(Rev. January 2021)

Department of the Treasury

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

OMB No. 1545-0074

| Internal Revenue Service Go to www.irs.gov/Formation. | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| Submission Identification Number (SID) 222496202409509282ba | | | |
| Taxpayer's name | Social security | y number | |
| SREENIVASULU GODLAVEETY | 818-34- | -2398 | |
| Spouse's name | | al security number | — |
| VINEELA UTTARADI | 990-90- | -8146 | |
| Part I Tax Return Information — Tax Year Ending December 31, 2023 (En | nter year you ar | re authorizing.) | |
| Enter whole dollars only on lines 1 through 5. | , , | <u> </u> | |
| Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | |
| 1 Adjusted gross income | | 1 62,57 | 70. |
| 2 Total tax | | | 0. |
| 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 5,76 | 52. |
| 4 Amount you want refunded to you | | 4 5,76 | |
| 5 Amount you owe | | 5 | |
| Part II Taxpayer Declaration and Signature Authorization (Be sure you get an | | of your return) | |
| Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amen my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I a return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trat to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termin payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent. | above are the amonsmitter, or electron rejection of the trace U.S. Treasury are indicated in the talitution to debit the inate the authorizal requests must be the processing of the payment. I furth | nunts from the income inic return originator (Eansmission, (b) the read its designated Finar ax preparation software entry to this account ition. To revoke (cancereceived no later that the electronic payment her acknowledge that | e tax ERO) ason incial re for This cel) a an 2 ent of t the |
| Taxpayer's PIN: check one box only | 4 | 2 3 9 8 | |
| X I authorize GLOBAL TAXES LLC to enter or general | ate mv PIN 🖳 | | my |
| ERO firm name | | i't enter all zeros | |
| 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 a if you are entering your own PIN and your return is filed using the Practitioner PIN m below. | | | |
| Your signature ▶ Date ▶ | - | | |
| Spouse's PIN: check one box only | | | |
| ▼ I authorize GLOBAL TAXES LLC to enter or general statements to enter or general statements. | ate my PIN 0 | 8 1 4 6 as | my |
| ERO firm name | Ent | er five digits, but | |
| signature on the income tax return (original or amended) I am now authorizing. | don | 't enter all zeros | |
| I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN m below. | | | |
| Spouse's signature ▶ Date ▶ | • | | |
| Practitioner PIN Method Returns Only—continue be | low | | |
| 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. | | 6 6 1 9 8 9 er all zeros | |
| I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am some requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers | ubmitting this retu | rn in accordance with | |
| ERO's signature ▶ Date I | | | |
| ERO Must Retain This Form — See Instructions | | | |
| Don't Submit This Form to the IRS Unless Requested 1 | | | |

Form **9325**

Department of the Treasury - Internal Revenue Service

(January 2017)

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

| Thank y | ou for participating in IRS <i>e-file</i> . | |
|----------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| | 818-34-2398 | |
| Taxpayeı | r name SREENIVASULU GODLAVEETY & VINEELA UTTARADI | |
| Тахрауеі | r address (optional) | |
| 5663 B | IRCH RIVER TRAIL | |
| WESLEY | CHAPEL, FL 33545 | |
| 1. X | Your federal income tax return for 2023 | was filed electronically with the Andover |
| | | services were provided by GLOBAL TAXES LLC |
| 2. X | | ng a Personal Identification Number (PIN) as your electronic tronic Return Originator (ERO) to enter or generate a PIN is 222496202409509282ba. |
| 3. | Your return was accepted on | Allow 4 to 6 weeks for the processing of your return. |
| | | ion on your return may be reduced or disallowed due to a |
| 4. | Your electronic funds withdrawal payment request v | vas accepted for processing. |
| 5. | Your electronic funds withdrawal payment request v Tax" section. | vas not accepted for processing. Refer to the "If You Owe |
| 6. | Your Form 4868, Application for Automatic Extension accepted on The Suris | n of Time to File U.S. Individual Income Tax Return, was bmission ID assigned to your extension |

DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at *www.irs.gov*, or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to <code>www.irs.gov</code> and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

BAA REV 03/07/24 PRO Form **9325** (Rev. 1-2017)

The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to www.irs.gov/e-pay.

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to www.irs.gov. You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.

Catalog Number 12901K BAA www.irs.gov REV 03/07/24 PRO Form **9325** (Rev. 1-2017)

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



| £1040 | | artment of the Treasury—Internal Revenue Servi S. Individual Income Ta) | | ırn 2 | 20 2 | 3 | OMB No. 1545 | -0074 | IRS Use 0 | Only— | Do not w | rite or stap | ole in this spa | ace. |
|------------------------------|---------------|------------------------------------------------------------------------------------|------------|---------------|---------------|--------|-----------------|---------|---------------------|---------|----------|--------------|-------------------------|-------------|
| For the year Jan | n. 1–Dec | c. 31, 2023, or other tax year beginning | | | , 2023, end | ing | | | , 20 | 5 | See sep | oarate ir | nstruction | ıs. |
| Your first name | e and m | iddle initial | Last nan | ne | | | | | | ١ | our so | cial secu | urity numb | oer |
| SREENIV | ASUL | U | GODL | AVEETY | | | | | | | 818 | 34 | 2398 | |
| - | | s first name and middle initial | Last nan | | | | | | | 5 | Spouse's | s social | security nu | umbe |
| VINEELA | | | UTTAI | RADI | | | | | | | 990 | 90 | 8146 | |
| Home address | (numb | er and street). If you have a P.O. box, see | instructio | ns. | | | | A | Apt. no. | F | Presider | ntial Elec | ction Cam | paig |
| 5663 BI | RCH | RIVER TRAIL | | | | | | | | | Check h | ere if yo | ou, or your | r |
| City, town, or | oost off | ice. If you have a foreign address, also co | mplete sp | aces belov | v. | Sta | te | ZIP c | ode | - 1 | • | ٠, | ointly, war | |
| WESLEY | СНАР | EL | | | | FI | 1 | 335 | 45 | | • | | d. Checkir ot change | _ |
| Foreign countr | y name | | F | oreign prov | /ince/state/o | count | у | Foreig | gn postal co | | | or refur | nd. | pous |
| Filing Status | <u> </u> | Single | | | | | Head of he | ouseh | old (HOH) |) | | | | |
| _ | | Married filing jointly (even if only o | ne had ir | ncome) | | | | | , | , | | | | |
| Check only one box. | | Married filing separately (MFS) | | , | | | ☐ Qualifying | surviv | ing spous | se (Q | (SS) | | | |
| 00 20 | lf v | you checked the MFS box, enter the | name of | f your spo | use. If you | ı che | | | | | , | ld's nan | ne if the | |
| | | ualifying person is a child but not you | | | , | | | | , - | | | | | |
| | A | | -: (| | | | | | | /1 | · | | | |
| Digital Assets | | ny time during 2023, did you: (a) rec nange, or otherwise dispose of a dig | • | | | | | - | | • | | ∏Ye | s 🛛 No | 0 |
| | | neone can claim: You as a de | | | | | a dependent | ::): (3 | se manuc | LIOIIS |)·.) | | 5 🔼 🔣 | |
| Standard Deduction | _ | Spouse itemizes on a separate retur | • | | • | | • | | | | | | | |
| Deduction | | Spouse iternizes on a separate retur | ii or you | were a ut | iai-status d | allell | | | | | | | | |
| Age/Blindnes | s You | : Were born before January 2, 1 | 959 | Are blin | d Spo | use | : Was bor | n befo | ore Janua | ry 2, | 1959 | ls | blind | |
| Dependent | s (see | instructions): | | (2) So | cial security | | (3) Relationsh | ip (4 |) Check the | | | • | | |
| If more | (1) F | irst name Last name | | n | umber | | to you | | Child ta | x cred | dit | Credit for | other deper | ndent |
| than four | | | | | | | | | | | | | | |
| dependents, see instruction | ıs —— | | | | | | | | | | | | | |
| and check | . — | | | | | | | | <u>L</u> | <u></u> | | | Щ_ | |
| here L | | | | | | | | | | | | | | |
| Income | 1a | Total amount from Form(s) W-2, b | • | | , | | | | | | 1a | | 59,86 | <u> 58.</u> |
| Attach Form(s) | b | Household employee wages not re | • | | | | | | | | 1b | | | |
| W-2 here. Also | С | Tip income not reported on line 1a | • | | | | | | | | 1c | | | |
| attach Forms W-2G and | d | Medicaid waiver payments not rep | | | • | nstru | ctions) | | | | 1d | | | |
| 1099-R if tax | е | Taxable dependent care benefits f | | | | | | | | | 1e | | | |
| was withheld. | f | Employer-provided adoption bene | fits from | Form 883 | 39, line 29 | • | | | | | 1f | | | |
| If you did not get a Form | g | Wages from Form 8919, line 6 . | | | | | | | | | 1g | | | |
| W-2, see | h | Other earned income (see instruct | , | | | | | · · | | | 1h | | | 0. |
| instructions. | i | Nontaxable combat pay election (s | see instru | uctions) . | | | <u>li</u> | | | | | | FO 04 | C O |
| | <u>z</u> | Add lines 1a through 1h | | | | | | | | | 1z | | 59,86 | <u>.</u> |
| Attach Sch. B if required. | 2a | · — | 2a | | | | axable interest | | | | 2b | | | |
| equileu. | <u>3a</u> | | 3a | | | | rdinary divider | | | | 3b | | | |
| Standard | 4a | | 4a | | | | axable amoun | | | | 4b | | | |
| Deduction for— | 5a | - | 5a | | | | axable amoun | | | | 5b | | | |
| Single or Married filing | 6a | , | 6a | | | | axable amoun | t | | | 6b | | | |
| separately, | _ c | If you elect to use the lump-sum e | | | | • | , | | | . 닏 | | | 0 5 | 0.0 |
| \$13,850 Married filing | 7 | Capital gain or (loss). Attach Sche | | • | | | | | | . Ш | 7 | | 2,70 | JZ. |
| jointly or Qualifying | 8 | Additional income from Schedule | | | | | | | | | 8 | | <u> </u> | 7.0 |
| surviving spouse, | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7 | | - | | | | | | | 9 | - | 62,57 | /U. |
| \$27,700 Head of | 10 | Adjustments to income from Sche | • | | | | | | | | 10 | | | 7.0 |
| household, \$20,800 | 11 | Subtract line 10 from line 9. This is | • | - | | | | | | | 11 | | 62,57 | |
| If you checked | 12 | Standard deduction or itemized | | | | , | | | | | 12 | | 27,70 | <u>JU.</u> |
| any box under Standard | 13 | Qualified business income deduct | | | | | | | | | 13 | - | 0.7. 7. | 0.0 |
| Deduction, see instructions. | 14 | Add lines 12 and 13 | | | | | | | | | 14 | - | 27,70 | |
| | , , , | | | | | | | | | | | | | |

| Form 1040 (202) | 3) | | | | | _ | | Page 2 |
|-------------------------------------------------------|---------|---------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------|------------------------|------------|----------|---------------------------------------------|
| Tax and | 16 | Tax (see instructions). Check if any from | Form(s): 1 🗌 881 | 4 2 4972 | з 🗌 | | 16 | 3,745. |
| Credits | 17 | Amount from Schedule 2, line 3 . | | | | | 17 | |
| | 18 | Add lines 16 and 17 | | | | | 18 | 3,745. |
| | 19 | Child tax credit or credit for other depe | endents from Sched | lule 8812 | | | 19 | |
| | 20 | Amount from Schedule 3, line 8 . | | | | | 20 | 3,745. |
| | 21 | Add lines 19 and 20 | | | | | 21 | 3,745. |
| | 22 | Subtract line 21 from line 18. If zero or | less, enter -0 | | | | 22 | 0. |
| | 23 | Other taxes, including self-employmen | t tax, from Schedul | e 2, line 21 | | | 23 | 0. |
| | 24 | Add lines 22 and 23. This is your total | tax | | | | 24 | 0. |
| Payments | 25 | Federal income tax withheld from: | | | | | | |
| - | а | Form(s) W-2 | | | 25a | 5,762. | | |
| | b | Form(s) 1099 | | | 25b | | | |
| | С | Other forms (see instructions) | | | 25c | | | |
| | d | Add lines 25a through 25c | | | | | 25d | 5,762. |
| If you have a | 26 | 2023 estimated tax payments and amo | ount applied from 20 | 022 return | | | 26 | |
| qualifying child, | 27 | Earned income credit (EIC) | | | 27 | | | |
| attach Sch. EIC. | 28 | Additional child tax credit from Schedule | 8812 | | 28 | | | |
| | 29 | American opportunity credit from Form | n 8863, line 8 . . | | 29 | | | |
| | 30 | Reserved for future use | | | 30 | | | |
| | 31 | Amount from Schedule 3, line 15 . | | | 31 | | | |
| | 32 | Add lines 27, 28, 29, and 31. These are | e your total other p | ayments and refu | ndable credits | | 32 | |
| | 33 | Add lines 25d, 26, and 32. These are y | our total payments | | | | 33 | 5,762. |
| Refund | 34 | If line 33 is more than line 24, subtract | line 24 from line 33 | . This is the amour | nt you overpaid | | 34 | 5,762. |
| | 35a | Amount of line 34 you want refunded | to you. If Form 888 | 8 is attached, chec | k here | 🗆 | 35a | 5,762. |
| Direct deposit? | b | Routing number 0 6 3 1 0 0 | | ,, <u> </u> | Checking | Savings | | |
| See instructions. | d | Account number 8 9 8 1 3 3 | 3 1 0 8 7 | 8 0 | | | | |
| | 36 | Amount of line 34 you want applied to | your 2024 estimat | ed tax | 36 | | | |
| Amount | 37 | Subtract line 33 from line 24. This is th | | | | | | |
| You Owe | | For details on how to pay, go to www.i | | | 1 1 | | 37 | |
| | 38 | Estimated tax penalty (see instructions | | | 38 | | | |
| Third Party | | you want to allow another person to | | | _ | Complete | helow | ⊠ No |
| Designee | | signee's | Phone | | | sonal iden | | ⊠ NO |
| | | me | no. | , | | ber (PIN) | inoution | |
| Sign | | der penalties of perjury, I declare that I have ex lief, they are true, correct, and complete. Decla | | | | | | , |
| Here | Yo | ur signature | Date | Your occupation | | If th | e IRS se | nt you an Identity |
| | | | | | | | | IN, enter it here |
| Joint return? | | | | QA MANAGER | | | e inst.) | |
| See instructions. Keep a copy for your records. | Sp | ouse's signature. If a joint return, both must s | ign. Date | Spouse's occupation HOME MAKER | | Ide | | nt your spouse an ection PIN, enter it here |
| | ———Ph | one no. (813)370-8072 | Email address | SREENIGODLAV | | OM | | |
| | | eparer's name Preparer's | | 21.11.1002111 | Date | PTIN | | Check if: |
| Paid | VENE | KATA SAI PAVAN KUMAR DUDIPALLI VENKATA | . SAI PAVAN KUN | MAR DUDIPALIT | | P0247 | 0833 | Self-employed |
| Preparer | | m's name GLOBAL TAXES LLO | | | 1 | | | 678)965-9522 |
| Use Only | | m's address 245 ROONEY CT E | | J 08816 | | | n's EIN | 88-2145487 |
| | <u></u> | 40406 1 1 11 11 11 11 11 11 11 | | | | 1 | | = 1010 (2222) |

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

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. 03

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

SREENIVASULU GODLAVEETY & VINEELA UTTARADI

Your social security number 818-34-2398

| Par | 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 | l, lin | 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 | | | | |
| b | Credit for prior year minimum tax. Attach Form 8801 | 6b | | | | |
| С | Adoption credit. Attach Form 8839 | 6с | | | | |
| 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 | 3,745. | | | |
| 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 | 6 I | | | | |
| 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 | 3,74 | 5. |
| 8 | Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 1 1040-NR, line 20 | 040, | 1040-SR, or | 8 | 3,74 | 5. |
| | | | | | | |

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 | 13z | 14 | |
| 15 | Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31 | | 15 | |

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Go to www.irs.gov/ScheduleD for instructions and the latest information. OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service Name(s) shown on return Your social security number 818-34-2398 SREENIVASULU GODLAVEETY & VINEELA UTTARADI Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. line 2. column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 54,200. 51,671. 173. 2,702. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 2,702. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) Proceeds to gain or loss from from column (d) and Cost Form(s) 8949, Part II, (sales price) (or other basis) combine the result line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form

lines below. This form may be easier to complete if you round off cents to whole dollars. 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 2,702. 16 Combine lines 7 and 15 and enter the result 16 • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . . . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

8949

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074

Attachment Sequence No. 12A

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

SREENIVASULU GODLAVEETY & VINEELA UTTARADI

Social security number or taxpayer identification number

818-34-2398

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

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

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

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

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

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

| (C) Short-term transactions | not reported | to you on F | orm 1099-B | · | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------|-------------------------------------|--------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| 1 (a) Description of property | (b) Date acquired | (c) Date sold or | (d) Proceeds | (e) Cost or other basis See the Note below | If you enter an enter a co | any, to gain or loss amount in column (g), ode in column (f). arate instructions. | (h) Gain or (loss) Subtract column (e) |
| (Example: 100 sh. XYZ Co.) | (Mo., day, yr.) | disposed of (Mo., day, yr.) | (sales price) (see instructions) | and see Column (e) in the separate instructions. | (f) Code(s) from instructions | (g) Amount of adjustment | from column (d) and combine the result with column (g). |
| WEBULL FINANCIAL LLC | 01/01/23 | 12/31/23 | 50,441. | 48,183. | | | 2,258. |
| APEX CLEARING | 01/01/23 | 12/31/23 | 3,759. | 3,488. | W | 173. | 444. |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| 2 Totals. Add the amounts in column negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked) or line 3 (if Box A above is checked). | al here and ince is checked), lir | lude on your ne 2 (if Box B | 54.200. | 51.671. | | 173. | 2.702. |

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

Clean Vehicle Credits

OMB No. 1545-2137

Department of the Treasury Internal Revenue Service

Attach to your tax return. Attachment Sequence No. **69** Go to www.irs.gov/Form8936 for instructions and the latest information. Name(s) shown on return Identifying number

| SRE | ENIVASULU GODLAVEETY & VINEELA UTTARADI | 818-3 | 4-23 | 98 |
|-------|------------------------------------------------------------------------------------------------------|------------|----------|---------------------|
| 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 | | | | |
| 1a | Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR 1a 62 | 2,570. | | |
| b | Enter any income from Puerto Rico you excluded | , | | |
| С | Enter any amount from Form 2555, line 45 | | | |
| d | Enter any amount from Form 2555, line 50 | | | |
| е | Enter any amount from Form 4563, line 15 | | | |
| 2 | Add lines 1a through 1e | | 2 | 62,570. |
| 3a | | ,291. | | |
| b | Enter any income from Puerto Rico you excluded | | | |
| С | Enter any amount from Form 2555, line 45 | | | |
| d | Enter any amount from Form 2555, line 50 | | | |
| е | Enter any amount from Form 4563, line 15 | | | |
| 4 | Add lines 3a through 3e | | 4 | 49,291. |
| 5 | Enter the smaller of line 2 or line 4 | | 5 | 49,291. |
| Part | Credit for Business/Investment Use Part of New Clean Vehicles | | | , |
| | Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$150,000 (\$30 | 0,000 if m | narried | filing jointly or a |
| | qualifying surviving spouse; \$225,000 if head of household). | • | | <i>.</i> |
| 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 | <u> </u> |
| 8 | Business/investment use part of credit. Add lines 6 and 7. Partnerships and S corporations, sto | | | |
| | and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1 | | 8 | 0. |
| Part | Credit for Personal Use Part of New Clean Vehicles | - 1 | | <u> </u> |
| | Note: You can't claim the Part III credit if Part I, line 5, is more than \$150,000 (\$300, | 000 if ma | arried ' | filing jointly or a |
| | qualifying surviving spouse; \$225,000 if head of household). | | | <i>3 ,</i> , |
| 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 | 3,745. |
| 11 | Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions) | | 11 | 377131 |
| 12 | Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't claim the perso | | | |
| | part of the credit | | 12 | 3,745. |
| 13 | Personal use part of credit. Enter the smaller of line 9 or line 12 here and on Schedule 3 | (Form | | 3,743. |
| | 1040), line 6f. If line 12 is smaller than line 9, see instructions | | 13 | 3,745. |
| Part | | | | 377131 |
| | Note: You can't claim the Part IV credit if Part I, line 5, is more than \$75,000 (\$150,000) | 000 if ma | arried 1 | ilina iointly or a |
| | qualifying surviving spouse; \$112,500 if head of household). | | | 3, , , |
| 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 | T T | 15 | |
| 16 | Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions) | F | 16 | |
| 17 | Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't claim the Part IV | + | 17 | |
| 18 | Enter the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040), line 6m. If line | | | |
| | smaller than line 14, see instructions | | 18 | |
| Part | | - [| .0 | |
| 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 instructions | + | 20 | |
| 21 | Add lines 19 and 20. Partnerships and S corporations, stop here and report this amount on Sc | | | |
| | K. All others, report this amount on Form 3800, Part III, line 1aa | | 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.

| SRE | ENIVASULU GODLAVEETY & VINEELA UTTARADI | 818 | -34-239 | 98 | |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------|------------|--------|
| Part | Vehicle Details | | | | |
| 1a | Year | | 2023 | | |
| b | Make | TES | LA | | |
| С | Model | Y | | | |
| 2 | Vehicle identification number (VIN) (see instructions) 5 Y J 3 E 1 E A 6 | P | F 5 6 | 0 8 | 9 6 |
| 3 | Enter date vehicle was placed in service (MM/DD/YYYY) | 06/ | 15/2023 | 3 | |
| 4 | Was the vehicle used primarily outside the United States? Answer "No" if it was but an exception ☐ Yes. Stop here. You can't claim a credit amount for a vehicle used primarily outside the Unix No. | | | instructio | ns. |
| 5 | Does the VIN entered on line 2 belong to a new clean vehicle placed in service during the tax definitions. ☑ Yes. Go to Part II. ☐ No. Go to line 6. | year? | See instru | ctions fo | r |
| 6 | Does the VIN entered on line 2 belong to a previously owned clean vehicle acquired after 202 the tax year? See instructions for definitions. Yes. Go to Part IV. No. Go to line 7. | 2 and | placed in | service o | during |
| 7 Part | Does the VIN entered on line 2 belong to a qualified commercial clean vehicle 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 | | · | | ce |
| 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 to resale. | | | | |
| 9 | Tentative credit amount (see instructions) | 9 | | 7,5 | 00. |
| 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 | | 7,5 | 00. |
| | | | | | |

| 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 vehic | le fror | 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 return | 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. |
| 10 | Waximum vehicle credit amount | 10 | 4,000. |
| 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 | V Credit Amount for Qualified Commercial Clean Vehicle | | |
| 18a | Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exceentities discussed in the instructions applies. Yes. No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception | | |
| b | 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 to resale. | | _ |
| С | Is the vehicle also powered by gas or diesel? See instructions. Yes. No. | ı | |
| 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 | |
| | M III I II OA I 450((0.45) [000((0.00) (1) II | | |
| 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 | |
| 00 | , , | | |
| 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

| SREI | | 818-34-239 | | | | | |
|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|---------|----|-----------------|--|--|
| repare | eparer's name Preparer tax identifica | | | | | | |
| | ENKATA SAI PAVAN KUMAR DUDIPALLI P02470833 | | | | | | |
| Part | • | | | | | | |
| | check the appropriate box for the credit(s) and/or HOH filing status claimed on the return benefit(s) claimed (check all that apply). \Box EIC $\overline{\mathbf{x}}$ CTC/ACTC | | the rel | | arts I–V HOH | | |
| 1 | Did you complete the return based on information for the applicable tax year provided by or reasonably obtained by you? | the taxpayer | Yes | No | N/A | | |
| 2 | If credits are claimed on the return, did you complete the applicable EIC and/or CTC worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 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 for claimed? | e 8812 (Form or your own | X | | | | |
| 3 | Did you satisfy the knowledge requirement? To meet the knowledge requirement, you muthe following. | st do both of | | | | | |
| | • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's 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/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 t information reasonably known to you, appear to be incorrect, incomplete, or inconsiste answer questions 4a and 4b. If " No ," go to question 5.) | nt? (If " Yes ," | | X | | | |
| а | Did you make reasonable inquiries to determine the correct, complete, and consistent infor | mation? . | | | | | |
| b | Did you contemporaneously document your inquiries? (Documentation should include t you asked, whom you asked, when you asked, the information that was provided, and the information had on your preparation of the return.) | ne impact the | | | | | |
| 5 | Did you satisfy the record retention requirement? To meet the record retention requirement keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a 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) pro taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing statuthe amount(s) of the credit(s) | a copy of any prepare Form ovided by the s or to figure | × | | | | |
| | List those documents provided by the taxpayer, if any, that you relied on: | | | | | | |
| 6 | Did you ask the taxpayer whether he/she could provide documentation to substantiate eliquic credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return is selected for audit? | | X | | | | |
| 7 | Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous ye | ear? | X | | | | |
| а | (If credits were disallowed or reduced, go to question 7a; if not, go to question 8.) Did you complete the required recertification Form 8862? | | | | | | |
| 8 | If the taxpayer is reporting self-employment income, did you ask questions to prepare a correct Schedule C (Form 1040)? | complete and | | | | | |

| orm 88 | 367 (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? | 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? | × | | |
| Part | | | ∖ Part \ | // |
| 13 | Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qu 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 an to | ∟ <u> </u> | VI) |
| 14 | Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax and provided more than half of the cost of keeping up a home for the year for a qualifying person? | | Yes | No |
| Part | | | | |
| . a. 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 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/o | the retor HOH | urn or filing |
| | B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checkled credit(s) claimed and HOH filing status, if claimed; | list for a | ıny 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. | | | |
| | 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). | r's eligib | ility for | the |
| | A record of how, when, and from whom the information used to prepare this form and the applica obtained. | ble wor | ksheet(| s) was |
| | A record of any additional information you relied upon, including questions you asked and the tax determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount | payer's 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 |
| | , | Form 88 | | 11-2023 |