Form **8879**

(Rev. January 2021)

Department of the Treasury 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.

OMB No. 1545-0074

Submission Identification Number (SID)		•	
Taxpayer's name	Social security	y number	
NAGARJUN R MARAM VENKATA	187-91-	0006	
Spouse's name	Spouse's soci	al security number	
SOWMYA S PANTA	855-97-	-1510	
Part I Tax Return Information — Tax Year Ending December 31, 2023 (E	Enter year you ar	e authorizing.))
Enter whole dollars only on lines 1 through 5.			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1 Adjusted gross income		1 164	,651.
2 Total tax		2 20	,243.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 21	,880.
4 Amount you want refunded to you		4 1	,637.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a	and keep a copy	of your retu	rn)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tro send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accour payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial insauthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terripayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved i taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amende Electronic Funds Withdrawal Consent.	ansmitter, or electro or rejection of the trathe U.S. Treasury and tindicated in the tastitution to debit the minate the authorizan requests must be not the processing of the payment. I furtil	nic return originat ansmission, (b) th di its designated x preparation sof- entry to this acco- tion. To revoke (co- received no late the electronic pather acknowledge	tor (ERO) e reason Financial tware for ount. This cancel) a er than 2 yment of that the
Taxpayer's PIN: check one box only			
▼ I authorize GLOBAL TAXES LLC to enter or gene	erate my PIN	0 0 0 6	as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	er five digits, but 't enter all zeros	ao my
I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.			
Your signature ▶ Date	· •		
Spouse's PIN: check one box only			
I authorize GLOBAL TAXES LLC to enter or gene 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 if you are entering your own PIN and your return is filed using the Practitioner PIN in the income tax return (original or amended) I is given and if you are entering your own PIN and your return is filed using the Practitioner PIN in the income tax return (original or amended) I is given and your entering your own PIN and your return is filed using the Practitioner PIN in the income tax return (original or amended) I is given and your own PIN and your return is filed using the Practitioner PIN in the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given by the income tax return (original or amended) I is given b	Ent don am now authorizir		
below.		must complete	, i dit iii
Spouse's signature ► Date			
Practitioner PIN Method Returns Only—continue be Part III Certification and Authentication — Practitioner PIN Method Only	elow		
Part III Certification and Authentication — Practitioner 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 Don't ente	5 0 8 2 7 r all zeros	1
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual inco authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provider	submitting this retu	rn in accordance	
ERO's signature ▶ Date	•		
ERO Must Retain This Form — See Instruction			

Don't Submit This Form to the IRS Unless Requested To Do So

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

1040		partment of the Treasury—Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use Or	nly—Do not	write or sta	aple in this space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ding	<u>'</u>		, 20	See se	eparate i	instructions.
Your first name	and m	niddle initial	Last nar	me						Your s	ocial sec	curity number
NAGARJUN	I R		MARA	M VEN	KATA					187	91	0006
		s first name and middle initial	Last nar		141111							security number
SOWMYA S			PANT	'Δ						855	97	1510
		er and street). If you have a P.O. box, see						Α	pt. no.			ection Campaign
215 N M								6	008	1		ou, or your
		ice. If you have a foreign address, also co	omplete sp	paces belo	ow.	Sta	ite	ZIP co		spouse	e if filing	jointly, want \$3
COPPELL		-		-		TX	ζ	750	19	-		nd. Checking a not change
Foreign country	y name		F	oreign pro	ovince/state/				n postal cod		ax or refu	•
								_				ou Spouse
Filing Status	. [Single					☐ Head of he	ouseh	old (HOH)			
-	_	Married filing jointly (even if only o	ne had ir	ncome)					(,			
Check only one box.	Ē	Married filing separately (MFS)		,			☐ Qualifying	surviv	ina spous	e (QSS)		
OHE BOX.	If v	you checked the MFS box, enter the	e name o	of vour sp	ouse. If vo	u che			• .		nild's na	me if the
		ualifying person is a child but not you			, , , ,							
Digital		ny time during 2023, did you: (a) rec	`			. ,		,	,,	` ,		V N
Assets		nange, or otherwise dispose of a dig						t)? (Se	e instructi	ons.)	Y€	es 🗵 No
Standard	_	neone can claim: U You as a de	•		•		a dependent					
Deduction	Ш.	Spouse itemizes on a separate retur	n or you	were a	dual-status	alien	1					
Age/Blindness	s You	: Were born before January 2, 1	959	Are bli	nd Sp	ouse	: Was bor	n befo	re January	, 2, 1959		s blind
Dependents	s (see	instructions):		(2) S	ocial security	<i>,</i>	(3) Relationsh	_{ip} (4	Check the	box if qua	lifies for ((see instructions):
If more	•	(1) First name Last name			number	,	to you		Child tax	credit	Credit fo	or other dependents
than four	RIY	IYANSHIKA R MARAM			-94-884	:5	Daughter					X
dependents,												
see instruction	s —											
here]											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instruct	tions) .					. 1	a	221,337.
	b	Household employee wages not re	eported (on Form	(s) W-2 .					. 1	b	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions	s)					. 1	С	
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s)) W-2 (see i	nstru	ıctions)			. 1	d	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	from For	m 2441,	line 26					. 1	е	
was withheld.	f	Employer-provided adoption bene	efits from	Form 88	339, line 29					. 1	f	
If you did not	g	Wages from Form 8919, line 6.								. 1	g	
get a Form	h	Other earned income (see instruct	ions) .							. 1	.	0.
W-2, see instructions.	i	Nontaxable combat pay election (s		uctions)			1i					
	z	Add lines 1a through 1h						· .		. 1	z	221,337.
Attach Sch. B	2a	Tax-exempt interest	2a			b T	axable interest			. 2	b	2,688.
if required.	За	Qualified dividends	3a		15.	b C	rdinary divide	nds .		. 3	b	15.
	4a	IRA distributions	4a			b T	axable amoun	t		. 4	b	
Standard Deduction for—	5a	Pensions and annuities	5a			b T	axable amoun	t		. 5	b	
Single or	6a	Social security benefits	6a			b T	axable amoun	t		. 6	b	
Married filing separately,	С	If you elect to use the lump-sum e	election n	nethod, o	check here	(see	instructions)					
\$13,850	7	Capital gain or (loss). Attach Sche	dule D if	required	I. If not req	uired	, check here				,	-441.
 Married filing jointly or 	8	Additional income from Schedule	1, line 10	0						. 8	3	-58,948.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is yo	our total in	come	e			. 9)	164,651.
\$27,700	10	Adjustments to income from Sche		•						. 1	0	
Head of household,	11	Subtract line 10 from line 9. This is			gross inco	me				. 1	1	164,651.
\$20,800	12	Standard deduction or itemized	-		_					. 1:	2	27,700.
If you checked any box under	13	Qualified business income deduct	ion from	Form 89	95 or Form	า 899	5-A			. 1	3	
Standard Deduction,	14	Add lines 12 and 13								. 1	4	27,700.
see instructions.	15	Subtract line 14 from line 11. If zer	ro or less	s, enter -	0 This is y	our t	taxable incom	e .		. 1	5	136,951.

Form 1040 (202	3)								Page	2
Tax and	16	Tax (see instructions). Check if	any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	20,743	_
Credits	17	Amount from Schedule 2, line					- 	17		_
	18	Add lines 16 and 17						18	20,743	
	19	Child tax credit or credit for ot	ther dependent	ts from Schedu	ule 8812			19	500	-
	20	Amount from Schedule 3, line	8					20		_
	21	Add lines 19 and 20						21	500	_
	22	Subtract line 21 from line 18. I	If zero or less,	enter -0				22	20,243	_
	23	Other taxes, including self-em	ployment tax,	from Schedule	2, line 21			23	0	
	24	Add lines 22 and 23. This is yo			•			24	20,243	
Payments	25	Federal income tax withheld fi							,	_
. aymome	а	Form(s) W-2				25a 2	1,880			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c .						25d	21,880	
If you have a	26	2023 estimated tax payments						26	,	_
If you have a qualifying child,	27	Earned income credit (EIC) .		•		27				_
attach Sch. EIC.	28	Additional child tax credit from			_	28				
	29	American opportunity credit fr	om Form 8863	line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line				31				
	32	Add lines 27, 28, 29, and 31.						32		
	33	Add lines 25d, 26, and 32. The						33	21,880	_
Refund	34	If line 33 is more than line 24,						34	1,637	
riciana	35a	Amount of line 34 you want re				•		35a	1,637	
Direct deposit?	b	Routing number 0 2 1				Checking	Savings			_
See instructions.		Account number 3 8 1					3-			
	36	Amount of line 34 you want ap				36				
Amount	37	Subtract line 33 from line 24.	This is the amo	ount vou owe		1				
You Owe	٠.	For details on how to pay, go			see instructions .			37		
	38	Estimated tax penalty (see ins	tructions) .			38				
Third Party Designee		you want to allow another partructions			n with the IRS?		Complete	below.	⊠ No	_
_00.g00	De	signee's		Phone			sonal iden			
	naı	ne		no.		nur	nber (PIN)			
Sign Here		der penalties of perjury, I declare tha ief, they are true, correct, and compl			, , ,		,		, ,	
11616	Yo	ur signature		Date	Your occupation		I		nt you an Identity	
						MOTNEED		itection P e inst.)	IN, enter it here	2
Joint return? See instructions.		ouse's signature. If a joint return, bo	th must sign	Date	SOFTWARE E				1 8 4 4 6	<u>3</u>
Keep a copy for your records.		ouse's signature. If a joint return, bu	ur must sign.	Date	SOFTWARE E		Ide	f the IRS sent your spouse an dentity Protection PIN, enter it here see inst.)		
	——Ph	one no. (872)235-3530		Email address	NAGARJUN.23		OM			—
			Preparer's signat		1,110,1110 014 . 2 .	Date	PTIN		Check if:	
Paid		PRIYA RAM SAGAR GUPTA TALLAM S			GUPTA TALLAM	02/14/2024		32703	Self-employed	ı
Preparer		m's name GLOBAL TAXI			COLILI IIIIIAN	1 02, 11, 2021			678)965-952	_
Use Only		m's address 245 ROONEY		NSWICK N	J 08816			n's EIN	84-317196	
Go to www irs o		a1040 for instructions and the latest			DAA	DEV 02/05/24 DDO	1		Form 1040 (20	

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

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

NAGARJUN R MARAM VENKATA & SOWMYA S PANTA

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 187-91-0006

Par	t I 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	-59,948.
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ch Schedule E .	5	
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		
I	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 from box 3 of 1099-Misc 1,000.	1 000		
_	Uther income from box 3 of 1099-Misc 1,000.	8z 1,000.		1 000
9	Total other income. Add lines 8a through 8z		9	1,000.
10	Combine lines 1 through 7 and 9. This is your additional income . Enter 1040, 1040-SB, or 1040-NB, line 8		10	-58,948.
	1040.1040-011.01.1040-ND.111180		I IU	-30,340.

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-				
	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	,	24a		_	
b	Deductible expenses related to income reported on line 8l from the				
		24b		_	
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	· · · · · · · · · · · · · · · · · · ·	24c		_	
d		24d		_	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f			
g		24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h			
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect				
	tax law violations	24i			
j	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k			
Z	Other adjustments. List type and amount:				
		24z			
25	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	here and on	26	
	·				

SCHEDULE B (Form 1040)

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR.

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

NAGARJUN R MARAM VENKATA & SOWMYA S PANTA

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

Attachment Sequence No. **08**

Your social security number 187-91-0006

OMB No. 1545-0074

Part I	1	List name of payer. If any interest is from a seller-financed mortgage and the		Amount	t		
Interest		buyer used the property as a personal residence, see the instructions and list this					
(See instructions		interest first. Also, show that buyer's social security number and address: Goldman Sachs Bank USA		2	335.		
and the		WELLS FARGO BANK N A			325.		
Instructions for Form 1040,		AMERICAN AIRLINES FCU			28.		
line 2b.)							
Note: If you received a							
Form 1099-INT,			1				
Form 1099-OID, or substitute							
statement from a brokerage firm,							
list the firm's							
name as the payer and enter							
the total interest shown on that							
form.							
	2	Add the amounts on line 1	2	2,	688.		
	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989.					
	4	Attach Form 8815	3 4	2	<u></u>		
		If line 4 is over \$1,500, you must complete Part III.	4	∠ , Amount	688. t		
Part II	5	List name of payer: Robinhood Securities LLC		7	15.		
Ordinary Dividends							
(See instructions							
and the							
Instructions for Form 1040,							
line 3b.)			5				
Note: If you							
received a Form 1099-DIV							
or substitute statement from							
a brokerage firm,							
list the firm's name as the							
payer and enter the ordinary							
dividends shown		Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6		15.		
on that form.	Note:	If line 6 is over \$1,500, you must complete Part III.					
Part III		nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary d			foreig		
Foreign	accol	ınt; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign	trust				
Accounts				Yes	s No		
and Trusts	7a	At any time during 2023, did you have a financial interest in or signature authority of					
Caution: If required, failure to	0	account (such as a bank account, securities account, or brokerage account) locate country? See instructions		a foreign	×		
file FinCEN Form		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank		Financial	+^		
114 may result in If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financia substantial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114							
penalties. Additionally, you		and its instructions for filing requirements and exceptions to those requirements .					
may be required	b	If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-					
to file Form 8938 Statement of	,	financial account(s) is (are) located:					
Specified Foreign Financial Assets.	8	During 2023, did you receive a distribution from, or were you the grantor of, or t	ranef	eror to a			
See instructions. See instructions							

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065. Go to www.irs.gov/ScheduleC for instructions and the latest information.

Attachment Sequence No. **09**

	of proprietor						security number (SSN)
	MYA S PANTA						-97-1510
Α	Principal business or profession		uding product or service (se	e instru	uctions)		er code from instructions
	NSR TECHNOLOGY LLC					5	1 9 2 0 0
С	Business name. If no separate	busin	ess name, leave blank.			D Emp	ployer ID number (EIN) (see instr.)
	NSR TECHNOLOGY LLC						
E	Business address (including si						
	City, town or post office, state						
F	Accounting method: (1)		h (2) Accrual (3) [[Other (specify)		
G	• • • • • •		•	-	2023? If "No," see instructions for li		
Н			_				
I .					(s) 1099? See instructions		
J	If "Yes," did you or will you file	requi	red Form(s) 1099?				Yes No
Part							
1					this income was reported to you on		
•					1	1	
2							
3							
4 5		,					
6					refund (see instructions)		
7			•		eiuna (see instructions)		
Part			es for business use of yo				
8	Advertising	8		18	Office expense (see instructions) .	18	
9	Car and truck expenses	_		19	Pension and profit-sharing plans .	19	
9	(see instructions)	9	12,027.	20	Rent or lease (see instructions):	10	
10	Commissions and fees .	10	12,027.	a	Vehicles, machinery, and equipment	20a	
11	Contract labor (see instructions)	11		b	Other business property		19,200.
12	Depletion	12		21	Repairs and maintenance		
13	Depreciation and section 179			22	Supplies (not included in Part III) .		
	expense deduction (not included in Part III) (see			23	Taxes and licenses		
	instructions)	13		24	Travel and meals:		
14	Employee benefit programs			а	Travel	24a	
	(other than on line 19) .	14		b	Deductible meals (see instructions)	24b	4,327.
15	Insurance (other than health)	15		25	Utilities	25	2,238.
16	Interest (see instructions):			26	Wages (less employment credits)	26	
а	Mortgage (paid to banks, etc.)	16a		27a	Other expenses (from line 48)	27a	22,156.
b	Other	16b		b	Energy efficient commercial bldgs		
17	Legal and professional services	17			deduction (attach Form 7205)	27b	
28	Total expenses before expen	ses fo	r business use of home. Add	l lines 8	3 through 27b	28	59,948.
29	Tentative profit or (loss). Subti	act lin	e 28 from line 7			29	-59,948.
30	•	-	-	e expe	nses elsewhere. Attach Form 8829		
	unless using the simplified me						
	Simplified method filers only			(a) you			
	and (b) the part of your home				. Use the Simplified		
04			-	ter on I	ine 30	30	
31	Net profit or (loss). Subtract)		
	 If a profit, enter on both Sch checked the box on line 1, see 	e instru	• • • • • • • • • • • • • • • • • • • •			31	-59,948.
	• If a loss, you must go to line				J		
32	If you have a loss, check the b	ox tha	at describes your investment	in this	activity. See instructions.		
	• If you checked 32a, enter th		•				∇
	SE, line 2. (If you checked the	box or	line 1, see the line 31 instruc	tions.)	Estates and trusts, enter on		All investment is at risk.
	Form 1041, line 3.	_1 -11	ala Farras 0400 V		J	32b	Some investment is not at risk.
	 If you checked 32b, you mu 	st ama	CH FORM 0 198. YOUR IOSS MA	ay de lii	nnea.		at Hor.

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

Part	Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (att	ach ex	planation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor if "Yes," attach explanation	ory?	. Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
40	Ocal of condensate of the China of Free 44 for or Free 40. February and the Free 4	40		
42 Part	 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 Information on Your Vehicle. Complete this part only if you are claiming car or are not required to file Form 4562 for this business. See the instructions for line Form 4562. 			
	See Addition	al Ve	hicle Infor	mation
43	When did you place your vehicle in service for business purposes? (month/day/year)			
44	Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your	vehicle	e for:	
а	Business b Commuting (see instructions) c	Other		
45	Was your vehicle available for personal use during off-duty hours?		Yes	☐ No
46	Do you (or your spouse) have another vehicle available for personal use?		Tes	☐ No
47a	Do you have evidence to support your deduction?		Tes	☐ No
b	If "Yes," is the evidence written?		Tes	☐ No
Part	V Other Expenses. List below business expenses not included on lines 8–26, line	27b,	or line 30.	
BA	CK END OFFICE EXPENSES			22,156.
48	Total other expenses. Enter here and on line 27a	48		22,156.

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

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

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Go to www.irs.gov/ScheduleD for instructions and the latest information. Internal Revenue Service Name(s) shown on return Your social security number 187-91-0006 NAGARJUN R MARAM VENKATA & SOWMYA S PANTA Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) Form(s) 8949, Part I, combine the result (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 10,292. 9,856. 436. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 436. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with 7,060. 89. 6,308. -663. Totals for all transactions reported on Form(s) 8949 with Box E checked 105. 319. -214. 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

-877

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -441. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . . . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 441.) 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074 Attachment

Sequence No. 12A

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

NAGARJUN R MARAM VENKATA & SOWMYA S PANTA

Social security number or taxpayer identification number

187-91-0006

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

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

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

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

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

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

(C) Short-term transactions	not reported	I to you on F	orm 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	See the separate instructions.		(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)		and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/23	12/31/23	10,292.	9,856.			436.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked) or line 2 (if Box A)	al here and inc e is checked), lir	lude on your ne 2 (if Box B	10 202	0 856			136

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

Form 8949 (2023) Attachment Sequence No. 12A

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side NAGARJUN R MARAM VENKATA & SOWMYA S PANTA

Social security number or taxpayer identification number 187-91-0006

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

Part II

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

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

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

✗ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on	Form(s) 1099)-B showing bas	•		•)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/22	12/31/23	6,308.	7,060.	W	89.	-663.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 8b (if Box D above	al here and inc	lude on your					

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

above is checked), or line 10 (if Box F above is checked) .

6,308.

7,060.

Form 8949 (2023) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side NAGARJUN R MARAM VENKATA & SOWMYA S PANTA

Social security number or taxpayer identification number 187-91-0006

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

Part II

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

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

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

	(D)	Long-term transactions reported on Form(s)	1099-B showing basis was reported to the IRS (see Note above)
×	(E)	Long-term transactions reported on Form(s)	1099-B showing basis wasn't reported to the IRS

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

(F) Long-term transactions	not reported	to you on Fc	JIII 1099-D				
(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds	(e) Cost or other basis See the Note below	See the separate instructions.		(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Crypto LLC	01/01/22	12/31/23	105.	319.			-214.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D	I here and inc is checked), lir	lude on your ne 9 (if Box E	105.	319.			-214.

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

SCHEDULE 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**

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Your social security number NAGARJUN R MARAM VENKATA & SOWMYA S PANTA 187-91-0006

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	164,651.
2a	Enter income from Puerto Rico that you excluded		
b	Enter the amounts from lines 45 and 50 of your Form 2555		
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	164,651.
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. resident		
	alien. Also, do not include anyone you included on line 4.		
7	Multiply line 6 by \$500	7	500.
8	Add lines 5 and 7	8	500.
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	500.
	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	20,743.
14	Enter the smaller of line 12 or line 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.		500.
	If the amount on line 12 is more than the amount on line 14, you may be able to take the additional cl	hild ts	x credit
	on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR thr		
	5 1 1 5 10, 10 10 10 10 10 10 10 10 10 10 10 10 10	0.0011	

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	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 \$1,600.		
	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	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.		
	Otherwise, go to line 21.		
Part	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	s of F	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		
22	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22	-	
23	Add lines 21 and 22	-	
24	1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27,		
	and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
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	
20	Next, enter the smaller of line 17 or line 26 on line 27.	20	
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	
	, , , , , , , , , , , , , , , , , , , ,		

(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

NAG	ARJUN R MARAM VENKATA & SOWMYA S PANTA	187-91-000	б		
repare	r's name	Preparer tax identifica	ation numl	oer	
SYAI	M PRIYA RAM SAGAR GUPTA TALLAM	P02082703			
Part					
	e check the appropriate box for the credit(s) and/or HOH filing status claimed on the retubenefit(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 to reasonably obtained by you?	by the taxpayer	Yes	No	N/A
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 nathe following.				
	• Interview the taxpayer, ask questions, and contemporaneously document the taxpayer determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.	•			
	• 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)		×		
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 inconsis answer questions 4a and 4b. If "No," go to question 5.)	tent? (If "Yes,"		×	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent inf	ormation? .			
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 questions the impact the			
5	Did you satisfy the record retention requirement? To meet the record retention requirer 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) processes that you relied on to determine eligibility for the credit(s) and/or HOH filing starting the record retention requirements.	ment, you must ', a copy of any o prepare Form provided by the			
	the amount(s) of the credit(s)	_	×		
	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 ecredit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return is selected for audit?	eturn if his/her	X		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous (If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)			X	
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 8	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		Yes	No	N/A
	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.)			
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?			
_	has supported the child the entire year?			
C	more than one person (tiebreaker rules)?			
Part	1 (claim C	TC, A	CTC.
	or ODC, go to Part IV.)		•	,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is	Yes	No	N/A
	a citizen, national, or resident of the United States?	×		
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 qu		Yes	No
	tuition and related expenses for the claimed AOTC?			П
Part	Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing statu	s, go to	D Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax	x year	Yes	No
	and provided more than half of the cost of keeping up a home for the year for a qualifying person?			
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 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 s) and/c	the ref or HOH	turn or filing
	 B. Complete this Form 8867 truthfully and accurately and complete the actions described in this check credit(s) claimed and HOH filing status, if claimed; 	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 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 credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).	"s eligib	ility for	the
	A record of how, when, and from whom the information used to prepare this form and the applica obtained.	ble worl	ksheet(s) was
	A record of any additional information you relied upon, including questions you asked and the tax determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount	payer's unt(s) of	respon the cre	ses, to edit(s).
	If you have not complied with all due diligence requirements, you may have to pay a penalty for each 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	t. and	Yes	No
	complete?		×	

Additional Information From 2023 Federal Tax Return

Schedule C (NSR TECHNOLOGY LLC): Profit or Loss from Business Line 20b

Itemization Statement

Description	Amount
RENT(\$1600P.M*12M)	19,200.
 Total	19,200.

Schedule C (NSR TECHNOLOGY LLC): Profit or Loss from Business

Line 25 Itemization Statement

Description	Amount
INTERNET	872.
CELLPHONE	654.
ELECTRICITY BILL	712.
Total	2,238.

Schedule C (NSR TECHNOLOGY LLC): Profit or Loss from Business

Additional Vehicle Info

Continuation Statement

Date Placed in Service	Business Miles	Commuting Miles	Other Miles	Available for Off Duty Hours?	Other Vehicle Available?	Evidence to Support Dedn?
09/28/2021	9,621	1,011	6,735	Yes	Yes	No
08/18/2023	8,741	1,658	3,489	Yes	Yes	No