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.

Submission Identification Number (SID)

Taxpay	er's name	Social security number					
SAT	WIK IBRAHIMPATNAM	702-79	-6985	5			
Spouse	's name	Spouse's social security number					
Par	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	year you a	re aut	horizing.)			
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	64,325.			
2	Total tax		2	3,912.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	10,028.			
4	Amount you want refunded to you		4	6,116.			
5	Amount you owe		5				
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and k	еер а сор	y of y	our return)			

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

			ERO firm name	_ 0 ,	En
X	l authorize	GLOBAL TAXES	LLC	to enter or generate my PIN	
-		-			IU

9	6	9	8	5	as mv
Ent don	asiny				

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

Spouse's	PIN:	check	one	box	only	
----------	------	-------	-----	-----	------	--

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signation	ature Da	ate 🕨	•						
	bel	ow							
Part III C	Certification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/P	PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2		 6 nter a		2	7	1

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨	
ERO Must Retain This F Don't Submit This Form to the			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 01/21/24 PRO	Form 8879 (Rev. 01-2021)

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta >		turn	202	3	OMB No. 1545	-0074	IRS Use Only	∕—Do not w	/rite or sta	ple in this space.	
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate i	nstructions.	
Your first name	and mi	iddle initial	Last r	name						Your so	cial sec	urity number	
SATWIK			IBR	RAHIMPATNAM				702	79	6985			
	oouse's	s first name and middle initial	Last r								· · ·	security number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.	Preside	ntial Ele	ction Campaigr	
_2525 OHI	O DI	RIVE							002		Check here if you, or your		
City, town, or pe	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode			jointly, want \$3 nd. Checking a	
PLANO	PLANO					TΣ	< X	750	93			not change	
Foreign country	name			Foreign p	rovince/state/	coun	ty	Foreig	n postal code	your ta	k or refu	_	
											Yo	ou Spouse	
Filing Status	X	Single					Head of he	ouseh	old (HOH)				
Check only		Married filing jointly (even if only or	ne hac	l income)			_						
one box.		Married filing separately (MFS)							ing spouse				
		you checked the MFS box, enter the			pouse. If you	u che	ecked the HOH	l or QS	SS box, ente	er the ch	ild's nar	me if the	
	qu	alifying person is a child but not you	ir depe	endent:									
Digital	At ar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d, award, or	payr	ment for prope	rty or :	services); or	(b) sell,			
Assets	exch	hange, or otherwise dispose of a digi	ital ass	set (or a fii	nancial inter	est ir	n a digital asse	t)? (Se	e instructio	ns.)	🗌 Ye	es 🛛 No	
Standard	Som	neone can claim: 🗌 You as a de	pende	ent 🗌	Your spous	e as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	ı						
Age/Blindness	You	: 🗌 Were born before January 2, 1	959	Are bl	lind Spo	ouse	: 🗌 Was bor	n befo	re January 2	2, 1959	🗌 Is	s blind	
Dependents		· · · · · · · · · · · · · · · · · · ·		(2) 5	Social security	,	(3) Relationsh				ifies for (see instructions)	
If more		irst name Last name		(_)	number		to you	·P	Child tax c	redit	Credit fo	r other dependents	
than four	PAV	JANI KADEM		880	-75-031	0	Other					X	
dependents,													
see instructions and check													
here 🗌													
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	see instruc	ctions) .					. 1a	ı 📃	76,512.	
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .					. 1b			
W-2 here. Also	С	Tip income not reported on line 1a	a (see i	nstruction	ıs)					. 10	;		
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	uctions)			. 10	I		
1099-R if tax	е	Taxable dependent care benefits f								. 1e	•		
was withheld.	f	Employer-provided adoption bene			,					. <u>1</u> f	-		
lf you did not get a Form	g	Wages from Form 8919, line 6 .								. 1g			
W-2, see	h	Other earned income (see instructi	,				· · · · ·	···		. 1h	1	0.	
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			1 i			_		76 510	
		Add lines 1a through 1h	· ·		· · ·	 . –				. 1z	-	76,512.	
Attach Sch. B if required.	2a 2a	· · -	2a				axable interest			. 2b	-		
	<u>3a</u>		3a				Ordinary divider			. 3b	-		
Standard	4a 50		4a				axable amount			. 4b	-		
Deduction for—	5a 6a		5a				axable amount		· · ·	. 5b	-		
 Single or Married filing 	6a	Social security benefits	6a	mothod			axable amount	ı		. 6b	'		
separately, \$13,850	с 7	Capital gain or (loss). Attach Sche		,		`	,	• •	L Г	7			
 Married filing 	7 8	Additional income from Schedule		•	•		, GIEGK HEIE	• •	L	. 8		-12,187.	
jointly or Qualifying	о 9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,					• • • • •			. <u>o</u> . 9		64,325.	
surviving spouse, \$27,700	9 10	Add lines 12, 20, 30, 40, 30, 60, 7, Adjustments to income from Sche		-			• · · · ·	• •		. 10	-		
 Head of household, 	11	Subtract line 10 from line 9. This is								. 11	-	64,325.	
\$20,800	12	Standard deduction or itemized	-							. 12		13,850.	
 If you checked any box under 	13	Qualified business income deducti					95-A			. 13			
Standard Deduction,	14	Add lines 12 and 13								. 14		13,850.	
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ss, enter	-0 This is v	our t	taxable incom	e .		. 15	-	50,475.	
)								

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

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	6,412.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	6,412.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	500.
	20	Amount from Schedule 3, lin	e8					20	2,000.
	21	Add lines 19 and 20 .						21	2,500.
	22	Subtract line 21 from line 18						22	3,912.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is						24	3,912.
Payments	25	Federal income tax withheld							,
	а	Form(s) W-2				25a 10),028.		
	b	Form(s) 1099				25b		1	
	с	Other forms (see instructions	6)			25c		1	
	d	Add lines 25a through 25c	<i>,</i>					25d	10,028.
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20)22 return			26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28		1	
	29	American opportunity credit				29		1	
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin				31		1	
	32	Add lines 27, 28, 29, and 31.				-		32	
	33	Add lines 25d, 26, and 32. T	•		-			33	10,028.
Refund	34	If line 33 is more than line 24						34	6,116.
nerana	35a	Amount of line 34 you want				•		35a	6,116.
Direct deposit?	b	Routing number 0 8 1					Savings		
See instructions.	ď	Account number 1 5 2					euringe		
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24							
You Owe	0/	For details on how to pay, ge						37	
	38	Estimated tax penalty (see in				38			
Third Party		you want to allow another	,						
Designee		structions	•				omplete b	elow.	× No
	De	signee's		Phone			onal identif	ication	
	nai			no.			ber (PIN)		
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com							
Here		· · · ·	piete. Declaration (,			• •	, ,
	Yo	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					DATA ENGI	NEER	(see		in, enter it here
See instructions.	Sp	Spouse's signature. If a joint return, both must		Date	Spouse's occupat		If the	IRS se	nt your spouse an
Keep a copy for	-1-	,,,,					Ident	ity Prot	ection PIN, enter it here
your records.							(see	inst.)	
	Ph	one no. (573) 200-420	6	Email address	SATWIK180	9@GMAIL.COM	1		
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/31/2024	P02082	2703	Self-employed
Use Only	Fir	m's name GLOBAL TAX	KES LLC				Phor	ie no.	(678)965-9522
	Fir	m's address 245 ROONE	CT E BRU	NSWICK N	J 08816		Firm	s EIN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/21/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Additional Income and Adjustments to Income

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

. /Form1040 for instru Ictio nd the latest inf ~ OMB No. 1545-0074 2 \bigcirc 23

Department of the Treasury

	Go to www.irs.gov/Form1040 for instructions and the latest information.						
Name	s) shown on Form 1040, 1040-SR, or 1040-NR				curity number		
SATW	IK IBRAHIMPATNAM		702-7	9-698	35		
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			
4	Other gains or (losses). Attach Form 4797		[4			
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ch Schedule	E .	5	-12,187.		
6	Farm income or (loss). Attach Schedule F.			6			
7	Unemployment compensation		[7			
8	Other income:						
а	Net operating loss	8a ()				
b	5	8b					
С	Cancellation of debt	8c					
d	5	8d ()				
е		8e					
f	Income from Form 8889	8f					
g		8g					
h		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		8n					
0		80					
р		8p					
q		8q					
r		8r					
S	Nontaxable amount of Medicaid waiver payments included on Form						
		<u>8s (</u>)				
t	Pension or annuity from a nonqualifed deferred compensation plan or	_					
	-	8t					
u	•	8u					
z	Other income. List type and amount:						
_		8z	0.		_		
9	Total other income. Add lines 8a through 8z		_· ·	9	0.		
10	Combine lines 1 through 7 and 9. This is your additional income . Enter	here and on	Form		10 105		
	1040, 1040-SR, or 1040-NR, line 8		• •	10	-12,187.		

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

Schedule 1 (Form 1040) 2023

Part	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				
-	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:		• •	 	
 a		24a			
-	Deductible expenses related to income reported on line 81 from the	210			
N		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals	- 10		-	
Ŭ	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d		-	
e	Repayment of supplemental unemployment benefits under the Trade	2.10		-	
C	Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
q	Contributions by certain chaplains to section 403(b) plans	24g		-	
	Attorney fees and court costs for actions involving certain unlawful	2-TY		 -	
	discrimination claims (see instructions)	24h			
:		2411		-	
	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			
:	Housing deduction from Form 2555	24i 24j			
ן ר	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24j			
ĸ		24k			
-	Other adjustments. List type and amount:	24N		-	
z	Other aujustitients. List type and antount.	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income			 23	
20	Form 1040, 1040-SR, or 1040-NR, line 10			26	
	BAA		01/21/24 P		le 1 (Form 1040) 202

Additional Credits and Payments

OMB No. 1545-0074 2

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

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form1040 for instructions and the latest information.						tachment equence No. 03
		orm 1040, 1040-SR, or 1040-NR				ecurity number
Pa	WIK IBRAHIN	fundable Credits		702-7	/9-65	185
					4	
1 0	•	credit. Attach Form 1116 if required			1	
2		2				
3	Education c		3	2,000.		
4	Retirement	savings contributions credit. Attach Form 8880			4	
5a	Residential	clean energy credit from Form 5695, line 15			5a	
b	Energy effic	ient home improvement credit from Form 5695, line 32			5b	
6	Other nonre	fundable credits:				
а	General bus	siness credit. Attach Form 3800	6a			
b	Credit for p	rior year minimum tax. Attach Form 8801	6b			
С	Adoption cr	edit. Attach Form 8839..............	6c			
d	Credit for th	e elderly or disabled. Attach Schedule R	6d			
е	Reserved for	or future use	6e			
f	Clean vehic	le credit. Attach Form 8936	6f			
g	Mortgage ir	iterest credit. Attach Form 8396	6g			
h	District of C	olumbia first-time homebuyer credit. Attach Form 8859	6h			
i	Qualified ele	ectric vehicle credit. Attach Form 8834	6i			
j	Alternative f	uel vehicle refueling property credit. Attach Form 8911	6j			
k	Credit to ho	Iders of tax credit bonds. Attach Form 8912	6k			
Ι	Amount on	Form 8978, line 14. See instructions	6I			
m	Credit for p	reviously owned clean vehicles. Attach Form 8936 .	6m		_	
z	Other nonre	fundable credits. List type and amount:				
			6z			
7	Total other	nonrefundable credits. Add lines 6a through 6z			7	
8		through 4, 5a, 5b, and 7. Enter here and on Form 10		SR, or		
	1040-NK, III	ne 20			8	2,000. ed on page 2)

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

Schedule 3 (Form 1040) 2023

Schedule 3 (Form 1040) 2023

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	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	D-SR, or 1040-NR,	15	
	BAA REV	01/21/24 PRO	Schedu	ule 3 (Form 1040) 2023

SCHEDULE E		Supplemental Income and Loss							OMB No. 1545-0074		0074				
(Form	Form 1040) (From rental real estate, royalties, partners			nersł	nips, S	corporat	ions, es	states,	trusts, REM	ICs,	etc.)	90		2	
Departm	nent of the Treasury			Attach to Form 1									Attachm	リ ム vent	
Internal	Revenue Service			Go to www.irs.gov/Schedule	E for	r instru	uctions an	nd the la	atest i	nformation.			Sequen	ce No. 1	
) shown on return												al security	number	
	IK IBRAHIM										7()2-7	9-6985		
Part	Note: If yo	ou are i	in th	s From Rental Real Estate he business of renting personal pr s from Form 4835 on page 2, line	roper			e C . See	e instru	ctions. If you	are a	an indiv	vidual, rep	ort farn	n
A [ents in 2023 that would require		to file	Form(s)	1099? \$	See in	structions .			. 🗌 Ye	s X	No
				ou file required Form(s) 1099?											No
1 a				ach property (street, city, state											
Α	DWARAKA C	HAND	RA	RESIDENCY BAIRAMALG	GUDA	A HYI	DERABAI	D, TEL	ANGA	NA IN 50	003	5			
В															
С															
1b	Type of Prope (from list below		2	For each rental real estate particular above, report the number of	rope fair	rty list rental	ted and		Fa	air Rental Days	Ρ	erson Da	al Use vs	Q	JV
Α	3	,		personal use days. Check th				Α		365			0	Г	7
B				if you meet the requirements				B					Ű		<u>-</u>
С				qualified joint venture. See in	nstru	ctions	5.	C							1
Туре	of Property:														
	Single Family R	esider	nce	e 3 Vacation/Short-Term	Ren	tal	5 Lanc	ł	7	Self-Rental					
	Multi-Family Re			4 Commercial			6 Roya	alties	8	Other (desc	ribe)			
										Proper					
Incom	le'							Α		B				С	
3		Ч				3			/14.					<u> </u>	
4						4									
Exper															
5						5									
6				structions)		6									
7						7		1,7	′58.					-	
8						8								-	
9						9									
10	Legal and othe	er prof	ess	sional fees		10									
11	Management f	fees .				11		ç	80.						
12				to banks, etc. (see instruction		12									
13	Other interest				•	13									
14	Repairs				•	14			524.						
15	Supplies .		•		•	15		2,3	310.						
16						16									
17						17			51.						
18		expens	se c	or depletion	•	18		2,8	378.						
19	Other (list)					19		10.0	0.1						
20	•			nes 5 through 19		20		12,9	, T O						
21		s), see	e ins	ne 3 (rents) and/or 4 (royalties) structions to find out if you m	ust	21		-12,1	.87.						
22				estate loss after limitation, if a tructions)		22	(12,18	37.)	()	()
2 3a	Total of all am	ounts	rep	ported on line 3 for all rental p	rope	rties			23a		7	14.			·
b			-	oorted on line 4 for all royalty					23b						
с			-	ported on line 12 for all proper					23c						
d				ported on line 18 for all proper					23d		2,8	78.			
е				ported on line 20 for all proper					23e	1	2,9	01.			
24				amounts shown on line 21. Do			-					24			
25	Losses. Add ro	byalty l	oss	ses from line 21 and rental real e	estate	e losse	es from lin	ne 22. E	inter to	tal losses he	re	25	(1	12,18	37.)

SCHEDULE E

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 -12,187. NPA

For Paperwork Reduction Act Notice, see the separate instructions.

26

-12,187.

BAA REV 01/21/24 PRO

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

OMB No. 1545-0074

Attachment Sequence No. 47

20

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Name(s)	ame(s) shown on return					
SATW	IK IBRAHIMPATNAM	702	-79-6	5985		
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	64,325.		
2a	Enter income from Puerto Rico that you excluded					
b	Enter the amounts from lines 45 and 50 of your Form 2555 . . . 2b	0.				
c	Enter the amount from line 15 of your Form 4563 . . <th .<="" th=""><th></th><th></th><th></th></th>	<th></th> <th></th> <th></th>				
d	Add lines 2a through 2c	•	2d	0.		
3	Add lines 1 and 2d	•	3	64,325.		
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	1				
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resid alien. Also, do not include anyone you included on line 4.	lent				
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	200,000.		
10	Subtract line 9 from line 3.					
	• If zero or less, enter -0					
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.		10	0.		
11	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.	edit.				
	Yes. Subtract line 11 from line 8. Enter the result.					
13	Enter the amount from Credit Limit Worksheet A		13	4,412.		
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.					
	If the amount on line 12 is more than the amount on line 14, you may be able to take the addition					
	on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-N	R thr	ough li	ne 27		

(also complete Schedule 3, line 11) before completing Part II-A.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 01/21/24 PRO Schedule 8812 (Form 1040) 2023

Schedu	le 8812 (Form 1040) 2023		Page 2
Part	II-A Additional Child Tax Credit for All Filers		
Cautio	n: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lin	e 27	🔲
16a	Subtract line 14 from line 12. If zero, stop here ; you cannot take the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27	16a	0
b 17 18a b 19	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 17	
20	 ❑ Yes. Subtract \$2,500 from the amount on line 18a. Enter the result	20	Duorto Dioc
Part		S OT I	Juerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or if you are a bona fide resident of Puerto Rico, see instructions.21		
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 1322		
23	Add lines 21 and 22		
24 25	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. Subtract line 24 from line 23. If zero or less, enter -0- 24	25	
23 26	Enter the larger of line 20 or line 25	25	
_ 0	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	
	•	edule 8	8812 (Form 1040) 2023

Form **8863**

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

AUTIO

Education Credits (American Opportunity and Lifetime Learning Credits)

Attach to Form 1040 or 1040-SR.

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

	OMB No. 1545-0074						
	2023						
		Attachme Sequenc	ent e No. 50				
Your social security number							
702		79	6985				

SATWIK IBRAHIMPATNAM

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

Part	Refundable American Opportunity Credit					
1	After completing Part III for each student, enter the total of all amounts from all P	arts I	II, line	30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household,	2				
	or qualifying surviving spouse	2			-	
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	3				
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education	-				
4	credit	4			-	
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	5				
6	If line 4 is:					
	• Equal to or more than line 5, enter 1.000 on line 6					
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rou at least three places)			}	6	
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of th conditions described in the instructions, you can't take the refundable Americ skip line 8, enter the amount from line 7 on line 9, and check this box	an op	portur	nity credit;	7	
•	•				7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter on Form 1040 or 1040-SR, line 29. Then go to line 9 below.				8	
Part						
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	(see	instru	ctions) .	9	
10	After completing Part III for each student, enter the total of all amounts from a zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19				10	12,386.
11	Enter the smaller of line 10 or \$10,000				11	10,000.
12	Multiply line 11 by 20% (0.20)				12	2,000.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse	13		90,000.		
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for					
	the amount to enter instead	14		64,325.		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19	15		25,675.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	16		10,000.		
17	If line 15 is:			-,		
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18)		
	Less than line 16, divide line 15 by line 16. Enter the result as a decimal (roun least three places)	}	17	1.000		
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet	tions)	18	2,000.		
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit	,				
	instructions) here and on Schedule 3 (Form 1040), line 3			•	19	2,000.
For Pa		AA		REV 01/21/2		Form 8863 (2023)
		AA				

Form 8863 (2023) Page 2						
Name(s) shown on return	Your social	security	number			
SATWIK IBRAHIMPATNAM	702	79	6985			

CAUT	Complete Part III for each student for whom credit or lifetime learning credit. Use addition	-	-		
Part	Student and Educational Institution Informatio	n. See ii	nstructions.		
20	Student name (as shown on page 1 of your tax return) PAVANI		tudent social security number (as s our tax return)	shown	on page 1 of
	KADEM		880-75-0310		
22	Educational institution information (see instructions)				
а	. Name of first educational institution	b. N	ame of second educational institut	ion (if a	any)
	SOUTHEAST MISSOURI STATE UNIV				
(Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. ONE UNIVERSITY PLAZA MAILSTOP 3740 	(1)	Address. Number and street (or P. post office, state, and ZIP code. If instructions.		
	CAPE GIRARDEAU MO 63701				
(2	2) Did the student receive Form 1098-T X Yes □ No from this institution for 2023?	(2)	Did the student receive Form 1098 from this institution for 2023?	В-Т] Yes 🗌 No
(;	B) Did the student receive Form 1098-T from this institution for 2022 with box Yes No 7 checked?	(3)	Did the student receive Form 1098 from this institution for 2022 with 8 7 checked?] Yes 🗌 No
("	4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	(4)	Enter the institution's employer ide if you're claiming the American op checked "Yes" in (2) or (3). You can 1098-T or from the institution.	portuni	ty credit or if you
	43-6003569				
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?	□ Yes Go	s — Stop! to line 31 for this student. 🗙 No	— Go	to line 24.
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2023 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	× Yes		— Sto j this stu	p! Go to line 31 ident.
25	Did the student complete the first 4 years of postsecondary education before 2023? See instructions.	× Yes Go	s — Stop! to line 31 for this student. 🗌 No	— Go	to line 26.
26	Was the student convicted, before the end of 2023, of a felony for possession or distribution of a controlled substance?				nplete lines 27) for this student.
CAUT	You can't take the American opportunity credit and the layou complete lines 27 through 30 for this student, don't don'			t in the	same year. If
	American Opportunity Credit				
27	Adjusted qualified education expenses (see instructions). Dor			27	
28				28 29	
29					
30	If line 28 is zero, enter the amount from line 27. Otherwise, enter the result. Skip line 31. Include the total of all amounts f			30	
	Lifetime Learning Credit			,	
31	Adjusted qualified education expenses (see instructions). Incl III, line 31, on Part II, line 10			31	12,386.
				<u> </u>	, Farma 9963 (0000)

Form **8867**

1	Rev	November	2023	\$
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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 Department of the Treasury To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS OMB No. 1545-0074 For tax year

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2	3

Department of the Treasury Internal Revenue Service					
Taxpayer name(s) shown or	Taxpayer identification number				
SATWIK IBRAHIM	702-79-6985				
Preparer's name		Preparer tax identifica	tion number		
SYAM PRIYA RAM	I SAGAR GUPTA TALLAM	P02082703			

Part I **Due Diligence Requirements**

Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I-V for the benefit(s) claimed (check all that apply). X CTC/ACTC/ODC EIC □ HOH

1	Did you complete the return based on information for the applicable tax year provided by the taxpayer	Yes	No	N/A
	or reasonably obtained by you?	×		
2	If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 8812 (Form 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit claimed?	X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following.Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to			
	 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) and/or HOH filing 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 the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If " Yes ," answer questions 4a and 4b. If " No ," go to question 5.)		X	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent information? .			
b	Did you contemporaneously document your inquiries? (Documentation should include the questions you asked, whom you asked, when you asked, the information that was provided, and the impact the information had on your preparation of the return.)			
5	Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure			
	the amount(s) of the credit(s)	X		
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her return is selected for audit?	X		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year?	X		
	(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?			
•	. If the terrestance is repeating and example, meant increase, alid, representings to present a second state and			

8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and
	correct Schedule C (Form 1040)?

For Paperwork Reduction Act Notice, see separate instructions.

REV 01/21/24 PRO

Form 8867 (Rev. 11-2023)

Form 88	367 (Rev. 11-2023)			Page 2
Part	II Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	Yes	No	N/A
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?			
Part	III Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes X	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	X		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar			
Part	statement to the return? Due Diligence Questions for Returns Claiming AOTC (If the return does not claim AOTC)	, go to	Part V	/.)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the quature turinon and related expenses for the claimed AOTC?		Yes	No
Part	V Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing statu	s, go to	o Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax and provided more than half of the cost of keeping up a home for the year for a qualifying person?	k year	Yes	No
Part	 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 HOI	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	n the re or HOH	turn or filing
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checkl credit(s) claimed and HOH filing status, if claimed;	list for a	any app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 Document Retention.	67 instri	uctions	under

- 1. A copy of this Form 8867.
- 2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.
- 3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).
- 4. A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s) was obtained.
- 5. A record of any additional information you relied upon, including questions you asked and the taxpayer's responses, to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).

If you have not complied with all due diligence requirements, you may have to pay a penalty for each failure to comply related to a claim of an applicable credit or HOH filing status (see instructions for more information).

15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and	Yes	No
	complete?	×	

REV 01/21/24 PRO

Form 8867 (Rev. 11-2023)