (a) receive (as a reward, award, or payment for property or service); or (b) sell, Yee Xee No Standard Someone can claim: You as a dependent Your spouse as a dependent Yee with No Deduction Spouse: temizes on a separate return or you were a dual-status alien 40 Check the box if qualifies for (see instructions): (1) Reationship (1) Check the box if qualifies for (see instructions): If more (1) First name Last name number (a) Social security (b) Reationship (c) Check the box if qualifies for (see instructions): If more 11 Total amount from Form(s) W-2, box 1 (see instructions) 10 (b) (c) V2 area Attes forms 4 Total amount from Form(s) W-2, box 1 (see instructions) 10 (c) V2 area Medicaid waiver payments not reported on Form(s) W-2. 1	Home address (numbe	er and street). If you have a P.O. box, see	instructio	ons.			A	Apt. no.	Preside	ntial Election Can	npaigr
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\$19,400 12 Standard deduction or itemized deductions (from Schedule A) 12 25,900. • If you checked any box under Standard 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 13 • If you checked any box under Standard 14 Add lines 12 and 13 14 25,900. • If you checked any box under Standard 14 25,900. 14 25,900. • If you checked any box under Standard 14 25,900. 14 25,900. • If you checked any box under Standard 15 28,327 28,327								• •				
any box under Standard 14 Add lines 12 and 13 14 25,900 Deduction, 15 Subtract line 14 from line 11. If zero or less enter -0- This is your taxable income 15 28,327	\$19,400							· ·				00.
Standard 14 Add lines 12 and 13 14 25,900. Deduction, 15 Subtract line 14 from line 11. If zero or less enter -0- This is your taxable income 15 28,327						or Form 899	5-A	• •				
	Standard								· · ·			
		15	Subtract line 14 from line 11. If zer	o or less	s, enter -U I	nis is your	axable incom	e.		. 15	28,3	21.

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	2,988.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	2,988.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	500.
	20	Amount from Schedule 3, lir	ne8					20	2,000.
	21	Add lines 19 and 20						21	2,500.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	488.
	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	488.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a	,437.		
	b	Form(s) 1099				25b		1	
	с	Other forms (see instruction	s)			25c		1	
	d	Add lines 25a through 25c						25d	9,437.
16	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)				27			
attach Sch. EIC.	28	Additional child tax credit from				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, lir				31		1	
	32	Add lines 27, 28, 29, and 31						32	
	33	Add lines 25d, 26, and 32. T			-			33	9,437.
Defund	34	If line 33 is more than line 24						34	8,949.
Refund	35a	Amount of line 34 you want				•	. 🗆	35a	8,949.
Direct deposit?	b	Routing number 1 2 2				_	Savings		
See instructions.	d	Account number 4 5 7		3 4 2 6			0		
	36	Amount of line 34 you want		2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	This is the am	ount vou owe					
You Owe	•	For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee		structions					omplete b	elow.	X No
		signee's		Phone			onal identif	ication	
	nai			no.			oer (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here		· · ·			,		1		, 0
	YO	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					FULL TIME	EMPLOYED	(see		
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupati	on			nt your spouse an
Keep a copy for your records.								-	ection PIN, enter it here
your records.					HOME MAKEF		(see	nsi.)	
		one no. (929) 832-189		Email address	PATKIS@GMA		DTIN		
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	03/02/2023	P02082		Self-employed
Use Only		m's name GLOBAL TA							678)965-9522
			Y CT E BRU	NSWICK N			Firm'	's EIN	84-3171965
Go to www.ire a	ov/Form	1010 for instructions and the late	et information						Form 1040 (2022)

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

BAA REV 02/24/23 PRO

Form **1040** (2022)

Additional Credits and Payments

OMB No. 1545-0074

Attachment Sequence No. 03

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

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

	ame(s) shown on Form 1040, 1040-SR, or 1040-NR Your soc SHRIKANT SUHAS & DEEPALI SHRIKANT PATKI 385-2				urity number
Par			000		
1	Foreign tax credit. Attach Form 1116 if required			1	
2	Credit for child and dependent care expenses from Form 244 Form 2441	1, line 11.	Attach	2	
3	Education credits from Form 8863, line 19			3	2,000.
4	Retirement savings contributions credit. Attach Form 8880			4	
5	Residential energy credits. Attach Form 5695			5	
6	Other nonrefundable credits:				
а	General business credit. Attach Form 3800	6a		_	
b	Credit for prior year minimum tax. Attach Form 8801	6b		_	
С	Adoption credit. Attach Form 8839	6c		_	
d	Credit for the elderly or disabled. Attach Schedule R	6d		_	
е	Alternative motor vehicle credit. Attach Form 8910	6e		_	
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f		_	
g	Mortgage interest credit. Attach Form 8396	6g		_	
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h		_	
i	Qualified electric vehicle credit. Attach Form 8834	6i		-	
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j			
k	Credit to holders of tax credit bonds. Attach Form 8912	6k		_	
I	Amount on Form 8978, line 14. See instructions	61		_	
z	Other nonrefundable credits. List type and amount:				
		6z			
7	Total other nonrefundable credits. Add lines 6a through 6z			7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040 line 20)-SR, or 104	40-NR, 	8	2,000.
					d on page 2)
For Pa	perwork Reduction Act Notice, see your tax return instructions.	REV 02/24/23	B PRO	Schedule 3	3 (Form 1040) 2022

Schedule 3 (Form 1040) 2022

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b		
С	Reserved for future use	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g h	Reserved for future use	13g 13h		
z	Other payments or refundable credits. List type and amount:	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	-SR, or 1040-NR,	15	
	BAA REV	02/24/23 PRO	Schedule 3	(Form 1040) 202

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 2 Attachment Sequence No. 47

Internal	Revenue Service Go to www.irs.gov/Schedule8812 for instructions and the latest information.		Se	quence No. 47
Name(s)	shown on return	Your so	cial se	curity number
SHRI	KANT SUHAS & DEEPALI SHRIKANT PATKI	385-2	29-9	902
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	54,227.
2a	Enter income from Puerto Rico that you excluded			
b	Enter the amounts from lines 45 and 50 of your Form 2555	0.		
с	Enter the amount from line 15 of your Form 4563			
d	Add lines 2a through 2c		2d	Ο.
3	Add lines 1 and 2d		3	54,227.
4	Number of qualifying children under age 17 with the required social security number 4	0		
5	Multiply line 4 by \$2,000		5	
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	-		
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. residu			
	alien. Also, do not include anyone you included on line 4.			
7	Multiply line 6 by \$500 .		7	FOO
8	Add lines 5 and 7	-	8	500.
0 9	Enter the amount shown below for your filing status.	· -	0	500.
9	Married filing jointly—\$400,000			
	• All other filing statuses—\$200,000 }		9	400,000.
10	Subtract line 9 from line 3.	· -	9	400,000.
10	• If zero or less, enter -0			
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For			
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.		10	0
11	Multiply line 10 by 5% (0.05)	· –	10	0.
11	Is the amount on line 8 more than the amount on line 11?		11	500.
14	■ No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax cre		12	500.
	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	988.
14	Enter the smaller of line 12 or 13. This is your child tax credit and credit for other dependents		14	500.
	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	al chil	d tax	credit
		1.	1 1.	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. Schedule 8812 (Form 1040) 2022 REV 02/24/23 PRO BAA

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	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 and1040-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	
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	
	BAA REV 02/24/23 PRO Sct	nedule 8	3812 (Form 1040) 2022



Name(s) shown on return

Education Credits (American Opportunity and Lifetime Learning Credits)

Attach to Form 1040 or 1040-SR.

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

OMB No. 1545-0074

Your social security number

385-29-9902

SHRIKANT SUHAS & DEEPALI SHRIKANT PATKI



Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

Part	Refundable American Opportunity Credit					
1	After completing Part III for each student, enter the total of all amounts from all P	arts I	II, line	30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household,					
	or qualifying surviving spouse	2				
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form					
	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for					
	the amount to enter instead	3				
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education	4				
-	credit	4				
5	qualifying surviving spouse	5				
6		Ŭ				
Ŭ	Equal to or more than line 5, enter 1.000 on line 6)		
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (ro				6	
	at least three places)			J		
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of th					
	conditions described in the instructions, you can't take the refundable America					
	skip line 8, enter the amount from line 7 on line 9, and check this box				7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter	the a	amoun	t here and	8	
Part	on Form 1040 or 1040-SR, line 29. Then go to line 9 below	•			o	
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	(600	instru	ctions)	9	
10	After completing Part III for each student, enter the total of all amounts from a	•		,		
10	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19				10	28,794.
11	Enter the smaller of line 10 or \$10,000				11	10,000.
12	Multiply line 11 by 20% (0.20)				12	2,000.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or					
	qualifying surviving spouse	13	-	L80,000.		
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form					
	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for					
45	the amount to enter instead	14		54,227.		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19	15		L25,773.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or	10	-	LZJ , 113.		
10	qualifying surviving spouse	16		20,000.		
17	If line 15 is:					
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18)		
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (roun least three places)			}	17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet			tions)	18	2,000.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit	•		,		,
	instructions) here and on Schedule 3 (Form 1040), line 3			<u> </u>	19	2,000.
For Pa	perwork Reduction Act Notice, see your tax return instructions.	A A		REV 02/24/2	3 PRO	Form 8863 (2022)

385-29-9902

SHRIKANT SUHAS & DEEPALI SHRIKANT PATKI

CAUT	Complete Part III for each student for whom credit or lifetime learning credit. Use addition		
Part	III Student and Educational Institution Information	n. See instructions.	
	Student name (as shown on page 1 of your tax return) RHUTA	21 Student social security number (as s your tax return)	hown on page 1 of
	PATKI	721-66-3305	
22	Educational institution information (see instructions)		
а	 Name of first educational institution 	b. Name of second educational institut	ion (if any)
	University of Illinois		
(Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 	 Address. Number and street (or P. post office, state, and ZIP code. If instructions. 	
	809 S. Marshfield Avenue		
	CHICAGO IL 60612		
(2	2) Did the student receive Form 1098-T from this institution for 2022?	(2) Did the student receive Form 1098 from this institution for 2022?	-T 🗌 Yes 🗌 No
(;	3) Did the student receive Form 1098-T from this institution for 2021 with box ☐ Yes ⊠ No 7 checked?	 (3) Did the student receive Form 1098 from this institution for 2021 with k 7 checked? 	
(4	4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	 (4) Enter the institution's employer ide if you're claiming the American opp checked "Yes" in (2) or (3). You can 1098-T or from the institution. 	portunity credit or if you
	37-6000511		
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?	\Box Yes - Stop! Go to line 31 for this student. X No	— Go to line 24.
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2022 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.		— Stop! Go to line 31 this student.
25	Did the student complete the first 4 years of postsecondary education before 2022? See instructions.	X Yes - Stop! On this student. No	– Go to line 26.
26	Was the student convicted, before the end of 2022, of a felony for possession or distribution of a controlled substance?		 Complete lines 27 ugh 30 for this student.
CAUT	You can't take the American opportunity credit and the la you complete lines 27 through 30 for this student, don't d		t in the same year. If
	American Opportunity Credit		
27	Adjusted qualified education expenses (see instructions). Dor	i't enter more than \$4,000	27
28			28
29	Multiply line 28 by 25% (0.25)		29
30	If line 28 is zero, enter the amount from line 27. Otherwise, a		
	enter the result. Skip line 31. Include the total of all amounts f	rom all Parts III, line 30, on Part I, line 1.	30
	Lifetime Learning Credit		
31	Adjusted qualified education expenses (see instructions). Incl III, line 31, on Part II, line 10		31 28,794.
			- 0000

Form **8863** (2022)

	8867	Paid Preparer's Due Diligence Checkli	st	ОМВ	No. 1545	-0074
Form		Earned Income Credit (EIC), American Opportunity Tax Credit (AOT	⁻ C).		For tax y	rear
(Rev. N	ovember 2022)	Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACT) Credit for Other Dependents (ODC)), and Head of Household (HOH) Filin	C) and g Status		20	
	nent of the Treasury Revenue Service	To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040 Go to www.irs.gov/Form8867 for instructions and the latest inform	-PR, or 1040-SS.	Attack Seque	hment ence No.	70
	er name(s) shown or	-	Taxpayer identificatio			
SHR	IKANT SUHAS	& DEEPALI SHRIKANT PATKI	385-29-990	2		
Prepare	r's name		Preparer tax identifica	ation num	ber	
SYA	M PRIYA RAN	I SAGAR GUPTA TALLAM	P02082703			
Part	Due Dili	gence Requirements				
		ropriate box for the credit(s) and/or HOH filing status claimed on the retuined (check all that apply).		e the rel AOTC		arts I–\ HOH
1	Did you comp	ete the return based on information for the applicable tax year provided	by the taxpayer	Yes	No	N/A
		obtained by you? (See instructions if relying on prior year earned income.)		×		
2	worksheets fo 1040) instruct	claimed on the return, did you complete the applicable EIC and/or C und in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Sched ons, and/or the AOTC worksheet found in the Form 8863 instruction hat provides the same information, and all related forms and schedules	lule 8812 (Form s, or your own	X		
3	the following.Interview the determine theReview information	the knowledge requirement? To meet the knowledge requirement, you r taxpayer, ask questions, and contemporaneously document the taxpayer at the taxpayer is eligible to claim the credit(s) and/or HOH filing status. mation to determine that the taxpayer is eligible to claim the credit(s) and	's responses to nd/or HOH filing			
4		o figure the amount(s) of any credit(s)		×		
	information re	asonably known to you, appear to be incorrect, incomplete, or inconsisons 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	you asked, wh	mporaneously document your inquiries? (Documentation should include om you asked, when you asked, the information that was provided, and d on your preparation of the return.)	the impact the			
5	keep a copy of applicable word 8867 and any taxpayer that the amount(s)	v the record retention requirement? To meet the record retention require f your documentation referenced in question 4b, a copy of this Form 8867 (ksheet(s), a record of how, when, and from whom the information used t applicable worksheet(s) was obtained, and a copy of any document(s) p you relied on to determine eligibility for the credit(s) and/or HOH filing state of the credit(s)	7, a copy of any o prepare Form provided by the atus or to figure	X		
	List those doc	uments provided by the taxpayer, if any, that you relied on:				
6	credit(s) and/c	e taxpayer whether he/she could provide documentation to substantiate r HOH filing status and the amount(s) of any credit(s) claimed on the ed for audit?		X		
7	Did you ask th	e taxpayer if any of these credits were disallowed or reduced in a previous	syear?	X		
	(If credits we	e disallowed or reduced, go to question 7a; if not, go to question 8.)				
а	Did you compl	ete the required recertification Form 8862?				
8		is reporting self-employment income, did you ask questions to prepare a le C (Form 1040)?	a complete and			

For Paperwork Reduction Act Notice, see separate instructions.

REV 02/24/23 PRO

Form 8867 (Rev. 11-2022)

Form 8	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	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes 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 tc	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 statu	is, go te	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?	x year	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:	/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/c	n the ret or HOH	urn 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.
- 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?	X	

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Form 8867 (Rev. 11-2022)

Form W-7
(Rev. August 2019)
Department of the Treasury Internal Revenue Service

Application for IRS Individual Taxpayer Identification Number

Department of the Treas Internal Revenue Service		See sepa		•	ermanen	t reside	nts.			
An IRS individua	taxpayer identification number	er (ITIN) is for	U.S. feder	al tax pı	ırposes	only.			oe (check one	
Before you begin: • Don't submit this form if you have, or are eligible to get, a U.S. social security					nber (SS	N).	☑ Apply for a new ITIN ☐ Renew an existing ITIN			
	ubmitting Form W-7. Read the ederal tax return with Form W-								c, d, e, f, or	g, you
_	alien required to get an ITIN to clair	n tax treaty bene	fit							
_	ent alien filing a U.S. federal tax return									
_	dent alien (based on days present in the United States) filing a U.S. federal tax return									
	Alent of U.S. citizen/resident alien If d , enter relationship to U.S. citizen/resident alien (see instructions) If d or e , enter name and SSN/ITIN of U.S. citizen/resident alien (see instructions)									
	ent alien student, professor, or researcher filing a U.S. federal tax return or claiming an exception									
	spouse of a nonresident alien holdin	g a U.S. visa								
h 🗌 Other (see in	·					· · · · · · · · ·	.			
	on for a and f: Enter treaty country 1a First name	try ► and treaty arti Middle name				Last name				
Name (see instructions)	DEEPALI SHRIKANT						ATKI			
Name at birth if different	1b First name						name			
Applicant's	2 Street address, apartment number, or rural route number. If you have a P.O. box, see separate instructions. 215 MAHI MAHI LANE									
Mailing Address	City or town, state or province, and country. Include ZIP code or postal code where appropriate. COCOA FL USA 32927									
Foreign (non- U.S.) Address	3 Street address, apartment number, or rural route number. Don't use a P.O. box number.									
(see instructions)	City or town, state or province, and country. Include postal code where appropriate.									
Birth Information	4 Date of birth (month / day / year) 05/09/1974	year) Country of birth City and state or province INDIA					e (optional) 5 Male			
Other Information	6a Country(ies) of citizenship	p 6b Foreign tax I.D. number (if a			f any) 6c Type of U.S. visa (if any), number, and expiration date					
	6d Identification document(s) submitted (see instructions) ☑ Passport □ Driver's license/State I.D. □ USCIS documentation □ Other □ Date of entry into □ Uscis documentation □ Other □ Date of entry into									
	the United States Issued by: INDIA No.: W7022118 Exp. date: 11/08/2032 (MM/DD/YYYY):									
	 Be Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)? No/Don't know. Skip line 6f. Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions). 									
	6f Enter ITIN and/or IRSN ► ITI	N			IR	SN		,		and
	name under which it was issue									
	First name Middle name Last name									
	6g Name of college/university or company (see instructions) ▶									
	City and state				ength of					
Sign Here	Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number.									
Keep a copy for your records.	Signature of applicant (if delegate, see instructions)			Date (month / day / year) F			Phone num	nber		
	Name of delegate, if applicable		Delegate's relationship to applicant				Parent Court-appointed guardian			
Acceptance	Signature						Phone Fax			
Agent's Use ONLY	Name and title (type or print)	Name of co	lame of company EIN Office co			PTIN ode				

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