# E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space

For the year Jan.	1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling _			, 20		See se	parate ins	tructions.
Your first name	and m	iddle initial	Last na	ame						Your so	cial securi	ty number
APARNA J	OSHI	WIN	KAN]	ГGА						729	80 7	532
		s first name and middle initial	Last na									curity number
Home address (	numbe	er and street). If you have a P.O. box, see	instruct	ions.			A	pt. no.		Preside	ntial Electi	on Campaign
10009 LA	KEM	ONT DR							l	Check I	here if you,	, or your
City, town, or po	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	ate	ZIP co	ode				ntly, want \$3
FORT WOR	TH				T	X	761	31		0	low will not	Checking a change
Foreign country	name			Foreign province/state/	coun	ty	Foreig	n postal c			x or refund.	0
											You	Spouse
Filing Status		Single				X Head of he	ouseh	old (HOH	H)			
Check only		Married filing jointly (even if only or	ne had	income)								
one box.		Married filing separately (MFS)				☐ Qualifying	surviv	ing spou	use (C	QSS)		
	-	you checked the MFS box, enter the			ı che	ecked the HOH	or Q	SS box,	enter	the ch	ild's name	; if the
	qu	alifying person is a child but not you	ır depei	ndent:								
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	pavr	ment for prope	rtv or	services)	): or (	b) sell.		
Assets		nange, or otherwise dispose of a digi					-				☐ Yes	⊠ No
Standard	Som	neone can claim:	penden	t Your spous	e as	a dependent						
Deduction		Spouse itemizes on a separate return	n or you	u were a dual-status	alier	1						
Age/Blindness	Vou	: Were born before January 2, 19	050 [	Are blind Spo	ouse	: Was bor	n hefe	re lanus	an / 2	1050	☐ Is bl	lind
Dependents			JJJ [	<u></u>			14					instructions):
-		instructions). irst name Last name		(2) Social security number	'	(3) Relationsh to you	lib (	Child to			1	ther dependents
If more than four	· ·	ARJUN DANIEL KOTHA		524-53-264	5	Son			X			
dependents,	11110			321 33 201	<u> </u>	5011						
see instructions and check	. —								_			
here								[				
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (se	ee instructions)						1a	1.	23,011.
	b	Household employee wages not re	eported	on Form(s) W-2 .						1b	,	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	ı (see in	structions)						10	;	
attach Forms	d	Medicaid waiver payments not rep	orted o	on Form(s) W-2 (see i	nstru	uctions)				10	1	
W-2G and 1099-R if tax	е	Taxable dependent care benefits for	rom Fo	rm 2441, line 26						1e	;	
was withheld.	f	Employer-provided adoption bene-	fits fror	n Form 8839, line 29						1f	:	
If you did not	g	Wages from Form 8919, line 6 .								19	<u>,                                      </u>	
get a Form W-2, see	h	Other earned income (see instructi	ions)							1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		1i						
	Z	Add lines 1a through 1h	. ;							1z	: 12	23,011.
Attach Sch. B	2a	Tax-exempt interest	2a		<b>b</b> T	axable interest	t.			2b	,	
if required.	3a		3a		<b>b</b> C	Ordinary divider	nds .			3b	)	
Standard	4a	IRA distributions	4a			axable amoun				4b	)	
Deduction for—	5a	<del>-</del>	5a			axable amoun				5b		
Single or Married filing	6a	,	6a			axable amoun	t		٠ ـ	6b	<u>'</u>	
separately,	C	If you elect to use the lump-sum el		·	•	,				]   _	4	
\$13,850 Married filing	7	Capital gain or (loss). Attach Sched							. L	7		0 010
jointly or Qualifying	8	Additional income from Schedule 1	•							8		-8,813.
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•						9		14,198.
Head of	10	Adjustments to income from Sche								10		1 1 1 0 0
household, \$20,800	11	Subtract line 10 from line 9. This is	•	-						11		14 <b>,</b> 198.
If you checked _	12	Standard deduction or itemized		•	,	 NE A				12		20 <b>,</b> 800.
any box under Standard	13 14	Qualified business income deducti Add lines 12 and 13	ווטוו ווטוו	III OIIII 0990 UI FORM	098	ло- <b>А</b>				13		20,800.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss. enter -0- This is v	our	taxable incom	 ne			15		93,398.

Form 1040 (2023	3)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			16	14,244.
Credits	17	Amount from Schedule 2, lir	ne 3						17	
	18	Add lines 16 and 17							18	14,244.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812				19	2,000.
	20	Amount from Schedule 3, lir	ne 8						20	
	21	Add lines 19 and 20							21	2,000.
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0					22	12,244.
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 21 .				23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>						24	12,244.
Payments	25	Federal income tax withheld								
•	а	Form(s) W-2				25a	12	,411.		
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c							25d	12,411.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return				26	
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	28	Additional child tax credit fro	m Schedule 8812			28				
	29	American opportunity credit	from Form 8863	8, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir	ne 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable	credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments					33	12,411.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you <b>c</b>	verpaid		34	167.
	35a	Amount of line 34 you want			is attached, che	ck here			35a	167.
Direct deposit?	b	Routing number 1 2 1	0 4 2 8	8 2	c Type: 🛛	Check	ing 🔲 🤄	Savings		
See instructions.	d	Account number 8 7 0	1 6 6 4	3 8 8						
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the <b>amo</b>	ount you owe.						
You Owe		For details on how to pay, g	o to www.irs.gov	//Payments or	see instructions				37	
	38	Estimated tax penalty (see i	nstructions) .			38				
<b>Third Party</b>	Do	you want to allow another	person to disc	cuss this retu	n with the IRS?	See				_
Designee	ins	instructions							below.	<b>⋉</b> No
		Designee's Phone Personal ide name no. number (PIN)							fication	
0:		der penalties of perjury, I declare t	hat I have examined		accompanying sch	odulos an		, ,	the best	of my knowledge and
Sign		ief, they are true, correct, and com								
Here	Υo	ur signature		Date	Your occupation			l If the	IRS se	nt you an Identity
	10	ar signature		Date	Tour occupation					IN, enter it here
Joint return?					SOFTWARE 1	DEVEL	OPER	(see	inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return,	<b>both</b> must sign.	Date	Spouse's occupat	ion				nt your spouse an
your records.									tity Proti inst.)	ection PIN, enter it here
•		(606) 061 014	^	Farall addisses		D 0 03 43	TT 001			
		one no. (626) 861-214 eparer's name	Preparer's signat	Email address	JOSHWIN.A	P@GMA Date	ть.COM	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM	1 ,		רווסחה החתווים		2/2024		2702	Self-employed
Preparer				TAN SAGAK	GUFIA IALLAM	1 03/1	3/2024	P0208		
Use Only		m's name GLOBAL TA		או מואד מוע אי	T 00016					(678) 965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	MOMICK N	η ηρρτρ			Firm	i's EIN	84-3171965

## SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

APARNA JOSHWIN KANIGA

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

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

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

Your social security number 729-80-7532

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule E .	5	-8,813.
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		8k		
ı	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		
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 (	4	
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:	0_		
0	Total other income. Add lines 0s through 0s	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente 1040, 1040-SR, or 1040-NR, line 8		10	-8,813.
	10+0, 10+0-011, 01 10+0-11111, 11110 0		10	-0,013.

Schedule 1 (Form 1040) 2023 Page **2** 

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-ba	asis government		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903 .		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	ła		
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit	łb		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses	ld		
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24	lg		
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	łh		
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			
j	Housing deduction from Form 2555	4j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	łk		
Z	Other adjustments. List type and amount:			
<b>0</b> -			05	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . E	nter here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	<u> </u>	26	

#### **SCHEDULE E** (Form 1040)

#### **Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

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

Your social security number

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. 13

APAF	APARNA JOSHWIN KANIGA					729-80-7532					
Part											
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	ty, use	Schedule	C. See	instru	ctions. If you a	re an	individual,	report	farm	
Α [	Did you make any payments in 2023 that would require you	to file	Form(s) 1	naa2 S	Saa ing	etructions			Vac	X No	
		'es," did you or will you file required Form(s) 1099?								□ No	
				• •	• •		• •		100		
1a	Physical address of each property (street, city, state, ZIF		<u> </u>								
Α_	202 JAYANTHI RESIDENCY HIGH TENSION I	LN NI	ZAMPET	' X R	DAC	HYDERABAD	) ]	N 5000	90		
В											
С											
1b	Type of Property 2 For each rental real estate prope				Fa	ir Rental	Pe	rsonal Us	е	QJV	
Α.	(from list below) above, report the number of fair personal use days. Check the Q			Α		Days		Days			
A B	if you meet the requirements to f			A B		365		0			
C	qualified joint venture. See instru	ıctions		С							_
	of Property:										
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental					
	Multi-Family Residence 4 Commercial	tai	6 Roya			Other (descr	rihe)				
	Width Farmy Flooractics From Front Continuous		- Tioyu								
_						Properti	es:				
Incon				Α		В			С	;	
3	Rents received	3		1,0	00.						
4	Royalties received	4									
Exper		5									
5 6	Advertising	6									_
7	Cleaning and maintenance	7		2 6	60.						
8	Commissions	8		2,0	00.						_
9	Insurance	9									_
10	Legal and other professional fees	10									_
11	Management fees	11		1,9	80.						
12	Mortgage interest paid to banks, etc. (see instructions)	12									
13	Other interest	13		2	55.						
14	Repairs	14		2,1	50.						
15	Supplies	15		9	50.						
16	Taxes	16									
17	Utilities	17									
18	Depreciation expense or depletion	18		1,8	18.						
19	Other (list)	19									
20	Total expenses. Add lines 5 through 19	20		9,8	13.						
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If										
	result is a (loss), see instructions to find out if you must file Form 6198			-8,8	1 2						
00		21		-0,0	13.						
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	00	/	0 01	2 1	,		\/			١
23a	Total of all amounts reported on line 3 for all rental prope	22	(	8,81	23a	1	,00	0			
20a b	Total of all amounts reported on line 4 for all royalty prop				23b		, 00	<del>-</del>			
C	Total of all amounts reported on line 12 for all properties			•	23c						
d	Total of all amounts reported on line 18 for all properties				23d	1	,81	8.			
e	Total of all amounts reported on line 20 for all properties				23e		,81				
24	<b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b>		de anv los	sses				24			
25	Losses. Add royalty losses from line 21 and rental real estate		•		nter to	otal losses her		25 (	8	8,813.	
26	Total rental real estate and royalty income or (loss).										Ĺ
-	here. If Parts II, III, and IV, and line 40 on page 2 do no										
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar							26		8.813	

#### **SCHEDULE 8812** (Form 1040)

#### **Credits for Qualifying Children** and Other Dependents

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

OMB No. 1545-0074

Attachment Sequence No. 47

Your social security number

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

729-80-7532 APARNA JOSHWIN KANIGA Child Tax Credit and Credit for Other Dependents 1 Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR . 1 114,198 Enter income from Puerto Rico that you excluded . . . . . . 2a Enter the amounts from lines 45 and 50 of your Form 2555 . . . b 2b 0. c Enter the amount from line 15 of your Form 4563 . . . . 2c Add lines 2a through 2c . . . . . . . . . . . . . . . . 2d3 3 114,198. 4 Number of qualifying children under age 17 with the required social security number 5 5 2,000. 6 Number of other dependents, including any qualifying children who are not under age Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4. 7 7 8 Add lines 5 and 7 . . . . . . . . . . . . . 8 2,000. Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 9 200,000. 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 11 0. 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. **Yes.** Subtract line 11 from line 8. Enter the result. 13 Enter the amount from Credit Limit Worksheet A 13 14,244. Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents 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 additional child tax credit

BAA

Schedule 8812 (Form 1040) 2023

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 line	e 27 .	
16a	Subtract line 14 from line 12. If zero, <b>stop here</b> ; 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 \$1,600.		
	Enter the result. If zero, <b>stop here</b> ; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	
	<b>TIP:</b> 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 <b>smaller</b> 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 $\dots \dots \dots \dots \dots \dots \dots \dots \dots$	20	
	Next. On line 16b, is the amount \$4,800 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.		
David	Otherwise, go to line 21.	f D	t. Dies
	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	S OT P	uerto 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, or if you are a bona fide resident of Puerto Rico, see instructions		
		-	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 .		
23	Add lines 21 and 22	-	
24	1040 and	-	
24	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	
26	Enter the <b>larger</b> of line 20 or line 25	26	
	Next, enter the smaller of line 17 or line 26 on line 27.	-5	
Par <u>t</u>	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	

(Rev. November 2023)

Department of the Treasury Internal Revenue Service

Taxpayer name(s) shown on return

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and
Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074 For tax year 20 23 Attachment

Sequence No. 70

Taxpayer identification number

APAI	RNA JOSHWIN KANIGA	729-80-7532	2		
repare	r's name	Preparer tax identifica	tion numb	oer	
SYAN	1 PRIYA RAM SAGAR GUPTA TALLAM	P02082703			
Part	Due Diligence Requirements				
	check the appropriate box for the credit(s) and/or HOH filing status claimed on the return benefit(s) claimed (check all that apply).		the rel		arts I-V HOH
1	Did you complete the return based on information for the applicable tax year provided	by the taxpayer	Yes	No	N/A
	or reasonably obtained by you?		×		
2	If credits are claimed on the return, did you complete the applicable EIC and/or C worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Sched 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions worksheet(s) that provides the same information, and all related forms and schedules claimed?	ule 8812 (Form s, or your own	X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you rethe following.	nust do both of			
	• 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.	's responses to			
	• Review information to determine that the taxpayer is eligible to claim the credit(s) an 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 " <b>No</b> ," go to question 5.)	tent? (If "Yes,"		×	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent in	formation? .			
b	Did you contemporaneously document your inquiries? (Documentation should include 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 requirement keep a copy of your documentation referenced in question 4b, a copy of this Form 8867 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) to taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing states.	7, a copy of any o prepare Form provided by the			
	the amount(s) of the credit(s)		X		
	List those documents provided by the taxpayer, if any, that you relied on:				
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate e	aliaibility for the			
6	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	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				
	correct Schedule C (Form 1040)?				

orm 88	867 (Rev. 11-2023)			Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children 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	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		claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	×		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?	×		
Part			Part \	/)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the quatuition and related expenses for the claimed AOTC?	alified	Yes	No
Part			Part	VI.)
14	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?		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 responsin your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s status and to figure the amount(s) of the credit(s);	nses on s) and/c	the ret or HOH	urn or filing
	<ul> <li>B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checkl credit(s) claimed and HOH filing status, if claimed;</li> </ul>	ist for a	ny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 886 Document Retention.	37 instru	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	<ol><li>Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).</li></ol>	's eligib	ility for	the
	<ol><li>A record of how, when, and from whom the information used to prepare this form and the applical obtained.</li></ol>	ble work	ksheet(	s) was
	5. A record of any additional information you relied upon, including questions you asked and the taxp determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit of taxpayer's eligibility for the credit of the taxpayer's eligibility for the credit of the credit of taxpayer's eligibility for the credit of the credit of taxpayer's eligibility for the credit of ta	cayer's int(s) of	respon the cre	ses, to dit(s).
	If you have not complied with all due diligence requirements, you may have to pay a penalty for eac related to a claim of an applicable credit or HOH filing status (see instructions for more information)	h failur ).	e to co	mply
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct complete?		Yes	No

## Form **4562**

Department of the Treasury Internal Revenue Service

### **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

2023 Attachment Sequence No. 179

OMB No. 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number APARNA JOSHWIN KANIGA Sch E 202 JAYANTHI RESIDENCY 729-80-7532 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 1,160,000. 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2,890,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . . . . . . . . . . . . . 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . . . . . . . . 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 . . . . . . . . . . . . 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 . . . . . . . . . . 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 . . . . . . . . . . . . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 . . . . . . . . 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property h Residential rental 27.5 yrs. MM S/L 05/23 80,000. 1,818. 27.5 yrs. S/L property MM 39 yrs. ММ S/L i Nonresidential real S/L property MM Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs. S/L **b** 12-year 30 yrs. ММ S/L c 30-year ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 . 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 1,818. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.