1040		artment of the Treasury—Internal R S. Individual Incol		turn	202	23	OMB No. 1545-	0074	IRS Use Or	nly—Do not v	vrite or sta	aple in this space.
For the year Jan	. 1-Dec	. 31, 2023, or other tax year be	ginning		, 2023, en	ding			, 20	See se	parate	instructions.
Your first name	and m	ddle initial	Last r	name						Your se	ocial sec	curity number
UMA			SAR	ARAVANAKUMAR					796	60	7675	
If joint return, sp	pouse's	first name and middle initial	Last r							Spouse	's socia	I security numbe
SARAVANA	A KI	JMAR	RAM	IARAJ						988	90	8861
Home address	(numbe	r and street). If you have a P.0	D. box, see instruc	tions.				Α	pt. no.	Preside	ential Ele	ection Campaigr
_215 N MC	ORE	ROAD						1	.022			ou, or your
City, town, or p	ost offi	ce. If you have a foreign addre	ess, also complete	spaces be	low.	Sta	ate	ZIP co	ode		•	jointly, want \$3 nd. Checking a
COPPELL						TΣ	X	750	19			not change
Foreign country	name			Foreign p	rovince/state	/count	ty	Foreig	n postal cod	e your ta	x or refu	_
											∐ Yo	ou Spouse
Filing Status	;	Single					Head of ho	ouseh	old (HOH)			
Check only	×	Married filing jointly (even	n if only one had	l income)			_					
one box.		Married filing separately	, ,				Qualifying		•			
		ou checked the MFS box,			pouse. If yo	u che	ecked the HOH	or QS	SS box, en	iter the ch	ild's na	me if the
	qu	alifying person is a child b	ut not your depe	endent:								
Digital	At ar	ny time during 2023, did yo	ou: (a) receive (a	s a reward	d, award, oi	r payr	ment for proper	ty or :	services); (or (b) sell,		
Assets	exch	ange, or otherwise dispos	e of a digital as	set (or a fi	nancial inte	rest ir	n a digital asset	t)? (Se	e instructi	ons.)	Y	es 🛛 No
Standard	Som	eone can claim: 🗌 Yo	ou as a depende	nt 🗌	Your spous	se as	a dependent					
Deduction		Spouse itemizes on a sepa	rate return or yo	ou were a	dual-status	alien	1					
Age/Blindness	S You:	Were born before Ja	nuary 2, 1959	Are b	lind Sp	ouse	: 🗌 Was bori	n befc	ore January	/ 2, 1959		s blind
Dependents	s (see	instructions):		(2) \$	Social securit	у	(3) Relationshi	p (4) Check the	box if qual	ifies for	(see instructions):
If more	(1) F	rst name Last nar	ne		number		to you		Child tax	credit	Credit fo	or other dependents
than four	SAI	AARADHYA SARAVA	NAKUMAR	APP	LIED FO)R	Daughter					×
dependents, see instructions	NIT	HIKSHA SARAVA	NAKUMAR	APP	LIED FO	DR	Daughter					×
and check									<u> </u>			
here 🗌										<u> </u>	<u> </u>	
Income	1a	Total amount from Form			,							78,505.
Attach Form(s)	b	Household employee wa	•		.,					. 11		
W-2 here. Also attach Forms	C	Tip income not reported								. 10		
W-2G and	d	Medicaid waiver paymer	-					• •		. 10		
1099-R if tax was withheld.	e	Taxable dependent care Employer-provided adoption						• •		· 10		
lf you did not	f				,			• •				
get a Form	9 h	Wages from Form 8919, Other earned income (se				• •		• •		· 10		0.
W-2, see instructions.	i	Nontaxable combat pay	,			• •	· · · · ·	· ·		. – "	•	
linstructions.	z	Add lines 1a through 1h				• •		_		. 12	,	78,505.
Attach Sch. B	2a	-	 2a 			ь.	axable interest	• •		. 21		
if required.	3a	Qualified dividends .	3a				Ordinary dividen			. 31		
	4a		4a				axable amount			. 41		
Standard	5a	Pensions and annuities					axable amount			. 5ł		
 Deduction for – Single or 	6a	Social security benefits	6a			bТ	axable amount			. 6ł	,	
Married filing separately,	С	If you elect to use the lur		n method,	check here							
\$13,850	7	Capital gain or (loss). Att	ach Schedule D	if require	d. If not req	uired	, check here					
 Married filing jointly or 	8	Additional income from S	Schedule 1, line	10						. 8		
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b,	5b, 6b, 7, and 8	3. This is y	our total in	com	e			. 9		78,505.
\$27,700	10	Adjustments to income f	rom Schedule 1	, line 26						. 10)	
 Head of household, 	11	Subtract line 10 from line	9. This is your	adjusted	gross inco	me				. 1'		78,505.
\$20,800 • If you checked г	12	Standard deduction or	itemized deduc	ctions (fro	m Schedule	e A)				. 12	2	27,700.
any box under	13	Qualified business incom	ne deduction fro	m Form 8	995 or Forn	n 899	95-A			. 10	3	
Standard Deduction,	14	Add lines 12 and 13 .								. 14	1	27,700.
see instructions.	15	Subtract line 14 from line	e 11. If zero or le	ess, enter	-0 This is	your	taxable incom	е.		. 1	5	50,805.

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

Form **1040** (2023)

Form 1040 (2023)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		. 16	5,659.
Credits	17	Amount from Schedule 2, lin	e3					. 17	
	18	Add lines 16 and 17						. 18	5,659.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			. 19	1,000.
	20	Amount from Schedule 3, lin	e8					. 20	
	21	Add lines 19 and 20						. 21	1,000.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. 22	4,659.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			. 23	0.
	24	Add lines 22 and 23. This is	your total tax					. 24	4,659.
Payments	25	Federal income tax withheld	from:						
-	а	Form(s) W-2				25a	8,7	22.	
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						. 25d	8,722.
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			
	29	American opportunity credit	from Form 8863	, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31					edits .	. 32	
	33	Add lines 25d, 26, and 32. T							8,722.
Refund	34	If line 33 is more than line 24						. 34	4,063.
neruna	35a	Amount of line 34 you want	-				•	□ 35a	4,063.
Direct deposit?	b	Routing number 1 1 1				X Checking	Savi		
See instructions.	ď	Account number 4 8 8							
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24							
You Owe	57	For details on how to pay, ge				s		. 37	
	38	Estimated tax penalty (see in							
Third Party		you want to allow another	,						
Designee		tructions	•				es. Comp	lete below.	× No
Decignee	Des	signee's		Phone		_	•	identification	_
	nar			no.			number (I	PIN)	
Sign		der penalties of perjury, I declare th							
Here	Dei	ief, they are true, correct, and com	plete. Declaration of	of preparer (otne	r than taxpayer) is I	based on all in	ormation of		
	Υοι	ur signature		Date	Your occupation	n			nt you an Identity PIN, enter it here
Joint return?					IT			(see inst.)	in, enter it here
See instructions.	Sp	ouse's signature. If a joint return, k	ooth must sign.	Date	Spouse's occup	ation		If the IRS se	nt your spouse an
Keep a copy for	op.		e ar maer eigin	2410					ection PIN, enter it here
your records.					HOME MAK	ER		(see inst.)	
	Pho	one no. (945)240-902	9	Email address	UMASARASW	ATHI@GMAI	L.COM		
	Pre	parer's name	Preparer's signat	ure		Date	PT	IN	Check if:
Paid	VENK	ATA SAI PAVAN KUMAR DUDIPALLI	VENKATA SAI	PAVAN KUM	AR DUDIPALI	I	P0	2470833	Self-employed
Preparer	Firr	n's name GLOBAL TAX	KES LLC					Phone no.	(678)965-9522
Use Only	Firr	n's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816			Firm's EIN	88-2145487
Go to www.irs.go	v/Form	1040 for instructions and the late	st information.		BAA	REV 01/21/2	4 PRO		Form 1040 (2023)

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

OMB No. 1545-0074

Attach to	Form	1040.	1040-SR.	or 1040-NR.
/		,		01 10 10 1111

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

20**23** Attachment Sequence No. **47**

ons and	l the	latest	information.	

Internal Revenue Service Name(s) shown on return

1

Department of the Treasury

Name(s	s) shown on return	Your	social se	ecurity number
JMA	SARAVANAKUMAR & SARAVANA KUMAR RAMARAJ	796-	-60-7	675
Par	rt 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	78,505.
2a	Enter income from Puerto Rico that you excluded			
b	Enter the amounts from lines 45 and 50 of your Form 2555	0.		
c	Enter the amount from line 15 of your Form 4563			
d	Add lines 2a through 2c	.	2d	0.
3	Add lines 1 and 2d	.	3	78,505.
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	2		
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resid	ent		
	alien. Also, do not include anyone you included on line 4.			
7	Multiply line 6 by \$500		7	1,000.
8	Add lines 5 and 7	·	8	1,000.
9	Enter the amount shown below for your filing status.			
	• Married filing jointly—\$400,000			
	• All other filing statuses— $200,000 \int \dots $	•	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		10	
11	example, if the result is \$425, enter \$1,000; if the result is $1,025$, enter \$2,000, etc.	- 1	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	1,000.
	○ 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.	dit.		
	Yes. Subtract line 11 from line 8. Enter the result.			
13	Enter the amount from Credit Limit Worksheet A	-	13	
13 14	Enter the amount from Credit Limit worksneet A	•	13	5,659.
14	Enter the smaller of fine 12 of fine 13. This is your child tax creat and creat for other dependents Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.	· [14	1,000.
			1.J. 4	
	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	K thro	ougn 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	Number of qualifying children under 17 with the required social security number: x \$1,600.		
	Enter the result. If zero, stop here; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	
	TIP: The number of children you use for this line is the same as the number of children you used for line 4.		
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots$	20	
	Next. On line 16b, is the amount \$4,800 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
	Otherwise, go to line 21.		
Part	, , , , , , , , , , , , , , , , , , ,	IS OT H	vuerto 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	
23 26	Enter the larger of line 20 or line 25	23	
20	Next, enter the smaller of line 17 or line 26 on line 27.		
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	
	· · · · · · · · · · · · · · · · · · ·		812 (Form 1040) 2023

	0067	Paid Preparer's Due Diligence Checklist	I	OMB	No. 1545	-0074
	B867	Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC), Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and			or tax yea 20 _23	
	nent of the Treasury Revenue Service	Credit for Other Dependents (ODČ)), 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 Go to www.irs.gov/Form8867 for instructions and the latest information.	-ss.	Attach Seque	nment ence No.	70
Taxpaye	er name(s) shown or	return Taxpayer ider	tification	number		
		JMAR & SARAVANA KUMAR RAMARAJ796-60				
•	r's name	Preparer tax in		ion numb	oer	
		VAN KUMAR DUDIPALLI P024708	833			
Part		gence Requirements				
		propriate box for the credit(s) and/or HOH filing status claimed on the return and cor ned (check all that apply).	·	the rela		arts I-\ HOH
1		lete the return based on information for the applicable tax year provided by the taxp	ayer	Yes	No	N/A
	•	obtained by you?	·	×		
2	worksheets fo 1040) instruct	claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/0 und in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 8812 (F ions, and/or the AOTC worksheet found in the Form 8863 instructions, or your hat provides the same information, and all related forms and schedules for each c	orm own	X		
3		<i>i</i> the knowledge requirement? To meet the knowledge requirement, you must do bo	th of			
	Interview the	taxpayer, ask questions, and contemporaneously document the taxpayer's response at the taxpayer is eligible to claim the credit(s) and/or HOH filing status.	es to			
		mation to determine that the taxpayer is eligible to claim the credit(s) and/or HOH to figure the amount(s) of any credit(s)	-	X		
4	information re	nation provided by the taxpayer or a third party for use in preparing the return asonably known to you, appear to be incorrect, incomplete, or inconsistent? (If " Y ons 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	you asked, wh	emporaneously document your inquiries? (Documentation should include the quest nom you asked, when you asked, the information that was provided, and the impact d on your preparation of the return.)	t the			
5	keep a copy o applicable wo 8867 and any taxpayer that the amount(s)	y the record retention requirement? To meet the record retention requirement, you r f your documentation referenced in question 4b, a copy of this Form 8867, a copy of 'ksheet(s), a record of how, when, and from whom the information used to prepare F applicable worksheet(s) was obtained, and a copy of any document(s) provided by you relied on to determine eligibility for the credit(s) and/or HOH filing status or to fi of the credit(s)	any orm the	X		
	List those doc	uments provided by the taxpayer, if any, that you relied on:	_			
6	credit(s) and/c	e taxpayer whether he/she could provide documentation to substantiate eligibility for or HOH filing status and the amount(s) of any credit(s) claimed on the return if his red for audit?		X		
7		e taxpayer if any of these credits were disallowed or reduced in a previous year?	. †	X		
	-	e disallowed or reduced, go to question 7a; if not, go to question 8.)				
а		ete the required recertification Form 8862?	. [
8	If the taxpayer	is reporting self-employment income, did you ask questions to prepare a complete ule C (Form 1040)?	and .			

For Paperwork Reduction Act Notice, see separate instructions.

REV 01/21/24 PRO

Form 8867 (Rev. 11-2023)

Form 88	867 (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?			
c	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	СТС,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes X	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	X		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?	X		
Part		, go to	Part \	/.)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the que tuition and related expenses for the claimed AOTC?	alified	Yes	No
Part	V Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing statu	s, go to	o Part	VI.)
14 Part	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the ta and provided more than half of the cost of keeping up a home for the year for a qualifying person? Eligibility Certification	x year 	Yes	No
T CIT C	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 responsion your notes, review adequate information to determine if the taxpayer is eligible to claim the credit status and to figure the amount(s) of the credit(s);	nses on s) and/c	the ret or HOH	urn or filing
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this check credit(s) claimed and HOH filing status, if claimed;	list for a	iny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 Document Retention.	67 instr	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			

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

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

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

REV 01/21/24 PRO

Form 8867 (Rev. 11-2023)