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



1040		artment of the Treasury-Internal Revenue Servi		urn 2	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.
For the year Jai	n. 1–De	c. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20		See sep	oarate i	instructions.
Your first name	and m	iddle initial	Last nar	me							Your so	cial sec	urity number
SRIRAM 1	K		NALL.	ANIDGAI	L						042	13	5423
		s first name and middle initial	Last nar										security number
DEEPIKA			SAMU	DRALA							963	95	0999
Home address	(numb	er and street). If you have a P.O. box, see	instructio	ons.				A	Apt. no.				ection Campaign
625 PARI	KWAY	BLVD						1	1024				ou, or your
City, town, or p	oost off	ice. If you have a foreign address, also co	mplete sp	oaces below	'.	Sta	te	ZIP c	ode			0	jointly, want \$3 nd. Checking a
COPPELL						TX	Z.	750	19		U		not change
Foreign countr	y name		F	oreign provi	nce/state/o	count	ry	Foreig	gn postal o	ode	your tax	or refu	_
Filing Status	s [Single					Head of he	ouseh	old (HOI	 ⊣)			
Check only		Married filing jointly (even if only or	ne had ir	ncome)									
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spo	use (0	QSS)		
	lf y	you checked the MFS box, enter the	name o	f your spou	use. If you	ı che	cked the HOH	or Q	SS box,	enter	the chi	ld's na	me if the
	qι	ıalifying person is a child but not you	ır depen	dent:									
Digital	At a	ny time during 2023, did you: (a) rec	eive (as a	a reward. a	ward. or i	pavn	nent for prope	rtv or	services): or ((b) sell.		
Assets		nange, or otherwise dispose of a digi										□ Ye	es 🛛 No
Standard		neone can claim: You as a de					a dependent	, .			,		
Deduction		Spouse itemizes on a separate retur	n or you	were a dua	al-status a	alien							
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind	Spo	use	: Was bor	n befo	ore Janua	arv 2	. 1959		s blind
		(see instructions):			(2) Social security		(3) Relationsh	- 1			-		(see instructions):
-		First name Last name			ımber		to you	ib ,	Child t				or other dependents
If more than four	SAI	OGUNA NALLANIDGAL		963-9	5-102	9	Son						X
dependents,	SAI	OBHAAV NALLANIDGAL			95-105		Son						X
see instruction and check	s												
here]												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructio	ns)						1a		105,368.
Attach Form(s)	b	Household employee wages not re	eported o	on Form(s)	W-2						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	rom For	m 2441, lin	ie 26 .						1e		
was withheld.	f	Employer-provided adoption bene	fits from	Form 883	9, line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .									1g		
get a Form W-2, see	h	Other earned income (see instruction	,					ι.			1h	_	0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions) .			<u>1</u> i						105 060
	z	Add lines 1a through 1h									1z		105,368.
Attach Sch. B	2a		2a				axable interest						234.
if required.	3a		3a				rdinary divider						
Standard	4a		4a				axable amoun						
Deduction for—	5a	-	5a				axable amoun						
Single or Married filing	6a	,	6a				axable amoun	t			6b		
separately,	_ C	If you elect to use the lump-sum e		•		•	,						
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche								. L	J 7		7 100
jointly or Qualifying	8	Additional income from Schedule	•								8		-7 , 127.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•							9		98,475.
\$27,700 • Head of	10	Adjustments to income from Sche									10		00 455
household, \$20,800	11	Subtract line 10 from line 9. This is	•	-							11		98,475.
If you checked	12	Standard deduction or itemized									12		27,700.
any box under Standard	13	Qualified business income deducti									13		07 700
Deduction, see instructions.	14	Add lines 12 and 13									14		27 , 700.
	15	SUPERGOT UPO 1/1 trom lino 11 lt zor	O OF IOCO	ontor ()	I DIC IC V	CALIF #	avania maam				16		/ 1 1 / / 5

Form 1040 (202)	3)								Page Z		
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	з 🗌		16	8,053.		
Credits	17	Amount from Schedule 2, lir	ne 3					17			
	18	Add lines 16 and 17						18	8,053.		
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	1,000.		
	20	Amount from Schedule 3, lir	ne 8					20			
	21	Add lines 19 and 20						21	1,000.		
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				22	7,053.		
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 21			23	0.		
	24	Add lines 22 and 23. This is	your total tax					24	7,053.		
Payments	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a 5	637.				
	b	Form(s) 1099				25b					
	С	Other forms (see instruction	s)			25c					
	d	Add lines 25a through 25c						25d	5,637.		
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20)22 return			26			
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)				27					
allacii Scii. ElC.	28	Additional child tax credit from	m Schedule 8812	2		28					
	29	American opportunity credit	from Form 8863	3, line 8		29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lin	ne 15			31					
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32			
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	5 , 637.		
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amoun	t you overpaid		34			
	35a	Amount of line 34 you want			3 is attached, chec	k here	. 🗆	35a			
Direct deposit?	b	Routing number X X X	 				Savings				
See instructions.	d	Account number X X X	XXXXX	X X X Z	X X X X	XX					
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36					
Amount	37	Subtract line 33 from line 24									
You Owe		For details on how to pay, g	_	-		1 1		37	1,453.		
	38	Estimated tax penalty (see in				38	37.				
Third Party		you want to allow another	•				1 . 1 .	1 1 .	₩.		
Designee				Phone			•		⊠ No		
		esignee's me		no.			onal ident ber (PIN)	incation			
Sign	Un	nder penalties of perjury, I declare t	hat I have examine	d this return and	accompanying sched	dules and statemen	ts, and to	the best	of my knowledge and		
Here	be	lief, they are true, correct, and com	plete. Declaration	of preparer (othe	r than taxpayer) is ba	sed on all informati	on of whic	h prepar	er has any knowledge.		
11010	Yo	our signature		Date Your occupation				If the IRS sent you an Identity			
				PROGRAMMER ANALYST				Protection PIN, enter it here (see inst.)			
Joint return? See instructions.		souss's signature. If a joint return	hath must sign	Data		,		nt your spouse an			
Keep a copy for	Sp	oouse's signature. If a joint return, l	both must sign.	Date	Spouse's occupation	וונ			ection PIN, enter it here		
your records.				HOMEMAKER	(see	inst.)					
	Ph	ione no. (510) 241-612	0	Email address	N.SRIRAMK@	GMAIL.COM					
Doid	Pr	eparer's name	Preparer's signat	ture		Date	PTIN		Check if:		
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/03/2024	P0208	2703	Self-employed		
Preparer	Fir	m's name GLOBAL TA	XES LLC			Pho	Phone no. (678) 965-9522				
Use Only	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816	Firn	Firm's EIN 84-3171965				

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

SRIRAM K NALLANIDGAL & DEEPIKA SAMUDRALA

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

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

Attachment Sequence No. 01

Your social security number 042-13-5423

	t I Additional Income				
	Taxable refunds, credits, or offsets of state and local income taxes			1	
	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions):				
	Business income or (loss). Attach Schedule C			3	
	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att			5	-7,127
)	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
3	Other income:				
а	Net operating loss	8a ()	
b	Gambling	8b			
С	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e			
f	Income from Form 8889	8f			
g	Alaska Permanent Fund dividends	8g			
h	Jury duty pay	8h			
i	Prizes and awards	8i			
j	Activity not engaged in for profit income	8j			
k	Stock options	8k			
I	Income from the rental of personal property if you engaged in the rental				
	for profit but were not in the business of renting such property	81			
m	Olympic and Paralympic medals and USOC prize money (see				
	instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
o	Section 951A(a) inclusion (see instructions)	80			
р	Section 461(I) excess business loss adjustment	8p			
a	Taxable distributions from an ABLE account (see instructions)	8q			
r	Scholarship and fellowship grants not reported on Form W-2	8r			
s	Nontaxable amount of Medicaid waiver payments included on Form				
	1040, line 1a or 1d	8s (,)	
t	Pension or annuity from a nonqualifed deferred compensation plan or	,	•		
-	a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
z	Other income. List type and amount:				
_		8z			
9	Total other income. Add lines 8a through 8z			9	

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b		_	
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c		_	
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e		-	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful	041			
	discrimination claims (see instructions)	24h		-	
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect tax law violations	04:			
	Housing deduction from Form 2555	24i 24j		-	
J	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24j		-	
k		24k			
_	1041)	24K			
Z		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	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		23/24 PRO		le 1 (Form 1040) 2023
	BAA	1\L'V UZ/	LUIZA FINO		

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

OMB No. 1545-0074

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

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

Attachment Sequence No. 13

Your social security number

SRIE	RAM K NALLANIDGAL & DEEPIKA SAMUDRALA						042-1	3-5423	
Par									
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	ty, use	Schedule	C . See	instru	ctions. If you a	re an indi	ividual, rep	ort farm
	Did you make any payments in 2023 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .							. <u></u> Y€	s No
1a	Physical address of each property (street, city, state, ZIF	ode?	e)						
Α	HNO 14-81/139/10 RAGHAVENDRA COLONY BER	ERAMO	GUDA, AM	EENP	JR S	ANGAREDDY	TELAN	IGANA I	N 502032
В									
С									
1b	Type of Property 2 For each rental real estate prope	ertv list	ed		Fa	ir Rental	Perso	nal Use	0.07
	(from list below) above, report the number of fair	rental	and			Days	Da	ays	QJV
Α	personal use days. Check the Q			Α		183		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	quaimed joint venture. See instru	ICTIONS	·.	С					
Туре	of Property:				•	•			
1	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental			
	Multi-Family Residence 4 Commercial		6 Roya	lties	8	Other (descr	ibe)		
	·								
				•		Properti	es:		
Incon				<u>A</u>	00.	В			С
3 4	Rents received	3		9	00.				
	Royalties received	4							
Expe		_							
5	Advertising	5 6							
6 7	Auto and travel (see instructions)	7		1 0	97.				
8	Commissions	8		1,0	91.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1 0	18.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		1,0	10.				
13	Other interest	13							
14	Repairs	14		1 0	63.				
15	Supplies	15			48.				
16	Taxes	16		Ξ, ο	10.				
17	Utilities	17		1.0	62.				
18	Depreciation expense or depletion	18			39.				
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		8,0	27.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If			- , ,	-				
	result is a (loss), see instructions to find out if you must								
	file Form 6198	21		-7,1	27.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(7,12	27.)	()	()
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		900.		
b	Total of all amounts reported on line 4 for all royalty prop				23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d	2	,739.		
е	Total of all amounts reported on line 20 for all properties				23e	8	,027.		
24	Income. Add positive amounts shown on line 21. Do not	t includ	de any los	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lin	e 22. E	nter to	tal losses here	e 25	(7,127.)
26	Total rental real estate and royalty income or (loss).	Combi	ine lines :	24 and	25. E	nter the resu	lt		
	here. If Parts II, III, and IV, and line 40 on page 2 do no						n		
	Schedule 1 (Form 10/0) line 5. Otherwise include this as	mount	in the tot	al on li	no /11	on nage 2	000		_7 127

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

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

OMB No. 1545-0074

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

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

Attachment Sequence No. **47**

Your social security number

SRIR.	AM K NALLANIDGAL & DEEPIKA SAMUDRALA	042-13-	-5423
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	98,475.
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	98,475.
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 \(\)	. 9	400,000.
10	Subtract line 9 from line 3.		
	• If zero or less, enter -0		
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For		
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.	. 10	0.
11	Multiply line 10 by 5% (0.05)	. 11	0.
12	Is the amount on line 8 more than the amount on line 11?	. 12	1,000.
	No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit	edit.	
	Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.		
	▼ Yes. Subtract line 11 from line 8. Enter the result.		
13	Enter the amount from Credit Limit Worksheet A	. 13	8,053.
14	Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents	. 14	1,000.
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.		
	If the amount on line 12 is more than the amount on line 14, you may be able to take the addition	nal child ta	ax credit
	on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-N	R through	line 27
	(also complete Schedule 3, line 11) before completing Part II-A.		
or Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 02/23/24 PRO	Schedule 8	3812 (Form 1040) 2023

Schedule 8812 (Form 1040) 2023

Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line	e 27 .	
16a	Subtract line 14 from line 12. If zero, 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 $\dots \dots \dots \dots \dots \dots \dots \dots \dots$	20	
	Next. On line 16b, is the amount \$4,800 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
David	Otherwise, go to line 21.	f D	t. Dies
	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	SOTP	uerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or if you are a bona fide resident of Puerto Rico, see instructions		
		-	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 .		
23	Add lines 21 and 22	-	
	1040 and	-	
24	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27,		
	and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	
26	Enter the larger of line 20 or line 25	26	
	Next, enter the smaller of line 17 or line 26 on line 27.		
Par <u>t</u>	II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	

(Rev. November 2023)

Department of the Treasury Internal Revenue Service

Taxpayer name(s) shown on return

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and
Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074 For tax year 20 23 Attachment

Sequence No. 70

Taxpayer identification number

SRI	RAM K NALLANIDGAL & DEEPIKA SAMUDRALA	042-13-542	3		
repare	r's name	Preparer tax identifica	ation numb	oer	
SYA	M PRIYA RAM SAGAR GUPTA TALLAM	P02082703			
Part	Due Diligence Requirements				
	e check the appropriate box for the credit(s) and/or HOH filing status claimed on the return benefit(s) claimed (check all that apply).		the rel		arts I-V HOH
1	Did you complete the return based on information for the applicable tax year provided by	by the taxpayer	Yes	No	N/A
	or reasonably obtained by you?		X		
2	If credits are claimed on the return, did you complete the applicable EIC and/or C worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedi 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions worksheet(s) that provides the same information, and all related forms and schedules claimed?	ule 8812 (Form s, or your own	X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you meet the knowledge requirement, you meet the knowledge requirement.	nust do both of			
	• Interview the taxpayer, ask questions, and contemporaneously document the taxpayer determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.	's responses to			
	• Review information to determine that the taxpayer is eligible to claim the credit(s) and status and to figure the amount(s) of any credit(s)		X		
4	Did any information provided by the taxpayer or a third party for use in preparing information reasonably known to you, appear to be incorrect, incomplete, or inconsist answer questions 4a and 4b. If " No ," go to question 5.)	tent? (If "Yes,"		×	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent inf	ormation? .			
b	Did you contemporaneously document your inquiries? (Documentation should include you asked, whom you asked, when you asked, the information that was provided, and information had on your preparation of the return.)	the impact the			
5	Did you satisfy the record retention requirement? To meet the record retention requirer keep a copy of your documentation referenced in question 4b, a copy of this Form 8867 applicable worksheet(s), a record of how, when, and from whom the information used to 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) p taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing states.	r, a copy of any or prepare Form provided by the tus or to figure			
	the amount(s) of the credit(s)		X		
	List those documents provided by the taxpayer, if any, that you relied on:				
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate ecredit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return is selected for audit?	eturn if his/her	×		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous		X		
-	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)	,	ت		
а	Did you complete the required recertification Form 8862?				
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a correct Schedule C (Form 1040)?			П	

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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		claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	×		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?	×		
Part			Part \	/.)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the quatuition and related expenses for the claimed AOTC?	alified	Yes	No
Part			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?		Yes	No
Part	VI Eligibility Certification			
	You will have complied with all due diligence requirements for claiming the applicable credit(s) and on the return of the taxpayer identified above if you:	or HO	H filing	status
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's respoint 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 checkled credit(s) claimed and HOH filing status, if claimed; 	ist for a	ny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 880 Document Retention.	37 instru	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).	's eligib	ility for	the
	A record of how, when, and from whom the information used to prepare this form and the applical obtained.	ble work	ksheet(s) was
	5. A record of any additional information you relied upon, including questions you asked and the taxle determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxpayer's eligibility for the credit(s) and filing status and the filing status and the taxpayer's eligibility for the credit(s) and filing status and the filing status and	payer's int(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 eac 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?		Yes	No