#### Department of the Treasury Internal Revenue Service

## **IRS e-file Signature Authorization**

OMB No. 1545-0074

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

Submission Identification Number (SID)

Taxpayer's name		Social security number	er	
ANTONY JOSE JOSEPH		695-80-3756		
Spouse's name		Spouse's social secur	ity number	
PAVITHRA SRINIVASAN		981-99-5853		
Part I Tax Return Information – Tax Year Ending December 31,	2023 (Enter	year you are auth	norizing.)	
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	121,555.	
<b>2</b> Total tax		2	8,765.	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12,631.	
4 Amount you want refunded to you		4	3,866.	
5 Amount you owe		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

I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN
		ERO firm name	

0	3	7	5	6	
Ent don	er fiv i't er	ve di Iter a	gits, all ze	but ros	as

5 3

8

Enter five digits, but don't enter all zeros

5 9

my

as mv

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

X

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

X lauthorize GLOBAL TAXES LLC ERO firm name

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

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

Spouse's signature >	Date I					 		
Practitioner PIN Method Returns Only—contir	ue be	low						
Part III Certification and Authentication – Practitioner PIN Method Onl	/							
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		 6 all ze	 9	89	)

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

ERO's signature >	Date 🕨					
	ERO Must Retain This F Don't Submit This Form to the I					
Few Developments Developments A et 1	Nation and company the continue in standard in a		DEV 00/04/04 DD0	Farm 8870 (Day, 01 0001)		

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

to enter or generate my PIN

<b>E1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545-	0074	IRS Use Only	–Do not w	vrite or sta	ple in this space.
For the year Jan	For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 2023, ending , 20						See se	parate i	nstructions.			
Your first name	and m	ddle initial	Last n	ame						Your so	cial sec	urity number
ANTONY .							695	80	3756			
		s first name and middle initial	Last n									security number
PAVITHR	<u>`</u>		SRT	NIVASA	M					981	99	5853
		er and street). If you have a P.O. box, see			111			A	pt. no.			ction Campaign
220 SAMU												ou, or your
		ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode	spouse	if filing j	ointly, want \$3
COPPELL			•			ТΣ	ζ	750				nd. Checking a
Foreign country	name			Foreign p	rovince/state/o				n postal code		ow will r	not change nd.
				<b>.</b> .			-				🗌 Yo	
Filing Status		Single					Head of ho	useh	old (HOH)			
-		Married filing jointly (even if only or	ne had	income)				00011				
Check only one box.		Married filing separately (MFS)	io naa	income)			Qualifying	surviv	ina snouse	(OSS)		
one box.	lf v	you checked the MFS box, enter the	name	of your s	pouse. If voi	ı che					ild's nar	ne if the
		alifying person is a child but not you										
Digital		ny time during 2023, did you: (a) rece						-		. ,	<b>—</b> .,	
Assets		ange, or otherwise dispose of a digi						t)? (Se	e instructio	ns.)	∐ Ye	es 🛛 No
Standard	_	eone can claim: 📋 You as a de	•				a dependent					
Deduction		Spouse itemizes on a separate return	n or yo	ou were a	dual-status	alien	1					
Age/Blindness	You	Were born before January 2, 1	959	Are bl	lind <b>Spo</b>	ouse	: 🗌 Was bor	n befc	re January	2, 1959	🗌 Is	blind
Dependents	s (see	instructions):		(2) S	Social security	,	(3) Relationshi	p (4		-		see instructions):
If more	<b>(1)</b> F	irst name Last name			number		to you		Child tax c	redit	Credit for	r other dependents
than four		AN JOSE ANTONY JOSE		984	-92-888	8	Son					×
dependents, see instructions	AII	DEN JOSE		748	-81-888	0	Son		×			
and check												
here												
Income	1a	Total amount from Form(s) W-2, be	•		,							121,159.
Attach Form(s)	b	Household employee wages not re	•								_	
W-2 here. Also	С	Tip income not reported on line 1a	•									
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	uctions)	• •		. 1d	_	
1099-R if tax	е	Taxable dependent care benefits f						• •		. <u>1</u> e	_	
was withheld.	f	Employer-provided adoption bene			-			• •		. <u>1</u> f		
lf you did not get a Form	g	Wages from Form 8919, line 6 .						• •		. 1g		
W-2, see	h	Other earned income (see instructi		· · ·				···		. <u>1</u> h	1	0.
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)		• •	<b>1</b> i			_		101 150
		Add lines 1a through 1h	 . i	· · ·	· · · ·	· ·		• •		. 1z		121,159.
Attach Sch. B if required.	2a	· · -	2a				axable interest			. 2b		34.
	<u>3a</u>		3a		55.		Ordinary divider					70.
Standard	4a		4a				axable amount			. 4b		
Deduction for –	5a		5a				axable amount			. 5b		
<ul> <li>Single or Married filing</li> </ul>	6a	, _	6a				axable amount	• •	 r	. 6b	,	
separately,	_c	If you elect to use the lump-sum el						• •	l	$\exists \vdash$		
\$13,850 • Married filing	7	Capital gain or (loss). Attach Schee						• •	l			292.
jointly or Qualifying	8	Additional income from Schedule	-					• •		. 8		101 555
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•				• •		. 9		121,555.
\$27,700 • Head of	10	Adjustments to income from Sche						• •		. 10		
household, \$20,800	11	Subtract line 10 from line 9. This is	-	-	-			• •		. 11		121,555.
• If you checked	12	Standard deduction or itemized						• •		. 12		27,700.
any box under Standard	13	Qualified business income deducti	on froi	m Form 8	995 or Form	899	5-A	• •		. 13		
Deduction, see instructions.	14		•••					• •		. 14		27,700.
	15	Subtract line 14 from line 11. If zer	o or le	ss, enter ·	-0 This is y	our	taxable incom	е.		. 15		93,855.

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

Form **1040** (2023)

Form 1040 (2023	3)							1	Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3	1	6 11,2	65.
Credits	17	Amount from Schedule 2, lir	ne3				1	7	
	18	Add lines 16 and 17					1	8 11,2	65.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		1	9 2,5	00.
	20	Amount from Schedule 3, lir	ne8				2	20	
	21	Add lines 19 and 20					2	2,5	00.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			2		65.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		2	23	0.
	24	Add lines 22 and 23. This is	your total tax				2	24 8,7	65.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				<b>25a</b> 12	,631.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction:				25c			
	d	Add lines 25a through 25c	<i>.</i>				2	5d 12,6	31.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	)22 return		2	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	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27, 28, 29, and 31				undable credits	3	32	
	33	Add lines 25d, 26, and 32. T					3	<b>3</b> 12,6	31.
Refund	34	If line 33 is more than line 24						3,8	66.
	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attached, che	ck here	. 🗌 🖪	5a 3,8	66.
Direct deposit?	b	Routing number 1 2 5					Savings		-
See instructions.	d	Account number 1 3 8					ů l		
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24	This is the <b>amo</b>	ount vou owe		-			
You Owe	0.	For details on how to pay, g					3	37	
	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another				See			
Designee		structions	•				omplete belo	w. 🗙 No	
-		signee's		Phone			onal identificat	ion	
	nai			no.			ber (PIN)		<u> </u>
Sign		der penalties of perjury, I declare tl ief, they are true, correct, and com						, ,	
Here		· · · ·							Ũ
	to	ur signature		Date	Your occupation			sent you an Identity on PIN, enter it here	
Joint return?					SOFTWARE I	ENGINEER	(see inst.		
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion		sent your spouse a	
Keep a copy for your records.							Identity F (see inst.	Protection PIN, enter	r it here
your rooordo.					HOME MAKE	ર	(See Inst.	)	
		one no. (425)615-837		Email address		Data	DTIN	Obas L II	
Paid		eparer's name	Preparer's signat			Date	PTIN	Check if:	
Preparer		ATA SAI PAVAN KUMAR DUDIPALLI		PAVAN KUM	AR DUDIPALLI		P0247083		
Use Only		m's name GLOBAL TAX						p. (678)965-9	
			Y CT E BRU	NSWICK N	J 08816		Firm's El		
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/04/24 PRO		Form <b>104</b>	0 (2023)

#### SCHEDULE D (Form 1040)

## **Capital Gains and Losses**

OMB No. 1545-0074

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.

2023 Attachment Sequence No. 12

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

ANTONY JOSE JOSEPH & PAVITHRA SRINIVASAN

Your social security number 695-80-3756

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? 
Yes No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

### Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

	instructions for how to figure the amounts to enter on the below.	<b>(d)</b> Proceeds	(e) Cost	<b>(g)</b> Adjustment to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, F line 2, column	Part I,	combine the result with column (g)
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 <b>Box A</b> checked	3,258.	2,431.			827.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1			usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions		-	-	6	( )
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	827.

#### Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, l line 2, colum	s from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-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 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked	8,618.	9,153.			-535.
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12 13	Net long-term gain or (loss) from partnerships, S corporat				12 13	
	Capital gain distributions. See the instructions Long-term capital loss carryover. Enter the amount, if any	 / from line 13 of v			13	
14	Worksheet in the instructions		-	-	14	( )
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•			15	-535.

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	<b>16</b> 292.
	• If line 16 is a <b>gain</b> , 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is <b>zero</b> , 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 <b>both</b> gains?	
	No. Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	<ul> <li>Are lines 18 and 19 both zero or blank and you are not filing Form 4952?</li> <li>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.</li> </ul>	
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or     (\$3,000), or if married filing separately, (\$1,500)	21 ()
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	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.	

BAA REV 03/04/24 PRO

Schedule D (Form 1040) 2023

Department of the Treasury

Internal Revenue Service

## 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.

Name(s) shown on return	Social security number or taxpayer identification number
ANTONY JOSE JOSEPH & PAVITHRA SRINIVASAN	695-80-3756

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 Form 1099-B

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis See the <b>Note</b> below	If you enter an enter a co	amount in column (g), ode in column (f). arate instructions.	<b>(h)</b> 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 <i>Column (e)</i> in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
FIDELITY	01/01/23	12/31/23	0.	0.			0.
ROOBINHOOD SECURITES LLC	01/01/23	12/31/23	3,258.	2,431.			827.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), <b>lir</b>	lude on your 1e 2 (if Box B	3,258.	2,431.			827.

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.

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

Form 8949 (2023)	Attachment Sequence No. 12A	Page <b>2</b>
Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side	Social security number or taxpayer identification numl	ber

ANTONY JOSE JOSEPH & PAVITHRA SRINIVASAN

Social security number or taxpayer identification number 695-80-3756

Before you check Box D, E, or F 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.

**Part II Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.

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

[] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property	(b) (c) Date sold or			(e) Cost or other basis See the <b>Note</b> below	Adjustment, i If you enter an enter a c See the sep	(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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
FIDELITY	01/01/22	12/31/23	39.	42.			-3.
ROOBINHOOD SECURITES LLC	01/01/22	12/31/23	8,579.	9,111.			-532.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked).			8,618.	9,153.			-535.

Note: If you checked Box D 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.

REV 03/04/24 PRO

SCHEDULE 8812 (Form 1040)

## **Credits for Qualifying Children** and Other Dependents

OMB No. 1545-0074

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

20 23 Attachment -

	Revenue Service Go to www.irs.gov/Schedule8812 for instructions and the latest information.		Attachment Sequence No. <b>4</b>		
Name(s	) shown on return	Your se	ocial s	security number	
ANTO	NY JOSE JOSEPH & PAVITHRA SRINIVASAN	695-	80-	3756	
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	121,555.	
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	121,555.	
4	Number of qualifying children under age 17 with the required social security number 4	1			
5	Multiply line 4 by \$2,000		5	2,000.	
6	Number of other dependents, including any qualifying children who are not under age				
	17 or who do not have the required social security number	1			
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resid	lent			
	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	2,500.	
9	Enter the amount shown below for your filing status.				
	• Married filing jointly—\$400,000				
	• All other filing statuses— $$200,000 \int \dots $		9	400,000.	
10	Subtract line 9 from line 3.				
	• If zero or less, enter -0				
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For				
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. $J$	· _	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	2,500.	
	No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax cr	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	11,265.	
14	Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents	•	14	2,500.	
	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 child tax credit on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

For Paperwork Reduction Act Notice, see your tax return instructions. REV 03/04/24 PRO Schedule 8812 (Form 1040) 2023 BAA

Schedu	le 8812 (Form 1040) 2023		Page <b>2</b>
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	
	<b>TIP:</b> 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?		
	<b>No.</b> 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?		
	<b>No.</b> 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.		
	<b>Yes.</b> If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
	Otherwise, go to line 21.		
Part	, , , , , , , , , , , , , , , , , , ,	IS OT H	vuerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or		
	if you are a bona fide resident of Puerto Rico, see instructions	-	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form		
22	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22	-	
23	Add lines 21 and 22	-	
24	<b>1040 and</b> <b>1040-SR filers:</b> Enter the total of the amounts from Form 1040 or 1040-SR, line 27, )		
	and Schedule 3 (Form 1040), line 11.		
	<b>1040-NR filers:</b> 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 <b>larger</b> of line 20 or line 25	23	
20	Next, enter the smaller of line 17 or line 26 on line 27.		
Part	II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	
	· · · · · · · · · · · · · · · · · · ·		812 (Form 1040) 2023

	0067	Paid Preparer's Due Diligence	Checkli	et	OME	3 No. 154	5-0074
	<b>B867</b>	Earned Income Credit (EIC), American Opportunity Ta Child Tax Credit (CTC) (including the Additional Child Ta				For tax ye	ear
(Rev. No	ovember 2023)	Credit for Other Dependents (ODC)), and Head of Househo	old (HOH) Filir	ng Status			<u>&gt;</u>
	nent of the Treasury Revenue Service	To be completed by preparer and filed with Form 1040, 1040-SR, Go to <i>www.irs.gov/Form8867</i> for instructions and the				chment uence No	.70
Taxpay	er name(s) shown on	return		Taxpayer identification	ation numbe	er	
ANT	ONY JOSE JO	SEPH & PAVITHRA SRINIVASAN		695-80-37	756		
Prepare	er's name			Preparer tax ident	ification nun	nber	
		VAN KUMAR DUDIPALLI		P02470833	3		
Part		gence Requirements					
		ropriate box for the credit(s) and/or HOH filing status claime ed (check all that apply).	ed on the ret		ete the re		Parts I–V HOH
1	Did vou comp	ete the return based on information for the applicable tax ye	ar provided	by the taxpave	er Yes	No	N/A
		bbtained by you?	-		×		
2	worksheets for 1040) instruction	claimed on the return, did you complete the applicable E und in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-S ons, and/or the AOTC worksheet found in the Form 8863 nat provides the same information, and all related forms an	SS, or Scheo 3 instruction	dule 8812 (Forn is, or your ow	n n		
3	<ul><li>Did you satisfy the following.</li><li>Interview the determine th</li><li>Review infor</li></ul>	taxpayer, ask questions, and contemporaneously document at the taxpayer is eligible to claim the credit(s) and/or HOH fili mation to determine that the taxpayer is eligible to claim the o figure the amount(s) of any credit(s)	the taxpaye ing status. e credit(s) ar	r's responses to nd/or HOH filing	of o		
4	information rea	nation provided by the taxpayer or a third party for use asonably known to you, appear to be incorrect, incomplete ons 4a and 4b. If " <b>No</b> ," go to question 5.)	, or inconsis	stent? (If "Yes,		×	
а	Did you make	reasonable inquiries to determine the correct, complete, and o	consistent in	formation? .			
b	you asked, wh	mporaneously document your inquiries? (Documentation show you asked, when you asked, the information that was p d on your preparation of the return.)	rovided, and	the impact th			
5	keep a copy of applicable wor 8867 and any taxpayer that the amount(s)	the record retention requirement? To meet the record reter f your documentation referenced in question 4b, a copy of th ksheet(s), a record of how, when, and from whom the inform applicable worksheet(s) was obtained, and a copy of any d you relied on to determine eligibility for the credit(s) and/or H of the credit(s)	is Form 886 nation used t locument(s) IOH filing st	7, a copy of an to prepare Forr provided by th atus or to figur	n e		
6	credit(s) and/o	e taxpayer whether he/she could provide documentation to s r HOH filing status and the amount(s) of any credit(s) clain ed for audit?	med on the	return if his/he			
7		e taxpayer if any of these credits were disallowed or reduced				$+ \square$	
•	•	e disallowed or reduced, go to question 7a; if not, go to q	•				
а	-	ete the required recertification Form 8862?	-				
8		is reporting self-employment income, did you ask questions			d		
		ule C (Form 1040)?					

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Part	II Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	Yes	No	N/A
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?			
с 	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?			
Part	<b>Due Diligence Questions for Returns Claiming CTC/ACTC/ODC</b> (If the return does not or ODC, go to Part IV.)	claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes X	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	X		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?	X		
Part		, go to	Part \	/.)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qu tuition and related expenses for the claimed AOTC?	alified	Yes	No
Part		s, go to	o Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the ta and provided more than half of the cost of keeping up a home for the year for a qualifying person?	k year	Yes	No
Part	<ul> <li>Eligibility Certification</li> <li>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:</li> <li>A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's response.</li> </ul>		•	
	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);	s) and/c	or HOH	filing
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this check credit(s) claimed and HOH filing status, if claimed;	list for a	iny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 Document Retention.	67 instri	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			

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

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

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

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