Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

Social accurity number

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taypayar'a nama

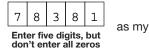
Taxpay	er s name	Socia	Social security number				
SAI	PREETHEESH PASUPULETI	44	446-67-8381				
Spouse	's name	Spou	Spouse's social security number				
SWE	ETY PASUPULETI	95	56-98-52	148			
Part	Tax Return Information – Tax Year Ending December 31, 2023 (E	nter year	[,] you are a	authorizing.)			
Enter	whole dollars only on lines 1 through 5.						
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1	I 72,851.			
2	Total tax						
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	3 2,637.			
4	Amount you want refunded to you		4	4.			
5	Amount you owe		5	5			

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL	TAXES	ERO firm name	to enter or generate my PIN	E
$\mathbf{\nabla}$	I authorize		TAVEC	TTC	to optox or concrete roy DIN	/



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

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

Your signature

Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC ERO firm name to enter or generate my PIN

Date

3	5	1	4	8	as my
	er fiv n't er				

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

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

Spouse's signature ►	Date 🕨								
Practitioner PIN Me	thod Returns Only—continue below								
Part III Certification and Authentication – Pra	ctitioner PIN Method Only								
ERO's EFIN/PIN. Enter your six-digit EFIN followed by yo	ur five-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros								

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

ERO's signature 🕨	Date 🕨								
	RO Must Retain This Form — See bmit This Form to the IRS Unless								
For Denominary Deduction Act Nation	very tex veture instructions		Earm 8870 (Day, 01 2021)						

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

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use On	ly—Do not v	rite or sta	aple in this space.
For the year Jan	. 1–Dec	. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last n	ame						Your so	cial sec	curity number
SAIPREET	зян	SH	PAS	UPULEI	гт					446	67	8381
		s first name and middle initial	Last n		· -					-		security number
SWEETY			PAS	UPULEI	гт					956	98	5148
	(numbe	er and street). If you have a P.O. box, see			·			A	pt. no.			ection Campaign
2617 W F	ROYA	L L'N						2	308			vou, or your
		ce. If you have a foreign address, also co	mplete	spaces be							0	jointly, want \$3
IRVING						ТХ	ζ	750	63	· · ·		nd. Checking a not change
Foreign country	/ name			Foreign p	rovince/state/c	count	ty	Foreig	n postal code		k or refu	0
											Yc	ou 🗌 Spouse
Filing Status] Single					Head of ho	ouseh	old (HOH)	-		
•		Married filing jointly (even if only or	ne had	l income)					()			
Check only one box.] Married filing separately (MFS)		,			Qualifying	surviv	ing spouse	(QSS)		
0.10 20.1	lf y	ou checked the MFS box, enter the	name	of your s	pouse. If you	ı che			• •	. ,	ild's na	me if the
		alifying person is a child but not you										
Divital	<u>^+ or</u>	ny time during 2023, did you: (a) rece										
Digital Assets		ange, or otherwise dispose of a digi										es 🛛 No
Standard		eone can claim: You as a de					a dependent			,		
Deduction		Spouse itemizes on a separate return										
Age/Blindness	s You	: 🗌 Were born before January 2, 1	959	🗌 Are b	lind Spo	ouse	: 🗌 Was bor	n befo	ore January	2, 1959	 I:	s blind
Dependents	s (see	instructions):		(2) 5	Social security		(3) Relationsh	ip (4) Check the I	box if qual	ifies for ((see instructions):
If more	(1) F	(1) First name Last name			number		to you		Child tax	credit	Credit fo	or other dependents
than four	ASH	WAT VIVAS PASUPULETI		958	-92-125	6	Son					×
dependents, see instructions	s ——											
and check												
here 🗌												
Income	1a	Total amount from Form(s) W-2, be	•		,						ı	89,367.
Attach Form(s)	b)	
W-2 here. Also	С	c Tip income not reported on line 1a (see instructions)										
attach Forms W-2G and	d	Medicaid waiver payments not rep					-	• •		. 10		
1099-R if tax	е	Taxable dependent care benefits fr						• •		. <u>1</u> €		
was withheld.	f	Employer-provided adoption bene							. <u>1</u> f			
lf you did not get a Form	g	Wages from Form 8919, line 6 .				• •		• •		. <u>1</u> g		0
W-2, see	h	Other earned income (see instructi	,			• •	· · · ·	· ·		. <u>1</u> h	1	0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)		• •	1 i			_		00 267
		Add lines 1a through 1h	· ·		· · · ·	· ·		• •		. 1z		89,367.
Attach Sch. B if required.	2a	·	2a				axable interest			. 2b		
	<u>3a</u>		3a				ordinary divider			. <u>3b</u>		
Standard	4a -		4a -				axable amount			. 4b		
Deduction for –	5a		5a				axable amount			. 5b		
 Single or Married filing 	6a		6a				axable amount	ι	· · ·	. 6b)	
separately, \$13,850	c -	If you elect to use the lump-sum el				•	,	• •		⊣⊢_		
 Married filing 	7	Capital gain or (loss). Attach Sched		•	•		-	• •				16 516
jointly or Qualifying	8	Additional income from Schedule 1						• •		. 8		-16,516.
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						• •		. 9		72,851.
 Head of 	10	Adjustments to income from Scher						• •		. 10		
household, [\$20,800	11	Subtract line 10 from line 9. This is	•	-	-			• •		. 11		72,851.
• If you checked	12	Standard deduction or itemized					 	• •		. 12		27,700.
any box under Standard	13	Qualified business income deducti	on fro	m ⊢orm 8	995 or Form	899	ъ-А	• •		. 13		07 700
Deduction, see instructions.	14 15	Add lines 12 and 13	• •				· · · ·			. 14		27,700.
	15	Subtract line 14 from line 11. If zer	u ur ie	ss, enter	-u This is y	our	laxable incom	ie .		. 15		45,151.

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

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	4,981.
Credits	17	Amount from Schedule 2, lin	ne3					17	
	18	Add lines 16 and 17						18	4,981.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	500.
	20	Amount from Schedule 3, lin	ne8					20	1,848.
	21	Add lines 19 and 20						21	2,348.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	2,633.
	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	2,633.
Payments	25	Federal income tax withheld	from:						
-	а	Form(s) W-2				25a 2	,637.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	2,637.
If you have a	26	2023 estimated tax payment	ts 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	n Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, 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 ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	2,637.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	4.
	35a	Amount of line 34 you want			3 is attached, che	ck here		35a	4.
Direct deposit?	b	Routing number 1 1 1	Savings						
See instructions.	d	Account number 9 0 0							
	36	Amount of line 34 you want a	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	o to <i>www.ir</i> s.gov	//Payments or	see instructions			37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	uss this retu	rn with the IRS?	' See			_
Designee	ins	structions				🗌 Yes. C	omplete b	elow.	× No
	De nai	signee's		Phone no.			onal identifi ber (PIN)	cation	
Cian		der penalties of perjury, I declare th	nat I have examined		accompanying sch			e hest	of my knowledge and
Sign		ief, they are true, correct, and com			1 2 0		,		, 0
Here	Yo	ur signature		Date	Your occupation		If the	IRS ser	nt you an Identity
		0							IN, enter it here
Joint return?					SOFTWARE		(see i	,	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupation	tion			nt your spouse an ection PIN, enter it here
your records.					HOMEMAKER		(see ii		scholl Fill, enter it here
	Ph	one no. (469)924-632	Δ	Email address		ESH@GMAIL.CO			
		eparer's name	+ Preparer's signat		OVIENCE IUP	Date	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM					P02082	703	Self-employed
Preparer		n's name GLOBAL TAX		ITTU DAGAN	GULIA IAUUAN	02/20/2021			678)965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816		Firm's		84-3171965
Go to www.irs.cr		1040 for instructions and the late		TIONICIC IN				, LIN	Form 1040 (2023)
		in the instructions and the late	sciniornation.		BAA	REV 02/16/24 PRO			10m 10m (2023)

REV 02/16/24 PRO

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

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

Attachment Sequence No. **01**

Your social security number

446-67-8381

Name(s) shown on Form 1040, 1040-SR, or 1040-NR SAIPREETHEESH & SWEETY PASUPULETI

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		5	-16,516.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f	_	
g	Alaska Permanent Fund dividends	8g	_	
h	Jury duty pay	8h	_	
i	Prizes and awards	8i	_	
j	Activity not engaged in for profit income	8j	-	
k	Stock options	8k	_	
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	0		
	instructions)	8m	-	
	Section 951(a) inclusion (see instructions)	8n 8o	-	
0	Section 461(I) excess business loss adjustment	8p	-	
p	Taxable distributions from an ABLE account (see instructions)	8g	-	
q r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form		-	
5	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	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8	<u></u>	10	-16,516.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	ile 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-ba	asis 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)	la		
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit	lb		
с	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m	lc		
d	Reforestation amortization and expenses	ld		
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974	le		
f	Contributions to section 501(c)(18)(D) pension plans	4f		
g	Contributions by certain chaplains to section 403(b) plans 24	lg		
ĥ	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	lh 🛛		
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	4i		
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	lk		
z	Other adjustments. List type and amount:			
	24	lz		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. E	inter here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10		26	<u></u>
	BAA R	EV 02/16/24 PRO	Schedule 1	(Form 1040) 202

Additional Credits and Payments

OMB No. 1545-0074 20

23

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

	Attach to Form 1040, 1040-SR, or 1040-NR. geartment of the Treasury ternal Revenue Service Go to www.irs.gov/Form1040 for instructions and the latest information.								
	. ,	orm 1040, 1040-SR, or 1040-NR					ecurity number		
		& SWEETY PASUPULETI			446-	67-83	381		
Par		fundable Credits				<u>т</u> т			
1	U	credit. Attach Form 1116 if required				1			
2	Credit for c Form 2441	Credit for child and dependent care expenses from Form 2441, line 11. Attac							
3	Education c	Education credits from Form 8863, line 19							
4	Retirement	savings contributions credit. Attach Form 8880				4			
5a	Residential	clean energy credit from Form 5695, line 15				5a			
b	Energy effic	ient home improvement credit from Form 5695, line 32	2.			5b			
6	Other nonre	fundable credits:							
а	General bus	siness credit. Attach Form 3800	6a						
b	Credit for p	rior year minimum tax. Attach Form 8801	6b						
С	Adoption cr	edit. Attach Form 8839.............	6c						
d	Credit for th	e elderly or disabled. Attach Schedule R	6d						
е	Reserved for	r future use	6e						
f	Clean vehic	le credit. Attach Form 8936	6f						
g	Mortgage ir	iterest credit. Attach Form 8396	6g						
h	District of C	olumbia first-time homebuyer credit. Attach Form 8859	6h						
i	Qualified ele	ectric vehicle credit. Attach Form 8834	6i						
j	Alternative f	uel vehicle refueling property credit. Attach Form 8911	6j						
k	Credit to ho	Iders of tax credit bonds. Attach Form 8912	6k						
Ι	Amount on	Form 8978, line 14. See instructions	61						
m	Credit for p	reviously owned clean vehicles. Attach Form 8936 .	6m						
z	Other nonre	fundable credits. List type and amount:							
7	Total other	nonrefundable credits. Add lines 6a through 6z	6z			7			
7 8		through 4, 5a, 5b, and 7. Enter here and on Form 1							
U					-	8	1,848.		

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

(continued on page 2) Schedule 3 (Form 1040) 2023

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for repayment of amounts included in income from earlier years	13b		
с	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c		
d	Deferred amount of net 965 tax liability (see instructions)	13d		
z	Other payments or refundable credits. List type and amount:			
		13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	15		
	BAA REV	02/16/24 PRO	Schedu	ule 3 (Form 1040) 2023

	DULE E		Suppl	emental	l Inco	ome an	id Los	SS			OMB No	b. 1545-0074
(Form	1040)	(From re	ental real estate, royalties	s, partnersh	nips, S	corporati	ions, es	tates,	trusts, REMICs	s, etc.)	90	123
	ent of the Treasury Revenue Service		Attach to Go to <i>www.ir</i> s.gov/Scl	Form 1040, <i>heduleE</i> for					formation.		Attachm Sequen	nent ce No. 13
Name(s)	shown on return								Y	our soci	al security	number
SAIP	REETHEESH	& SWEE	TY PASUPULETI							446-6	7-8381	
Part	I Income	or Loss	s From Rental Real E	Estate and	d Roy	yalties						
	rental inco	me or los	ne business of renting pers s from Form 4835 on page	e 2, line 40.					-			
			nts in 2023 that would re									
B I	f "Yes," did you	or will yo	ou file required Form(s)	1099? .							. 🗌 Ye	es 🗌 No
1a			ach property (street, city			,						
A	24-11-124	7,2ND	STREET RAM NAGAR	DARGAM	IITTA	A NELLC	RE, A	NDHR.	A PRADESH	IN 52	24003	
В												
С												
1b	Type of Prope		For each rental real es					Fa	ir Rental	Person		QJV
	(from list below	v)	above, report the num	ber of fair r	rental	and			Days	Da	ys	QUV
Α	3		personal use days. Ch				Α		365		0	
В			if you meet the require qualified joint venture.				В					
С			qualmed joint venture.		Clions		С					
Туре	of Property:											
1 3	Single Family R	esidence	e 3 Vacation/Short-	-Term Rent	tal	5 Land	I	7	Self-Rental			
2	Multi-Family Re	sidence	4 Commercial			6 Roya	alties	8	Other (describ	be)		
							•		Properties	5:		
Incom							<u>A</u>	10	В			C
3					3		5	40.				
4		ved			4							
Expen												
5	-				5							
6			structions)		6							
7	-		nce		7		1,8	15.				
8	Commissions				8							
9	Insurance .				9							
10	Legal and othe	er profess	sional fees		10							
11	Management f	ees			11		1,4	60.				
12	Mortgage inter	est paid	to banks, etc. (see instr	uctions)	12							
13	Other interest				13							
14	Repairs				14		4,3	11.				
15	Supplies .				15		4,6	20.				
16	Taxes				16							
17					17		4,8	50.				
18	Depreciation e	xpense c	pr depletion		18							
19	Other (list)	·			19							
20			nes 5 through 19		20		17,0	56.				
21	•		ne 3 (rents) and/or 4 (roy									
	result is a (loss	s), see ins	structions to find out if	you must			1с г	1.0				
					21	-	-16,5	10.				
22			estate loss after limitatic ructions)		22	(16,51	6.)	()	()
23a	Total of all am	ounts rep	oorted on line 3 for all re	ental prope	rties			23a		540.		
b	Total of all am	ounts rep	oorted on line 4 for all ro	yalty prope	erties			23b				
с			ported on line 12 for all p					23c				
d			orted on line 18 for all p	•				23d				
е			orted on line 20 for all p					23e	17,	056.		
24		-	amounts shown on line 2		includ	de any los	sses			24		
25			ses from line 21 and renta					nter to	tal losses here	25	(16,516.)
26			e and royalty income									. ,
			I IV, and line 40 on pag									
), line 5. Otherwise, incl							26		-16,516.

26	-16,516.
Sc	nedule E (Form 1040) 2023

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SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

OMB No. 1545-0074

Attach to For	m 1040, 1040-SI	R. or 1040-NR.
/		.,

Internal Revenue Service Name(s) shown on return

Department of the Treasury

		and Other Dependents		2023			
	nent of the Treasury Revenue Service	Attach to Form 1040, 1040-SR, or 1040-NR. Go to <i>www.irs.gov/Schedule8812</i> for instructions and the latest in			Attachment Sequence No. 47		
ame(s)) shown on return	Your social security number					
AIPI	REETHEESH &	SWEETY PASUPULETI		446-67-8381			
Par	t I Child Ta	ax Credit and Credit for Other Dependents					
1	Enter the amour	tt from line 11 of your Form 1040, 1040-SR, or 1040-NR			1	72,851.	
2a	Enter income fro	om Puerto Rico that you excluded					
b	Enter the amour	ts from lines 45 and 50 of your Form 2555		0.			
~	Enter the emeri	t from line 15 of your Form 4562					

b	Enter the amounts from lines 45 and 50 of your Form 2555 . . 2b 0.		
c	Enter the amount from line 15 of your Form 4563		
d	Add lines 2a through 2c	2d	0.
3	Add lines 1 and 2d	3	72,851.
4	Number of qualifying children under age 17 with the required social security number 4)	
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	_	
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident		
	alien. Also, do not include anyone you included on line 4.		
7	Multiply line 6 by \$500	7	500.
8	Add lines 5 and 7	8	500.
9	Enter the amount shown below for your filing status.		
	• Married filing jointly—\$400,000		
	• All other filing statuses—\$200,000 }	9	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	500.
	No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit.		
	Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.		
	Yes. Subtract line 11 from line 8. Enter the result.		
13	Enter the amount from Credit Limit Worksheet A	13	3,133.
14	Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents	14	500.
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.		
	If the amount on line 12 is more than the amount on line 14, you may be able to take the additional of	hild ta	ax credit
	on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR th	rough	line 27

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

For Paperwork Reduction Act Notice, see your tax return instructions. REV 02/16/24 PRO Schedule 8812 (Form 1040) 2023 BAA

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 Add lines 21 and 22 23	-	
23		-	
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

Form **8863**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Education Credits (American Opportunity and Lifetime Learning Credits)

Attach to Form 1040 or 1040-SR.

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

 OMB No. 1545-0074

 2023

 Attachment

 Sequence No. 50

 Your social security number

 446
 67
 8381

SAIPREETHEESH & SWEETY PASUPULETI

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

Part	Refundable American Opportunity Credit					
1	After completing Part III for each student, enter the total of all amounts from all P	arts I	II, line	30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household,					
	or qualifying surviving spouse	2				
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form					
	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for					
	the amount to enter instead	3				
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education					
_		4				
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	5				
6		5				
0	Equal to or more than line 5, enter 1.000 on line 6			1		
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (ro			}	6	
	at least three places))	-	
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of th	e yea	ar anc	I meet the		
	conditions described in the instructions, you can't take the refundable America					
	skip line 8, enter the amount from line 7 on line 9, and check this box $\ . \ . \ .$				7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter					
	on Form 1040 or 1040-SR, line 29. Then go to line 9 below.	•	• •		8	
Part					_	
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	•		,	9	
10	After completing Part III for each student, enter the total of all amounts from a					0 0 4 1
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19				10 11	9,241.
11 12	Enter the smaller of line 10 or \$10,000				11	9,241.
	Multiply line 11 by 20% (0.20)				12	1,040.
13	qualifying surviving spouse	13		180,000.		
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form			20070001		
14	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for					
	the amount to enter instead	14		72,851.		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on					
	line 18, and go to line 19	15		107,149.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or					
	qualifying surviving spouse	16		20,000.		
17	If line 15 is:					
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18					1 000
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (roun least three places)				17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet			, rtions)	18	1,848.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit	•		,	.0	±,010.
	instructions) here and on Schedule 3 (Form 1040), line 3				19	1,848.
For Pa		A A		REV 02/16/2	4 PRO	Form 8863 (2023)

Form 8863 (2023)			Page 2
Name(s) shown on return	Your social	security	number
SAIPREETHEESH & SWEETY PASUPULETI	446	67	8381

CAUT	credit or lifetime learning credit. Use additi	-	ı're claiming either the American opportunity copies of page 2 as needed for each student.
Par	t III Student and Educational Institution Informatio	n. Se	e instructions.
20	Student name (as shown on page 1 of your tax return)	21	Student social security number (as shown on page 1 of your tax return)
	PASUPULETI		956-98-5148
22	Educational institution information (see instructions)		
a	a. Name of first educational institution	b	. Name of second educational institution (if any)
	University of North Texas		
(Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 1155 Union Circle # 310620 	(Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
	DENTON TX 762035017		
(2) Did the student receive Form 1098-T X Yes □ No from this institution for 2023?	(2	2) Did the student receive Form 1098-T from this institution for 2023?
(3) Did the student receive Form 1098-T from this institution for 2022 with box Yes X No 7 checked?	(;	B) Did the student receive Form 1098-T from this institution for 2022 with box Yes No 7 checked?
(4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	(*	Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.
	75-6002149		
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?		Yes – Stop! Go to line 31 for this student. \boxed{X} No – Go to line 24.
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2023 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	×	Yes — Go to line 25. \Box No — Stop! Go to line 31 for this student.
25	Did the student complete the first 4 years of postsecondary education before 2023? See instructions.	17.1	Yes — Stop! Go to line 31 for this student. No — Go to line 26.
26	Was the student convicted, before the end of 2023, of a felony for possession or distribution of a controlled substance?		Yes — Stop! Go to line 31 for this student. No — Complete lines 27 through 30 for this student.
CAUT	you complete lines 27 through 30 for this student, don't		e learning credit for the same student in the same year. If ete line 31.
	American Opportunity Credit		
27	Adjusted qualified education expenses (see instructions). Do		
28			
29			· · · · · · · · · · · 29
30	If line 28 is zero, enter the amount from line 27. Otherwise, enter the result. Skip line 31. Include the total of all amounts f		
	Lifetime Learning Credit		
31	Adjusted qualified education expenses (see instructions). Incl III, line 31, on Part II, line 10		31 9,241.
			Earm 8863 (2022)

(Rev. November 2023)

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC), Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status Department of the Treasury To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. OMB No. 1545-0074

For tax year 20 23

Department of the Treasury Internal Revenue Service	To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 104 Go to <i>www.irs.gov/Form886</i> 7 for instructions and the latest infor	Attachment Sequence No. 70	
Taxpayer name(s) shown or	return	Taxpayer identificatio	n number
SAIPREETHEESH	& SWEETY PASUPULETI	446-67-8383	1
Preparer's name		Preparer tax identifica	tion number
SYAM PRIYA RAM	I SAGAR GUPTA TALLAM	P02082703	

Part I **Due Diligence Requirements**

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

1	Did you complete the return based on information for the applicable tax year provided by the taxpayer	Yes	No	N/A
	or reasonably obtained by you?	X		
2	If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC			
	worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 8812 (Form			
	1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit			
	claimed?	X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of			
3	the following.			
	• Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.			
	• Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of any credit(s)	X		
4	Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes,"			
	answer questions 4a and 4b. If " No ," go to question 5.)		X	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent information? .			
b	Did you contemporaneously document your inquiries? (Documentation should include the questions			
	you asked, whom you asked, when you asked, the information that was provided, and the impact the		_	
_	information had on your preparation of the return.)			
5	Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a copy of any			
	applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form			
	8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the			
	taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure			
	the amount(s) of the credit(s)	X		
	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 eligibility for the			
	credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her return is selected for audit?	X		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year?	×		
	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)			
а	Did you complete the required recertification Form 8862?			
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and			

If the taxpayer is reporting	j self-€	empl	loyr	ner	nt i	inco	ome	e, c	bib	you	ı asl	ς qι	iest	ions	to	pr	epa	are	а	cor	npl	ete	ar
correct Schedule C (Form	1040)'	?.						•															

For Paperwork Reduction Act Notice, see separate instructions.

REV 02/16/24 PRO

Form 8867 (Rev. 11-2023)

Form 88	367 (Rev. 11-2023)			Page 2				
Part	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)? Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not							
Part	or ODC, go to Part IV.)		лс, а					
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	IV Due Diligence Questions for Returns Claiming AOTC (If the return does not claim AOTC	ue Diligence Questions for Returns Claiming AOTC (If the return does not claim AOTC, go to Part V.)						
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qu tuition and related expenses for the claimed AOTC?		Yes	No				
Part	V Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing statu	s, go te	o Part	VI.)				
14 Part	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? Eligibility Certification	x year 	Yes	No				
You will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filing status on the return of the taxpayer identified above if you:								
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responses on the return or in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s);							
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checklist for any applicable credit(s) claimed and HOH filing status, if claimed;							
	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 8867 instructions under Document Retention.							
	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?	X	

REV 02/16/24 PRO

Form 8867 (Rev. 11-2023)