## 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	number /	
SABARISH SATISH KRISHNAPILLAI	675-40-	8100	
Spouse's name	Spouse's soci	al security number	er
SUPRIYA SUBBIAH	667-42-	-0395	
Part I Tax Return Information — Tax Year Ending December 31, 2023 (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.			
<b>1</b> Adjusted gross income			5 <b>,</b> 725.
2 Total tax		2	9,698.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3,048.
4 Amount you want refunded to you			3 <b>,</b> 350.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a copy	of your retu	urn)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indic payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requipusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment of the payment information necessary to answer inquiries and resolve issues related to the payment indication number (PIN) below is my signature for the income tax return (original or amended) I an Electronic Funds Withdrawal Consent.	tter, or electro ction of the tra S. Treasury ar cated in the ta n to debit the the authoriza ests must be processing of ayment. I furth	nic return original ansmission, (b) to dissense designated a pentry to this acceptant. To revoke received no late the electronic per acknowledge.	ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the
Taxpayer's PIN: check one box only			
I authorize GLOBAL TAXES LLC to enter or generate n  ERO firm name  signature on the income tax return (original or amended) I am now authorizing.	Ento	8 1 0 0 er five digits, but 't enter all zeros	as my
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methodelow.			
Your signature ▶ Date ▶			
Spouse's PIN: check one box only			ı
I authorize GLOBAL TAXES LLC to enter or generate no signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I am now if you are entering your own PIN and your return is filed using the Practitioner PIN method below.	Ento don ow authorizin		
Spouse's signature ▶ Date ▶			
Practitioner PIN Method Returns Only—continue below			
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 4 9 6  Don't ente		7 1
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income ta: authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submi requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of Inc.	tting this retu	n in accordanc	
ERO's signature ▶ Date ▶			
ERO Must Retain This Form — See Instructions			

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

# 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. 31, 2023, or other tax year beginning					, 2023, ending , 20						See separate instructions.			
Your first name	and m	iddle initial			Last na	Last name						Your social security number		
SABARISH					SAT	SATISH KRISHNAPILLAI						675   40   8100		
If joint return, sp		s first name and	middle	initial		Last name								ecurity number
SUPRIYA					SUBI	BIAH						667	42 0	1395
Home address (	numbe	er and street). If	you hav	e a P.O. box, s	_					Apt. no.				tion Campaign
7220 MAR	GATI	Е СТ	•										here if you	
City, town, or po			a foreign	address, also	complete	spaces below.	Sta	ate	ZIP	code				intly, want \$3
CUMMING		-	_		·	GA 300						o this fund. Iow will no	. Checking a	
Foreign country	name					Foreign province/state				gn postal	code		x or refund	
										-			You	_
Filing Status		Single						☐ Head of h	ousel	nold (HO	)H)			
•	×	, ,	iointly	(even if only	one had	income)		_			,			
Check only one box.		Married filing jointly (even if only one had income)  Married filing separately (MFS)  Qualifying surviving spouse (QSS)												
one box.	If \	rou checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's i									ild's name	e if the		
	-	alifying persor				ndont:								
Digital						a reward, award, o			-				_	<b>▽</b> N -
Assets	•					et (or a financial inte			et)? (S	ee instri	uction	is.)	∐ Yes	⊠ No
Standard		eone can cla		You as a	•			•						
Deduction	<u> </u>	Spouse itemize	es on a	separate ret	turn or yo	u were a dual-status	s alier	n						
Age/Blindness	You	: Were bo	rn befo	re January 2	, 1959	Are blind Sp	ouse	e: Was bor	rn bef	ore Janu	uary 2	, 1959	☐ Is b	olind
Dependents	(see	instructions):		-		(2) Social securi	tv	(3) Relationsh	nin (	4) Check	the bo	x if qual	lifies for (se	e instructions):
If more		irst name	La	st name		number	-,	to you		Child	tax cre	edit	Credit for o	other dependents
than four	SII	DDHARTH	SAB	ARISH		067-29-28	93	Son			X			
dependents,	SHF	REYA	SAB	ARISH		588-56-74		Daughter	:		X			
see instructions and check														
here														
Income	1a	Total amoun	t from	Form(s) W-2,	, box 1 (se	ee instructions) .						1a	a 1	75,431.
	b	Household e	employ	ee wages no	t reported	on Form(s) W-2.						1k	<b>5</b>	
Attach Form(s) W-2 here. Also	С	Tip income r	not rep	orted on line	1a (see ir	nstructions)						10	>	
attach Forms	d	Medicaid wa	aiver pa	yments not r	eported o	on Form(s) W-2 (see	instr	uctions)				10	t	
W-2G and 1099-R if tax	е	Taxable dep	endent	care benefit	s from Fo	orm 2441, line 26						16	<b>3</b>	
was withheld.	f	Employer-pr	ovided	adoption be	nefits fro	m Form 8839, line 2	9.					11	f	
If you did not	g											10	3	
get a Form W-2, see	h	Other earned	d incon	ne (see instru	ctions)							1h	1	0.
instructions.	i	Nontaxable (	comba	t pay electior	n (see ins	tructions)		1i	i					
	z	Add lines 1a	throug	jh 1h					· .			12	<b>z</b> 1	75,431.
Attach Sch. B	2a	Tax-exempt	interes	st	2a		b 7	Taxable interest	t.			2k	2	
if required.	3a	Qualified div	idends		3a	28.	b (	Ordinary divide	nds .			3b	5	31.
	4a	IRA distribut	ions .		4a		b 7	Taxable amoun	t			4k	2	
Standard Deduction for—	5a	Pensions and	d annu	ities	5a		b 7	Taxable amoun	t			5k	2	
Single or	6a	Social secur	ity ben	efits	6a		b 7	Taxable amoun	t			6k	2	
Married filing separately,	С	If you elect to	o use t	he lump-sum	election	method, check here	e (see	instructions)			. [			
\$13,850	7	Capital gain	or (loss	s). Attach Scl	hedule D	if required. If not red	quirec	d, check here			. 🗆	7		
Married filing jointly or	8					10						8		-8,737.
Qualifying surviving spouse,	9	Add lines 1z	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>									9		66,725.
\$27,700	10	Adjustments				•						10		
Head of household,	11	•	Subtract line 10 from line 9. This is your <b>adjusted gross income</b>								11	1	66,725.	
\$20,800	12				•	tions (from Schedul						12		27,700.
If you checked any box under	13					n Form 8995 or Fori		95-A				13		0.
Standard Deduction,	14	Add lines 12										14	1	27,700.
see instructions.	15				zero or les	ss. enter -0 This is	vour	taxable incom	ne.			15		39,025.

Form 1040 (202)	3)								Page Z		
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	21,198.		
Credits	17	Amount from Schedule 2, lin	e3					17			
	18	Add lines 16 and 17						18	21,198.		
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	4,000.		
	20	Amount from Schedule 3, lin	e8					20	7,500.		
	21	Add lines 19 and 20						21	11,500.		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	9,698.		
	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 <b>total tax</b>					24	9,698.		
<b>Payments</b>	25	Federal income tax withheld	from:								
	а	Form(s) W-2				<b>25a</b> 13	3,043				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c	5				
	d	Add lines 25a through 25c						25d	13,048.		
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20	22 return			26			
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27					
allacii Scii. Eic.	28	Additional child tax credit from	n Schedule 8812			28					
	29	American opportunity credit	from Form 8863	3, line 8		29					
	30	Reserved for future use .									
	31	Amount from Schedule 3, lin	Amount from Schedule 3, line 15								
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32			
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	13,048.		
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amour	t you <b>overpaid</b>		34	3,350.		
	35a	Amount of line 34 you want			is attached, chec	k here	🗆	35a	3,350.		
Direct deposit?	b	Routing number 0 6 1	3								
See instructions.	d	Account number 3 3 4									
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36					
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37			
	38	Estimated tax penalty (see in	nstructions) .			38					
Third Party	Do	you want to allow another				See					
Designee		structions				. 🗌 Yes. C	omplete	e below.	<b>⋉</b> No		
		signee's		Phone				ntification			
		me		no.			ber (PIN)				
Sign		der penalties of perjury, I declare the lief, they are true, correct, and com									
Here	Vo	ur signature		Date	Your occupation		l ıf t	ha IRS sa	nt you an Identity		
	10	ui signature		Date	Tour occupation				PIN, enter it here		
Joint return?					PROGRAM MA	NAGER	(se	e inst.)			
See instructions.		ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupation	on			nt your spouse an		
Keep a copy for your records.		_			HOME MAKER			entity Prote e inst.)	ection PIN, enter it here		
		one no. (404) 538-282	5	Email address	SABARISH S	K@YAHOO.CO	JM	•			
		eparer's name	Preparer's signat		משחשונוטוו ס	Date	PTIN		Check if:		
Paid		M PRIYA RAM SAGAR GUPTA	' "		SAR GUPTA		82703	Self-employed			
Preparer		m's name GLOBAL TA		1 1/171 DA	WIN OOLIA						
Use Only			Y CT E BRU	MSMTCK M	т 08816		Phone no. (678) 965-9522 Firm's EIN 84-3171965				
	FII	III 3 AUUIESS ZEJ ROONE	III 9 EIIN	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

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

SABARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH

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

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

Sequence No. 01

Your social security number
675-40-8100

Par	t 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. Atta	ich Schedule E .	5	-8,737.
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		
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 (	2	
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:			
_	Tatal atherina and Adallina a Cathuravah Ca	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> . Enter 1040, 1040-SB, or 1040-NB, line 8		10	-8,737.
	1070.1070 <sup>-</sup> 011.011070 <sup>-</sup> 1111.11160		10	. U.IJI.

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	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)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d		_	
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e		_	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h		-	
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect tax law violations	04:			
		24i		-	
j	Housing deduction from Form 2555	24j		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	041-			
_	1041)	24k			
Z	Other adjustments. List type and amount:	24z			
25				25	
25 26	Total other adjustments. Add lines 24a through 24z			25	_
20	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> Form 1040, 1040-SR, or 1040-NR, line 10	. ⊏nter	nere and on	26	
					le 1 (Form 1040) 2023
	BAA	KEV 03/0	07/24 PRO	JUNEUU	ie i (Fulli 1040) 2023

### SCHEDULE 2 (Form 1040)

16

Department of the Treasury Internal Revenue Service

### **Additional Taxes**

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

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

OMB No. 1545-0074

2023

Attachment
Sequence No. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SABARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH 675-40-8100 Part I Tax 1 Alternative minimum tax. Attach Form 6251 . . . . . . 1 0. 2 2 Excess advance premium tax credit repayment. Attach Form 8962 . . . . . . . . . 3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17... 3 0. Part II **Other Taxes** 4 Self-employment tax. Attach Schedule SE . . . . . . . . 4 5 Social security and Medicare tax on unreported tip income. 5 Attach Form 4137 Uncollected social security and Medicare tax on wages. Attach 6 6 7 Total additional social security and Medicare tax. Add lines 5 and 6 . . . 7 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. 8 8 9 Household employment taxes. Attach Schedule H . . . . . . . . . . . . . . . . . . 9 Repayment of first-time homebuyer credit. Attach Form 5405 if required . . . . . 10 10 11 11 12 Net investment income tax. Attach Form 8960 . . . . . . . . . . . . . 12 13 Uncollected social security and Medicare or RRTA tax on tips or group-term life 13 Interest on tax due on installment income from the sale of certain residential lots 14 14 Interest on the deferred tax on gain from certain installment sales with a sales price 15 15

Recapture of low-income housing credit. Attach Form 8611 . . . . . . . . . . . .

(continued on page 2)

Schedule 2 (Form 1040) 2023

16

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

### Part II Other Taxes (continued)

7	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount:			
		17a		
b	Recapture of federal mortgage subsidy, if you sold your home	4-1		
	see instructions	17b	-	
	Additional tax on HSA distributions. Attach Form 8889	17c	-	
a	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
е	Additional tax on Archer MSA distributions. Attach Form 8853 .	17e		
	Additional tax on Medicare Advantage MSA distributions. Attach			
	Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a			
	fractional interest in tangible personal property	17g	_	
n	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred			
	compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
I	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated	47		
-	corporation	17m	-	
"	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
o	Tax on non-effectively connected income for any part of the			
	year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions	47		
	from, and dispositions of, stock of a section 1291 fund	17p	-	
<b>q</b>	Any interest from Form 8621, line 24	17q	-	
Z	Any other taxes. List type and amount:	17-		
8	Total additional taxes. Add lines 17a through 17z	17z	18	
9	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20	19	
20 21	Add lines 4, 7 through 16, and 18. These are your <b>total other taxe</b>	L		
-	on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21	

# SCHEDULE 3 (Form 1040)

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

SABARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH

Additional Credits and Payments

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

OMB No. 1545-0074

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.

our soc	ial security number
	Attachment Sequence No. <b>03</b>

675-40-8100

Par	t Nonrefundable Credits				
1	Foreign tax credit. Attach Form 1116 if required			1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441	, line	e 11. Attach	2	
3	Education credits from Form 8863, line 19			3	
4	Retirement savings contributions credit. Attach Form 8880			4	
5a	Residential clean energy credit from Form 5695, line 15	5a			
b	Energy efficient home improvement credit from Form 5695, line 32	5b			
6	Other nonrefundable credits:				
а	General business credit. Attach Form 3800	6a	0.		
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	Reserved for future use	6e			
f	Clean vehicle credit. Attach Form 8936	6f	7,500.		
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			
ı	Amount on Form 8978, line 14. See instructions	<b>6</b> l			
m	Credit for previously owned clean vehicles. Attach Form 8936 .	6m			
z	Other nonrefundable credits. List type and amount:				
		6z			
7	Total other nonrefundable credits. Add lines 6a through 6z			7	7 <b>,</b> 500.
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10	040,	1040-SR, or		
	1040-NR, line 20			8	7,500.
			(C	ontinu	ed on page 2)

Schedule 3 (Form 1040) 2023 Page **2** 

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 repayment of amounts included in income from earlier years	13b		
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c		
d	Deferred amount of net 965 tax liability (see instructions)	13d		
Z	Other payments or refundable credits. List type and amount:	13z		
14	Total other payments or refundable credits. Add lines 13a through	n 13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	

#### **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

SABA	ARISH SATISH KRISHNAPILLAI & SUPRIYA SUB	BBIA	Η				675-40	0-8100		
Part	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use	yalties Schedule	<b>C</b> . See	instruc	ctions. If you ar	e an indiv	vidual, rep	ort farm	
	Did you make any payments in 2023 that would require you									
В	f "Yes," did you or will you file required Form(s) 1099? .							Ye	s 🗌 No	
1a	Physical address of each property (street, city, state, ZIF	P code	e)							
Α	1/8, 7TH CROSS STREET WEST SHENOYNAGAF	R CHE	ENNAI I	N 600	0030					
В	#1,Flt B304 Madha Koil ST Nerkundran	CHEN	NAI IN	1 6001	L07					
С										
1b	Type of Property (from list below)  2 For each rental real estate properabove, report the number of fair	rental	and				onal Use Days QJ			
Α	personal use days. Check the Q			Α		365		0		
В	if you meet the requirements to f			В		365		0		
С	quained joint venture. See institu	ictions		С						
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	ital	5 Land 6 Roya			Self-Rental Other (descri				
				•		Propertie	es:			
Incon				<b>A</b> 2,5		B	FF0		С	
3	Rents received	3		Z, 5.	50.	۷,	,550.			_
4 Expei	Royalties received	4								
⊏xpei 5		5								
6	Advertising	6								_
7	Cleaning and maintenance	7		2,6	4.0					_
8	Commissions	8		2,0	40.					
9	Insurance	9								
10	Legal and other professional fees	10								_
11	Management fees	11								_
12	Mortgage interest paid to banks, etc. (see instructions)	12				1	,961.			_
13	Other interest	13					, 501.			
14	Repairs	14		3,1	4 0	1	,750.			_
15	Supplies	15		- J / I	10.	<u> </u>	, , , , , ,			_
16	Taxes	16								_
17	Utilities	17		1,3	40.					
18	Depreciation expense or depletion	18		•		3	,006.			
19	Other (list)	19				,	,			
20	Total expenses. Add lines 5 through 19	20		7,1	20.	6	,717.			_
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 <b>Form 6198</b>	01		-4,5			<b>,</b> 167.			
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	21	(	4,57			167.)	(		
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		,100.			
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b					
С	Total of all amounts reported on line 12 for all properties				23c		,961.			
d	Total of all amounts reported on line 18 for all properties				23d	3	,006.			
е	Total of all amounts reported on line 20 for all properties				23e	13	,837.			
24	Income. Add positive amounts shown on line 21. Do not	<b>t</b> includ	de any los	sses			. 24			
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lin	e 22. Er	nter to	tal losses here	25	(	8,737.	)
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this at						n     -   <b>26</b>		-8 <b>,</b> 737	7.

#### **General Business Credit**

Go to www.irs.gov/Form3800 for instructions and the latest information. You must include all pages of Form 3800 with your return.

OMB No. 1545-0895 Attachment Sequence No. 22

Department of the Treasury Internal Revenue Service Name(s) shown on return Identifying number 675-40-8100 SABARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH Corporate Alternative Minimum Tax (CAMT) and Base Erosion Anti-Abuse Tax (BEAT). Are you both (a) an "applicable corporation" within the meaning of section 59(k)(1) for the CAMT, and (b) an "applicable taxpayer" within the meaning of Part I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT) Go to Part III before Parts I and II. See instructions. Non-passive credits from Part III, line 2: combine column (e) with non-passive amounts from column 1 135. Passive credits from Part III, line 2: combine column (f) with passive amounts 2 3 Enter the applicable passive activity credits allowed for 2023. See instructions . . . 3 4 Carryforward of general business credit to 2023. See instructions for statement to attach 4 Check this box if the carryforward was changed or revised from the original reported amount . 5 6 Add lines 1, 3, 4, and 5 . . . . . . . . . <u>. . .</u> . . . . . 6 135. **Allowable Credit** Part II Regular tax before credits: • Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, line 16; and Schedule 2 (Form 1040), line 2. • Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 1; or the applicable line of your return. 7 21,198. • Estates and trusts. Enter the sum of the amounts from Form 1041. Schedule G, lines 1a and 1b, plus any Form 8978 amount included on line 1d; or the amount from the applicable line of your return. Alternative minimum tax: • Individuals. Enter the amount from Form 6251, line 11. • Corporations. Enter the amount from Form 4626, Part II, line 13. 8 0. • Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54. Add lines 7 and 8 . 9 9 21,198. Foreign tax credit . . . . . . . . 10a 10a Certain allowable credits (see instructions) . 10b 500 Add lines 10a and 10b 10c 11,500. Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16 11 11 9,698. 12 Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-. . . 12 9,698. Enter 25% (0.25) of the excess, if any, of line 12 (line 11 for corporations) over 13 \$25,000. See instructions 13 0. 14 Tentative minimum tax: • Individuals. Enter the amount from Form 6251, line 9. • Corporations. Enter -0-. 10,455. • Estates and trusts. Enter the amount from Schedule I (Form 1041), line 52. 15 Enter the greater of line 13 or line 14 . . . 15 10,455. Subtract line 15 from line 11. If zero or less, enter -0-16 16 0. Enter the **smaller** of line 6 or line 16 . . . . . . . . . . . . . . 17 0. 17 C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or

reorganization.

Part	Il Allowable Credit (continued)		•
Note:	If you are not required to report any amounts on line 22 or line 24 below, skip lines 18 through 25 and en	ter -0- c	on line 26.
18	Multiply line 14 by 75% (0.75). See instructions	18	
19	Enter the greater of line 13 or line 18	19	
20	Subtract line 19 from line 11. If zero or less, enter -0	20	
21	Subtract line 17 from line 20. If zero or less, enter -0	21	
22	Combine the amounts from line 3 of Part III, column (e), with the sum of the non-passive activity credit amounts in Part IV, line 3, column (e) plus column (f)	22	
23	Passive activity credit from line 3 of Part III, column (f) plus the sum of the passive activity credit amounts in Part IV, line 3, column (e) plus column (f) .	_	
24	Enter the applicable passive activity credit allowed for 2023. See instructions	24	
25	Add lines 22 and 24	25	
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0.
27	Subtract line 13 from line 11. If zero or less, enter -0	27	9,698.
28	Add lines 17 and 26	28	0.
29	Subtract line 28 from line 27. If zero or less, enter -0	29	9,698.
30	Enter the general business credit from line 5 of Part III: combine column (e) with non-passive amounts in column (g). See instructions	30	
31	Reserved	31	
32	Passive activity credits from line 5 of Part III: combine column (f) with passive amounts in column (g). See instructions		
33	Enter the applicable passive activity credits allowed for 2023. See instructions	33	
34	Carryforward of business credit to 2023. Enter the amount from line 5 of Part IV, column (f), and line 6 of Part IV, column (g). See instructions for statement to attach	34	
35	Carryback of business credit from 2024. Enter the amount from line 5 of Part IV, column (e). See instructions	35	
36	Add lines 30, 33, 34, and 35	36	
37	Enter the <b>smaller</b> of line 29 or line 36	37	0.
38	Credit allowed for the current year. Add lines 28 and 37.  Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36; see instructions) as indicated below or on the applicable line of your return.  • Individuals. Schedule 3 (Form 1040), line 6a.		
	Corporations. Form 1040, line 6a.      Corporations. Form 1120, Schedule J, Part I, line 5c.      Estates and trusts. Form 1041. Schedule G. line 2b.	38	0.

Part III Current Year General Business Credits (GBCs) (see instructions). If there is more than one credit amount to report on lines 1a through 1zz, line 3, or lines 4a through 4z, enter the number of items you have for that line in column (c) and complete Part V.

	(a) Current year credits from:	(b) Elective payment or transfer registration number	(d) Pass-through or transfer	(e) Credits from non-passive activities	(f) Credits from passive activities	(g) Credit transfer election amount (enter amounts transferred out as a negative amount)	(h) Gross elective payment election amount	(i) Net elective payment election amount	(j) Combine columns (e), (f), and (g), less column (i)
1a	Form 3468, Part II								
b	Form 7207								
С	Form 6765								
d	Form 3468, Part III								
е	Form 8826								
f	Form 8835, Part II								
g	Form 7210								
h	Form 8820								
i	Form 8874								
j	Form 8881, Part I								
k	Form 8882								
- 1	Form 8864 (diesel)								
m	Form 8896								
n	Form 8906								
0	Form 3468, Part IV								
р	Form 8908								
q	Reserved (45Z)								
r	Form 8910								
s	Form 8911, Part II			135.					135.
t	Form 8830								
u	Form 7213, Part II								
v	Form 3468, Part V								
w	Form 8932								
X	Form 8933								
У	Form 8936, Part II								
z	Reserved								
aa	Form 8936, Part V								
bb	Form 8904								
CC	Form 7213, Part I								
dd	Form 8881, Part II								
ee	Form 8881, Part III								
ff	Form 8864, line 8								
gg	Reserved (1gg)								
hh	Reserved (1hh)								
ii	Reserved (1ii)								
jj	Reserved (1jj)								
	Other credits								
	Add lines 1a through 1zz			135.					135.
									Farm 3900 (2022)

Form 3800 (2023) Page **4** 

Part III Current Year General Business Credits (GBCs) (see instructions). If there is more than one credit amount to report on lines 1a through 1zz, line 3, or lines 4a through 4z, enter the number of items you have for that line in column (c) and complete Part V. (continued)

	lines 4a through 42, enter the number of items you have for that line in column (c) and complete Part v. (continued)									
	(a) Current year credits from:	(b) Elective payment or transfer registration number	#	(d) Pass-through or transfer credit entity EIN	(e) Credits from non-passive activities	(f) Credits from passive activities	(g) Credit transfer election amount (enter amounts transferred out as a negative amount)	(h) Gross elective payment election amount	(i) Net elective payment election amount	(j) Combine columns (e), (f), and (g), less column (i)
3	Form 8844									
4	Specified credits:	•				•			•	
а	Form 3468, Part VI									
b	Form 5884									
С	Form 6478									
	Form 8586									
е	Form 8835, Part II									
f	Form 8846									
g	Form 8900									
h	Form 8941									
i	Form 6765 ESB credit									
j	Form 8994									
k	Form 3468, Part VII									
I	Reserved (4I)									
m	Reserved (4m)									
Z	Other specified credits									
5	Add lines 4a through 4z									
6	Add lines 2, 3, and 5				135.					135.

Form **3800** (2023)

### Part IV Carryovers of General Business Credits (GBCs) or Eligible Small Business Credits (ESBCs)

	ructio	

	(see instructions)						
	(a) Credits carried over to tax year 2023	(b) Check if non- passive	(c) Year	(d) Pass-through entity EIN	(e) Credit carrybacks to current year	(f) Carryforwards (excluding ESBCs)	(g) Eligible small business credit (ESBC) carryforwards
1a	Form 3468, Part II (coal, gasification)						
b	Form 7207 (manufacturing production)						
С	Form 6765 (research)						
d	Form 3468, Part III (advanced energy)						
е	Form 8826 (disabled access)						
f	Form 8835, Part II (renewable electricity)						
g	Form 7210 (clean hydrogen)						
h	Form 8820 (orphan drug)						
i	Form 8874 (new markets)						
i	Form 8881, Part I (pension plan startup)						
k	Form 8882 (employer-provided childcare)						
- 1	Form 8864 (biodiesel and renewable diesel)						
m	Form 8896 (low sulfur diesel fuel)						
n	Form 8906 (distilled spirits)						
o	Form 3468, Part IV (advanced manufacturing)						
р	Form 8908 (energy-efficient home)						
a a	Reserved						
r	Form 8910 (alternative motor vehicle)						
s	Form 8911, Part II (alternative fuel refueling)						
t	Form 8830 (enhanced oil recovery)						
u	Form 7213, Part II (zero-emission nuclear production) .						
v	Form 3468, Part V (reserved)						
w	Form 8932 (differential wage)						
x	Form 8933 (carbon oxide sequestration)						
	Form 8936, Part II (clean vehicle)						
_	Reserved						
	Form 8936, Part V (commercial clean vehicle)						
	Form 8904 (oil and gas production)						
	Form 7213, Part I (advanced nuclear production)						
	Form 8881, Part II (pension auto enrollment)						
	Form 8881, Part III (military spouse)						
	Form 8864 (sustainable aviation fuel mixture)						
	Reserved						
	Reserved						
	Reserved						
	Reserved						
	Other						
2	Credits for which only carryforwards are allowed:						
– a	Form 5884-A (employee retention)						
b	Form 8586 (low-income housing) (pre-2008)						
c	Form 8845 (Indian employment)						
d	Form 8907 (nonconventional source fuel)						
e	Form 8909 (energy efficient appliance)						
f	Form 8923 (mine rescue team training)						
g	Form 8834 (qualified plug-in electric vehicle)						
9 h	Form 8931 (agricultural chemicals security)						
ï	Form 1065-B (GBCs from electing partnership)						
÷	Form 5884 (work opportunity) (pre-2007)						
ј k	Form 6478 (alcohol fuel) (pre-2005)						
ı	Form 8846 (employer taxes) (pre-2007)						
<u> </u>						F	form <b>3800</b> (2023)

## Part IV Carryovers of General Business Credits (GBCs) or Eligible Small Business Credits (ESBCs)

(see instructions) (continued)

	(a) Credits carried over to tax year 2023	(b) Check if non- passive	(c) Year	(d) Pass-through entity EIN	(e) Credit carrybacks to current year	(f) Carryforwards (excluding ESBCs)	(g) Eligible small business credit (ESBC) carryforwards
m	Form 8900 (railroad track maintenance) (pre-2008)						-
n	Trans-Alaska pipeline liability fund credit						
	Form 5884-A, Section A (employers affected by Hurricane Katrina, Rita, or Wilma)						
n	Form 5884-A, Section B (Hurricane Katrina housing) .						
	Form 5884-A, Section A (affected Midwestern disaster						
٦	area employers)						
r	Form 5884-A, Section B (employer housing)						
	Form 5884-B (new hire retention)						
	Form 8847 (contributions to community development						
	corporations)						
u	Form 8861 (welfare to work)						
	Form 8884 (New York Liberty Zone business employee)						
	Form 8942 (therapeutic drug)						
	Other credits (see instructions)						
ZZ	Add lines 1a through 1zz and 2a through 2yy						
3	Form 8844 (empowerment zone)						
4	Specified credits:						
	Form 3468, Part VI (energy)						
	Form 5884 (work opportunity)						
	Form 6478 (biofuel producer)						
	Form 8586 (low-income housing) (post-2007)						
	Form 8835 (renewable electricity)						
	Form 8846 (employer taxes)						
_	Form 8900 (railroad track maintenance)						
	Form 8941 (employer health insurance)						
i	Form 6765 ESB credit (research)						
j	Form 8994 (paid family and medical leave)						
_	Form 3468, Part VII (rehabilitation) (post-2007)						
I	Reserved (4I)						
	Reserved (4m)						
	Other specified credits						
5	Add lines 4a through 4z						
6	Add lines 2zz, 3, and 5						2000

Page 6

Part	V Breakdown of Aggregate Amounts on Part III for Facility-by-Facility, Multiple Pass-Through Entities, etc. (see instructions)								
	(a) Line number from Part III	(b) Elective payment or transfer registration number	(c) Pass-through or transfer credit entity EIN	(d) Current year credits from non-passive activities	(e) Current year credits from passive activity before passive activity credit limitation	(f) Credit transfer election amount	(g) Gross elective payment election amount	(h) Net elective payment election amount	(i) Carryover of passive activity credit allowable in current year
1									
2									
3									
4									
5									
6									
7									
8									
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11									
12 13									
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29						_			
30									
31									
32									
33									
34									
35									
36									
37									
38									- 2000 (5.5.5.5)

Form 3800 (2023) Page 8

Part V		wn of Aggre	gate Amoun	ts in Part IV (see	e instructions)		Page 8
	(a) Line number from Part IV	(b) Check if non-passive	<b>(c)</b> Year	(d) Pass-through entity EIN	(e) Credit carrybacks to current year	<b>(f)</b> Carryforwards (excluding ESBCs)	(g) Eligible small business credit (ESBC) carryforwards
1							
2 3		+					
4							
5							
6							
7							
8							
9							
10 11		+					
12							
13							
14							
15							
16							
17							
18 19							
20							
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25							
26							
27							
28 29							
30							
31							
32							
33							
34							
35							
36							
37							
38 39		+					
39 40							
41		+					
42							
43							
44							
45							
46							
47		+					
48 49							
49 50		+					
				<u> </u>	1		7200 (2000)

## Form **6251**

#### **Alternative Minimum Tax—Individuals**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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/Form6251 for instructions and the latest information.

Attachment Sequence No. **32** 

Your social security number

SABARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH 675-40-8100 Part I Alternative Minimum Taxable Income (See instructions for how to complete each line.) Enter the amount from Form 1040 or 1040-SR, line 15, if more than zero, If Form 1040 or 1040-SR, line 15, is zero, subtract line 14 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the result 1 139,025. If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from 2a 27,700. 2b Investment interest expense (difference between regular tax and AMT) . . . . . . . . . . . . . . . . 2c 2d Net operating loss deduction from Schedule 1 (Form 1040), line 8a. Enter as a positive amount . . . . . 2e 2f Interest from specified private activity bonds exempt from the regular tax . . . . . . . . . . . . 2g 0. 2h Exercise of incentive stock options (excess of AMT income over regular tax income) . . . . . . . . 2i i i 2i Disposition of property (difference between AMT and regular tax gain or loss) . . . . . . 2k 1 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) . . . . . . 21 0. 2m Loss limitations (difference between AMT and regular tax income or loss) . . . . . . . . . . . . . . 2n 20 Long-term contracts (difference between AMT and regular tax income) . . . . . . . . . . . . . . . . p 2p 2q a Research and experimental costs (difference between regular tax and AMT) . . . . . . . . . . . . . 2r 2s s 2t t 3 Other adjustments, including income-based related adjustments............ 3 Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is 166,725. **Alternative Minimum Tax (AMT)** Part II 5 Exemption. IF your filing status is... AND line 4 is not over... THEN enter on line 5... Single or head of household . . . . . . \$ 578,150 . . . . . . \$ 81,300 Married filing jointly or qualifying surviving spouse 1,156,300 . . . . . . 126,500 63.250 5 126,500. If line 4 is **over** the amount shown above for your filing status, see instructions. Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9, and 6 40,225. • If you are filing Form 2555, see instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the 10,455. 7 back and enter the amount from line 40 here. All others: If line 6 is \$220,700 or less (\$110,350 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$4,414 (\$2,207 if married filing separately) from the result. 8 8 9 9 10,455. Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. 10 Subtract from the result Schedule 3 (Form 1040), line 1 and any negative amount reported on Form 8978, line 14 (treated as a positive number). If zero or less, enter -0-. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line. See 21,198. 10 AMT. Subtract line 10 from line 9. If zero or less, enter -0-. Enter here and on Schedule 2 (Form 1040), line 1 11 0.

Form 6251 (2023) Page **2** 

#### Part III Tax Computation Using Maximum Capital Gains Rates

Complete Part III only if you are required to do so by line 7 or by the Foreign Earned Income Tax Worksheet in the instructions. 12 Enter the amount from Form 6251, line 6. If you are filing Form 2555, enter the amount from line 3 of the 12 40,225. 13 Enter the amount from line 4 of the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040 or the amount from line 13 of the Schedule D Tax Worksheet in the Instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary). See instructions. If you are filing 13 28. Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary). See 14 14 15 If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see 28. 15 28. 16 16 17 17 40,197. If line 17 is \$220,700 or less (\$110,350 or less if married filing separately), multiply line 17 by 26% (0.26). 18 Otherwise, multiply line 17 by 28% (0.28) and subtract \$4,414 (\$2,207 if married filing separately) from the result 18 10,451. 19 • \$89,250 if married filing jointly or qualifying surviving spouse, 89,250. • \$44,625 if single or married filing separately, or 19 • \$59,750 if head of household. 20 Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 14 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter . . . . . . . . . . . 20 138,997. 21 21 0. 22 22 28. 23 Enter the **smaller** of line 21 or line 22. This amount is taxed at 0% . . . . . . . . 23 0. 24 24 28. 25 • \$492,300 if single, • \$276,900 if married filing separately, 25 553,850. • \$553,850 if married filing jointly or qualifying surviving spouse, or • \$523,050 if head of household. 26 26 0. Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from 27 line 21 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter . . . . . . . . . . . 27 138,997. 28 138,997. 28 29 Subtract line 28 from line 25. If zero or less, enter -0-29 414,853. 30 Enter the smaller of line 24 or line 29 . . . . . . . . . . . . . . . . . . 30 28. 31 31 4. 28. 32 32 If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33. 33 33 0. 34 34 0. If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35. 35 35 36 Subtract line 35 from line 12 36 37 37 10,455. 38 38 39 If line 12 is \$220,700 or less (\$110,350 or less if married filing separately), multiply line 12 by 26% (0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$4,414 (\$2,207 if married filing separately) from the result 39 10,459. 40 Enter the smaller of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7 . . . . . 40 10,455.

#### SCHEDULE 8812 (Form 1040)

# Credits for Qualifying Children and Other Dependents

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

2023

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.

SABARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH 675-40-8100 Part 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 1 166,725. 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 3 166, 725. 4 Number of qualifying children under age 17 with the required social security number 2 5 4,000. 5 Number of other dependents, including any qualifying children who are not under age 6 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 4,000. 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 11 0. Is the amount on line 8 more than the amount on line 11? . . . 12 4,000. 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 13,698. Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents 4,000. 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 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.

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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 $\dots \dots \dots \dots \dots \dots \dots \dots \dots \dots$	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.		
	Otherwise, go to line 21.	( )	
	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	S Of 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		
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	
25 26	Enter the <b>larger</b> of line 20 or line 25	26	
20	Next, enter the smaller of 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	
41	This is your additional clind tax credit. Enter this amount on Porm 1040, 1040-500, or 1040-100, fille 20.	41	

## Form **8995**

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2023

Attachment Sequence No. **55** 

Internal Revenue Service

Name(s) shown on return

Department of the Treasury

SABARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH

Your taxpayer identification number 675-40-8100

**Note.** You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name (b) Taxpayer identification number			(c) Qualified business income or (loss)	
i					
ii					
iii					
iv					
V					
2	Total qualified business income or (loss). Combine lines 1i through 1v,				
^	column (c)	2			
3	Qualified business net (loss) carryforward from the prior year	3 (			
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4			
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5		
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	<b>6</b> 1.			
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (			
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8 1.			
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	0.	
10	Qualified business income deduction before the income limitation. Add lines 5 and	19	10	0.	
11	Taxable income before qualified business income deduction (see instructions)	11 139,025.			
12	Enter your net capital gain, if any, increased by any qualified dividends				
	(see instructions)	<b>12</b> 28.			
13	Subtract line 12 from line 11. If zero or less, enter -0	<b>13</b> 138,997.			
14	Income limitation. Multiply line 13 by 20% (0.20) $\cdot$		14	27 <b>,</b> 799.	
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also				
	the applicable line of your return (see instructions)		15	0.	
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	( 0.	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 azero, enter -0		17	( 0.	

# Form **8936**

### **Clean Vehicle Credits**

OMB No. 1545-2137

675-40-8100

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

SABARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH

Go to www.irs.gov/Form8936 for instructions and the latest information.

Attach to your tax return. Attachment Sequence No. **69** Identifying number

Notes	• Complete a separate Schedule A (Form 8936) for each clean vehicle placed in	service during the tax	year.	
	• Individuals completing Parts II, III, or IV, must also complete Part I. See "Note"	text below.		
Part	Modified Adjusted Gross Income Amount			
1a	Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR	1a 166,725.		
b	Enter any income from Puerto Rico you excluded	1b		
С	Enter any amount from Form 2555, line 45	1c		
d	Enter any amount from Form 2555, line 50	1d		
е	Enter any amount from Form 4563, line 15	1e		
2	Add lines 1a through 1e		2	166,725.
3a	Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR	3a 138,142.		
b	Enter any income from Puerto Rico you excluded	3b		
С	Enter any amount from Form 2555, line 45	3c		
d	Enter any amount from Form 2555, line 50	3d		
е	Enter any amount from Form 4563, line 15	3e		
4	Add lines 3a through 3e		4	138,142.
_ 5	Enter the <b>smaller</b> of line 2 or line 4		5	138,142.
Part				
	Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$	i 150,000 (\$300,000 if r	married	filing jointly or a
	qualifying surviving spouse; \$225,000 if head of household).			
6	Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936)		6	0.
7	New clean vehicle credit from partnerships and S corporations (see instructions)		7	
8	Business/investment use part of credit. Add lines 6 and 7. Partnerships and S co			
	and report this amount on Schedule K. All others, report this amount on Form 3800	, Part III, line 1y	8	0.
Part I				
	<b>Note:</b> You can't claim the Part III credit if Part I, line 5, is more than \$15 qualifying surviving spouse; \$225,000 if head of household).	50,000 (\$300,000 if m	narried 1	filing jointly or a
9	Enter the total credit amount figured in Part III of Schedule(s) A (Form 8936)		9	7,500.
10	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18		10	21,198.
11	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)		11	
12	Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't cla			
	part of the credit		12	21,198.
13	Personal use part of credit. Enter the smaller of line 9 or line 12 here and of			
	1040), line 6f. If line 12 is smaller than line 9, see instructions		13	7,500.
Part l				
	<b>Note:</b> You can't claim the Part IV credit if Part I, line 5, is more than \$7 qualifying surviving spouse; \$112,500 if head of household).	'5,000 (\$150,000 if m	arried f	iling jointly or a
14	Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936)		14	
15	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18		15	
16	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)		16	
17	Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't cla		17	
18	Enter the <b>smaller</b> of line 14 or line 17 here and on Schedule 3 (Form 1040),			
	smaller than line 14, see instructions		18	
Part				
19	Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936)		19	
20	Qualified commercial clean vehicle credit from partnerships and S corporations (see		20	
21	Add lines 19 and 20. Partnerships and S corporations, stop here and report this			
	K. All others, report this amount on Form 3800, Part III, line 1aa $\cdot\cdot\cdot$		21	

# SCHEDULE A (Form 8936)

### **Clean Vehicle Credit Amount**

OMB No. 1545-2137

2023

Attachment Sequence No. **69A** 

Identifying number

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Attach to your tax return.

Go to www.irs.gov/Form8936 for instructions and the latest information.

SAB	ARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH	675	-40-8100						
Part	Vehicle Details								
1a	Year		2023						
b	<b>b</b> Make								
С	Model	Y							
2	Vehicle identification number (VIN) (see instructions) 7 S A Y G D E E	6 P	F 7 0 9 6 9 9						
3	Enter date vehicle was placed in service (MM/DD/YYYY)	03/	29/2023						
4	Was the vehicle used primarily outside the United States? Answer "No" if it was but an except ☐ <b>Yes. Stop here.</b> You can't claim a credit amount for a vehicle used primarily outside the Unix No.								
5	Does the VIN entered on line 2 belong to a <b>new clean vehicle</b> placed in service during the tax definitions.  ✓ <b>Yes.</b> Go to Part II.  ✓ <b>No.</b> Go to line 6.	year?	See instructions for						
6	Does the VIN entered on line 2 belong to a <b>previously owned clean vehicle</b> acquired after 20 the tax year? See instructions for definitions.         Yes. Go to Part IV.    No. Go to line 7.	22 and	placed in service during						
7 Part	Does the VIN entered on line 2 belong to a <b>qualified commercial clean vehicle</b> acquired after during the tax year? See instructions for definitions.  Yes. Go to Part V.  No. Stop here. You can't use this schedule to figure a credit amount for a vehicle not described.  Credit Amount for Business/Investment Use Part of New Clean Vehicle								
8	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person.  ☑ Yes.  ☐ No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or t resale.		-						
9	Tentative credit amount (see instructions)	9	7,500.						
10	Business/investment use percentage (see instructions)	10	%						
11	Multiply line 9 by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you entered 100% on line 10, stop here. Otherwise, go to Part III below	11	0.						
Part	Credit Amount for Personal Use Part of New Clean Vehicle								
12	Subtract line 11 from line 9 in Part II. Stop here and include this credit amount on line 9 in Part III of Form 8936	12	7,500.						

Schedu	e A (Form 8936) 2023		Page 2
Part			
13a	Is the sales price of the vehicle more than \$25,000?		
	Yes. Stop here. The vehicle doesn't qualify for the Part IV credit.		
	□ No.		
b	Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehicle	e fron	n another person.
	Yes.		
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a	cquire	ed for resale.
С	Can you be claimed as a dependent on another person's tax return, such as your parent's retu	rn?	
	Yes. Stop here. You can't claim a credit amount if you can be claimed as a dependent.		
	□ No.		
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions.		
	Yes.		
	☐ No.		
14	Enter the sales price of the vehicle	14	
15	Multiply line 14 by 30% (0.30)	15	
16	Maximum vehicle credit amount	16	4,000.
			1,000
17	Enter the smaller of line 15 or line 16. Stop here and include this credit amount on line		
	14 in Part IV of Form 8936	17	
Part			
18a	Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exce	eption	for certain tax-exempt
	entities discussed in the instructions applies.  Yes.		
	No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception	appli	es.
L	Did you conside the vehicle for you and lease to athour and not for your 100 America (MI)." if you		and a state of the
b	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person.	are ie	easing the vehicle from
	Yes.		
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to	o leas	e to others, or acquired fo
	resale.		
С	Is the vehicle also powered by gas or diesel? See instructions.		
_	☐ Yes.		
19	Enter the cost or other basis of the vehicle. See instructions	19	
20	Section 179 expense deduction (see instructions)	20	
21	Subtract line 20 from line 19	21	
21	Subtract line 20 from line 19	21	
22	Multiply line 21 by 15% (0.15) [30% (0.30) if the answer on line 18c above is "No"]	22	
23	Enter the incremental cost of the vehicle. See instructions	23	
24	Enter the smaller of line 22 or line 23	24	
25	Maximum credit. Enter \$7,500 (\$40,000 if the vehicle's gross vehicle weight rating (GVWR) is		
	14,000 pounds or more)	25	
26	Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V		

26

(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

SABA	ARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH	675-40-8100	)		
repare	's name	Preparer tax identifica	ition numb	oer	
SYAN	1 PRIYA RAM SAGAR GUPTA	P02082703			
Part	Due Diligence Requirements				
	check the appropriate box for the credit(s) and/or HOH filing status claimed on the retubenefit(s) claimed (check all that apply).		the rela		arts I–V HOH
1	Did you complete the return based on information for the applicable tax year provided by	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 Scheding 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.	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) and 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 " <b>Yes</b> ,"		×	
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 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) p taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing sta	, a copy of any 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:				
•	Did you got the term over the then be false and a movide also consent the false to the terminal				
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate credit(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	×		
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.)	•			
а	Did you complete the required recertification Form 8862?				
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a	complete and			
	correct Schedule C (Form 1040)?				

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	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	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 qui	alified	Yes	No
D	tuition and related expenses for the claimed AOTC?			
Part	· · · · · · · · · · · · · · · · · · ·			
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?	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 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 ret or HOH	urn or filing
	<ul> <li>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;</li> </ul>	list for a	ny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 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.			
	<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 applica obtained.</li></ol>	ble worl	ksheet(	s) was
	<ol><li>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</li></ol>	payer's ınt(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 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 complete?	t, and	Yes	No
	complete?	· · · Form <b>88</b> 0		11-2023

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

#### Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions. Attach to Form 1040, 1040-SR, 1040-NR, or 1040-SS,

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. **71** 

Your social security number

675-40-8100 SABARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH Part I Additional Medicare Tax on Medicare Wages Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5 . . . . . . . . . 1 200,549. 2 2 3 3 4 4 200,549. 5 Enter the following amount for your filing status: Single, Head of household, or Qualifying surviving spouse . . . \$200,000 6 0. Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to 0. Part II Additional Medicare Tax on Self-Employment Income 8 Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you 8 Enter the following amount for your filing status: Married filing separately . . . . . . . . . . . . . . . . . . Single, Head of household, or Qualifying surviving spouse . . . \$200,000 9 10 10 11 12 12 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and 13 Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation 14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 15 Enter the following amount for your filing status: Single, Head of household, or Qualifying surviving spouse . . . \$200,000 15 16 16 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). 17 17 Total Additional Medicare Tax Part IV Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-SS 18 Withholding Reconciliation Part V Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6 . . . . . . . . . . . . . . . . . 19 2,913. 20 20 200,549. Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax 21 21 22 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax 22 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 23 23 24 Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-SS filers. 24

BAA

# (Rev. January 2024)

Department of the Treasury

**Alternative Fuel Vehicle Refueling Property Credit** 

Attach to your tax return.

Go to www.irs.gov/Form8911 for instructions and the latest information.

OMB No. 1545-0123

Attachment Sequence No. 151

Internal Revenue Service Identifying number Name(s) shown on return 675-40-8100 SABARISH SATISH KRISHNAPILLAI & SUPRIYA SUBBIAH

Part I Total Cost of Refueling Property Total cost of qualified alternative fuel vehicle refueling property placed in service during the tax 1 450. Credit for Business/Investment Use Part of Refueling Property 450. 2 3 0. 4a 450. Enter any amount included on line 4a attributable to property placed in service as part of a project subject to project requirements that were not met (see instructions) . . . . . . . . . . . . 4b 4c 450. С 5a 5b 135. 5с 135. Maximum business/investment use part of credit (see instructions) . . . . . . . . 6 6 100,000. 7 7 135. 8 Alternative fuel vehicle refueling property credit from partnerships and S corporations (see 8 Business/investment use part of credit. Add lines 7 and 8. Partnerships and S corporations, 9 stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part 135. Part III Credit for Personal Use Part of Refueling Property 10 Subtract line 2 from line 1. If zero, stop here; do not file this form unless you are claiming a credit 10 0. 11 11 12 12 13 13 14 Regular tax before credits: • Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, 14 line 16, and Schedule 2 (Form 1040), line 2. • Other filers. Enter the regular tax before credits from your return. Credits that reduce regular tax before the alternative fuel vehicle refueling property credit: 15 15c Net regular tax. Subtract line 15c from line 14. If zero or less, enter -0- and stop here; do not file 16 16 17 Tentative minimum tax (see instructions): • Individuals. Enter the amount from Form 6251, line 9. Other filers. Enter the tentative minimum tax from your alternative minimum tax 17 form or schedule. 18 Subtract line 17 from line 16. If zero or less, stop here; do not file this form unless you are 18 Personal use part of credit. Enter the smaller of line 13 or line 18 here and on Schedule 3 (Form 19 1040), line 6j; or the appropriate line of your return. If line 18 is smaller than line 13, see 19