Internal Revenue Service

IRS e-file Signature Authorization

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 AJAZ IQBAL 731-09-4256 Spouse's name Spouse's social security number 648-44-0904 SOBIA SATTAR Tax Return Information — Tax Year Ending December 31, 2021 (Enter year you are authorizing.) Part I 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. Adjusted gross income 3,949. 1 1 2 2 0. 3 3 4 4 217. 5 Amount you owe 5 Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, 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

	1 dutiion20			ERO firm name	to enter of generate my r my	En
X	l authorize	GLOBAL	TAXES	T.T.C	to enter or generate my PIN	9

9	4	2	5	6	as
Ent don	er fiv n't er	/e di nter a	gits, all ze	but ros	0.0

Enter five digits, but don't enter all zeros

4

as mv

4 0 9 0

my

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

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 s	ignature 🕨 Da	ate 🕨	•								
	Practitioner PIN Method Returns Only—continue	bel	ow								
Part III	Certification and Authentication – Practitioner PIN Method Only										
ERO's EFI	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	 					9	8	9
				Don	i't er	iter a	all ze	ros			

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 Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So			
		_	0070 -	

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

Date

to enter or generate my PIN

104		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) J rn	20	21	OMB No.	1545-0	074 IRS Use Only	y—Do not	write or staple	in this space.
Filing Statu Check only one box.	lf yo	Single X Married filing jointly U u checked the MFS box, enter the n on is a child but not your dependent	ame of y	-	separatel use. If yo				ousehold (HOH) QW box, enter th		, ,	. , . ,
Your first name	e and mi	ddle initial	Last na	ne						Your s	ocial securi	ty number
AJAZ			IQBA	L						731-	09-425	6
If joint return, s	spouse's	first name and middle initial	Last na	ne						Spouse	's social se	curity number
SOBIA			SATT	AR						648-	44-090	4
		r and street). If you have a P.O. box, see PRIMERA RD	instructio	ons.					Apt. no.	Check	here if you,	
City, town, or	post offic	ce. If you have a foreign address, also co	omplete s	baces bel	ow.	Sta	te	Z	IP code			ntly, want \$3 Checking a
LAS CRU	CES					NI	M	8	88011	- U	low will not	0
Foreign countr	y name		F	oreign pr	ovince/sta	ate/coun	ty	F	oreign postal code	your ta	x or refund	Spouse
At any time du	uring 20	21, did you receive, sell, exchange,	, or othe	rwise dis	spose of	any fina	ancial inter	est in	any virtual curre	ncv?	Yes	X No
	-	eone can claim: You as a de			-	-	a depende		,	- 1		
Standard Deduction	_	Spouse itemizes on a separate retur	•					JIIL				
Age/Blindnes	s You:	Were born before January 2, 1	957	Are bl	ind 🕄	Spouse	: 🗌 Was	s born	before January	2, 1957	🗌 ls b	lind
Dependent		instructions): rst name Last name		(2) S	Social secu number	ırity	(3) Relati to yo		(4) ✔ if c Child tax c		or (see instru	uctions): ther dependents
lf more than four	. ,	RIAM IQBAL	649-50-11		111	Daught		X	Joan			
dependents,	ABE	DULLAH IQBAL			-44-0		Son					
see instruction and check	IS HAM				-39-50		Son		X			
here				000	0,0,0,0							
	1	Wages, salaries, tips, etc. Attach F	- orm(s) \	V-2 .						. 1		3,949.
Attach	2a	Tax-exempt interest	2a			bТ	axable inte	erest		. 2	b	
Sch. B if	3a	Qualified dividends	3a				Ordinary div		ls	. 3	b	
required.	4a	IRA distributions	4a				axable am			. 41	b	
	5a	Pensions and annuities	5a			bΤ	axable am	iount .		. 5	b	
Standard	6a	Social security benefits	6a			bΤ	axable am	iount .		. 6	b	
Deduction for-	7	Capital gain or (loss). Attach Sche	dule D if	required	d. If not r	equired	l, check he	ere .	🕨	7	,	
 Single or Married filing 	8	Other income from Schedule 1, lin	e10.							. 8	;	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is yo	ur total i	ncome				▶ 9)	3,949.
Married filing	10	Adjustments to income from Sche								. 10	D	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your ac	djusted	gross in	come				► 1 ¹	1	3,949.
widow(er), \$25,100	12a	Standard deduction or itemized	-					12a	25,10	0.		
Head of	b	Charitable contributions if you take	the stan	dard de	duction (s	ee insti	ructions)	12b				
household, \$18,800	с	Add lines 12a and 12b								. 12	c	25,100.
 If you checked 	13	Qualified business income deduct	business income deduction from Form 8995 or Form 8995-A							. 1:		·
any box under Standard	14	Add lines 12c and 13								. 1	4	25,100.
Deduction, see instructions.	15	Taxable income. Subtract line 14								. 1	5	0.
)											

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

Form **1040** (2021)

Form 1040 (202	1)								Page 2
	16	Tax (see instructions). Check if a	any from Form	(s): 1 🗌 881	4 2 4972	3		16	0.
	17	Amount from Schedule 2, line 3	3					17	
	18	Add lines 16 and 17						18	0.
	19	Nonrefundable child tax credit	or credit for o	ther depender	nts from Schedule	e 8812		19	
	20	Amount from Schedule 3, line a	8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If	f zero or less, e	enter -0				22	0.
	23	Other taxes, including self-emp	ployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is yo	ur total tax				. 🕨	24	0.
	25	Federal income tax withheld from	om:			1 1			
	а	Form(s) W-2				25a			
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c .						25d	
If you have a	26	2021 estimated tax payments a			3.7			26	
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC) .				27a		_	
		Check here if you were bor							
		January 2, 2004, and you staxpayers who are at least age							
	b	Nontaxable combat pay election							
	с	Prior year (2019) earned incom							
	28	Refundable child tax credit or ac			Schedule 8812	28	217.		
	29	American opportunity credit fro	om Form 8863	, line 8		29		1	
	30	Recovery rebate credit. See ins		-		30		1	
	31	Amount from Schedule 3, line				31		1	
	32	Add lines 27a and 28 through 3					its 🕨	32	217.
	33	Add lines 25d, 26, and 32. The						33	217.
Refund	34	If line 33 is more than line 24, s						34	217.
Refutio	35a	Amount of line 34 you want rel						35a	217.
Direct deposit?	►b	Routing number X X X X	XXXX	XX	► c Type:	Checking	Savings		
See instructions.	►d	Account number X X X X	x x x x	XXXX	X X X X X	XX	-		
	36	Amount of line 34 you want ap	plied to your	2022 estimate	ed tax 🕨	36			
Amount	37	Amount you owe. Subtract lin	e 33 from line	24. For details	s on how to pay,	see instructions	. 🕨	37	
You Owe	38	Estimated tax penalty (see inst	tructions) .		🕨	38			
Third Party	Do	you want to allow another p	erson to disc	uss this retu	n with the IRS?	See			
Designee		structions				. 🕨 🗌 Yes. Co	mplete k	elow.	X No
		signee's		Phone			nal identif		
		me 🕨		no. 🕨			er (PIN)		
Sign		der penalties of perjury, I declare that ief, they are true, correct, and comple							
Here		ur signature		Date	Your occupation				t you an Identity
		al signature		Date					N, enter it here
Joint return?					SOFTWARE 1	ENGINEER	(see	inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, bot	t h must sign.	Date	Spouse's occupat	ion			t your spouse an
Keep a copy for your records.	,							inst.) 🕨 🚺	ction PIN, enter it here
	b				SOFTWARE 1	ENGINEER	(000)		
		one no. eparer's name P	reparer's signat	Email address		Date	PTIN		Check if:
Paid			1 0		רווסתא תאדדאי			,700	Self-employed
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM S'		rani sagak	GUPIA TALLAM	03/29/2024	P02082		
Use Only		m's name ► GLOBAL TAXE m's address ► 245 ROONEY		NOWICK N	J 08816				678)965-9522
				NOWICK N			Firm	's EIN ►	
GO TO WWW.Irs.go	ov/Forn	n1040 for instructions and the latest i	intormation.		BAA	REV 09/09/22 PRO			Form 1040 (2021)

	1116			Fore	eign Tax	x Cr	edit				C	OMB No. 1545-0121
Form				(Indiv	idual, Estat	te, or [.]	Trust)		CODY	1		2021
	tment of the Treasury al Revenue Service (99)	► Go	Attach to www.irs.		040, 1040-SF 116 for instr					T		Attachment Sequence No. 19
Nam	9							Identify	ving number a	as shown	on pag	e 1 of your tax return
	AZ IQBAL & SOE								09-4256			
	a separate Form 1116 6. Report all amounts in						of Incor	ne in the ins	tructions. Cl	heck onl	y one	box on each Form
a	Section 951A categor	y income	c 🗌 Passiv	e category i	income	e 🗌 s	Section	901(j) incom	е	g] Lum	p-sum distributions
b	Foreign branch catego	ory income	d 🗙 Genera	al category i	income	f 🗌 C	Certain i	ncome re-so	ourced by tre	eaty		
h B	esident of (name of (197									
	e: If you paid taxes to			ry or U.S.	possession	, use (column	A in Part I	and line A	in Part	II. If y	ou paid taxes to
	e than one foreign of	-	-		-					-		
Pa	rt I Taxable Inc	ome or Los	ss From S	ources O						hecke	d abo	,
				_		reign (Country	or U.S. Po	1		(Add	Total cols. A, B, and C.)
i	Enter the name				A Pakistan			В	С		(Auu	
4.					PAKIStan	1						
1	 Gross income from above and of t 											
	instructions):	WAGES										
					3,9	49.					1a	3,949.
I	Check if line 1a is services as a	s compensat	ion for perse e. vour t	onal								
	compensation from	m all sources	s is \$250,000) or								
	more, and you u determine its sour											
Ded	uctions and losses (C	aution: See in	structions.):									
2	Expenses definite	ely related to	the income	on line								
	1a (attach stateme	,										
3	Pro rata share of related:	other deduc	tions not de	efinitely								
i	a Certain itemized d	leductions or	standard de	duction								
	(see instructions) .				25,1	00.						
	Other deductionsAdd lines 3a and 3		,		25,1	0.0						
	d Gross foreign sour					49.						
	e Gross income from			· ·		49.						
1						000						
9	g Multiply line 3c by				25,1	00.						
4	Pro rata share of in			· · ·								
á	 Home mortgage Home Mortgage Ir 	•										
1	o Other interest exp											
5	Losses from foreig											
6	Add lines 2, 3g, 4a				25 , 1						6	25,100.
7	Subtract line 6 from					age 2				. 🕨	7	-21,151.
Pa	rt II Foreign Tax Credit is claimed	es Paid or	Accrued	(see instr	uctions)							
>	for taxes (you must check one)				Foi	reign ta	xes paid	l or accrued				
Country	(j) 🗙 Paid		In foreign o	currency					In U.S. d	ollars		
no	(k) Accrued	Taxes v	withheld at sour	rce on:	(p) Other		Taxes w	ithheld at sou	rce on:	(t) Ot foreign		(u) Total foreign taxes paid or
0	(I) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	foreign taxes paid or	(q) Div	vidends	(r) Rents and royalties	(s) Interest	paid	or	accrued (add cols.
-	12/31/2021		ana ioyallies		accrued			and royanies		accru	1ed 89.	(q) through (t))
A B	12/31/2021									3	. ۲٥	389.
C												
8	Add lines A throu	ıgh C, colum	n (u). Enter	the total h	ere and on	line 9,	page 2	2		. 🕨	8	389.
E a se l	Paparwork Poduction	A at Nation	in star					EV 00/00/22 DE				Eorm 1116 (2021)

For Paperwork Reduction Act Notice, see instructions. BAA

Form **1116** (2021)

Form 11	16 (2021)				Page 2
Part	III Figuring the Credit				
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	389.		
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year	10			
	(If your income was section 951A category income (box a above Part I), leave line 10 blank.)				
11	Add lines 9 and 10	11	389.	-	
12	Reduction in foreign taxes (see instructions)	12	()	-	
13	Taxes reclassified under high tax kickout (see instructions)	13		-	
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes	avail	able for credit	14	389.
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions	15	01 151		
16	Adjustments to line 15 (see instructions)	16	-21,151.	-	
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	-21,151.		
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption	18			
	Caution: If you figured your tax using the lower rates on qualified or instructions.	livider	nds or capital gains, see		
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"			19	
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, li 1040), line 2. Estates and trusts: Enter the amount from Form 104 total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and the from Form 1040-NR, line 16	1, Sc	hedule G, line 1a; or the	20	
	Caution: If you are completing line 20 for separate category g (lump-s Form 8978, Partner's Additional Reporting Year Tax, see instructions.	um di	stributions), or, if you file		
21	Multiply line 20 by line 19 (maximum amount of credit)			21	
22	Increase in limitation (section 960(c))			22	
23	Add lines 21 and 22			23	
24	Enter the smaller of line 14 or line 23. If this is the only Form 111 through 32 and enter this amount on line 33. Otherwise, complete the instructions	appro	priate line in Part IV. See	24	
Part	V Summary of Credits From Separate Parts III (see instr	uctio	ns)		
25	Credit for taxes on section 951A category income	25			
26	Credit for taxes on foreign branch category income	26			
27	Credit for taxes on passive category income	27		-	
28	Credit for taxes on general category income	28			
29	Credit for taxes on section 901(j) income	29			
30	Credit for taxes on certain income re-sourced by treaty	30			
31 32	Credit for taxes on lump-sum distributions	31		20	
32 33	Add lines 25 through 31 .			32 33	
33 34	Reduction of credit for international boycott operations. See instruction			33	
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter I				
00	1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, I			35	0.

	HEDULE B rm 1116)		Forei	gn Tax Carry	over Reconc	iliation Scheo	dule			
•	ember 2021)	For calendar	year 20, or othe			20, and ending	,,2	20	0	MB No. 1545-0121
	rtment of the Treasury				e separate instructio Attach to Form 1116		COPY 1			
	nal Revenue Service		► Go to	o www.irs.gov/Form1	116 for instructions a	and the latest informa	tion.			
Nam	1e									ving number as shown e 1 of your tax return
AJ	AZ IQBAL & SOBIA	SATTAR								09-4256
Use a separate Schedule B (Form 1116) for each applicable category of income listed below. See instructions. Check only one box on each schedule.										
Check the box for the same separate category code as that shown on the Form 1116 to which this Schedule B is attached.										
	Reserved for future			category income	e Section 9	0,	-	_ump-sum dis	stributi	ons
	Foreign branch cate					come re-sourced by				
n i	If box e is checked, en If box f is checked, ent									
				country. See instru				🕨		
	Foreign Tax Carryo Reconciliation		(i) 10th Preceding Tax Year	(ii) 9th Preceding Tax Year	(iii) 8th Preceding Tax Year	(iv) 7th Preceding Tax Year	(v) 6th Preceding Tax Year	(vi) 5th Precedi Tax Year		(vii) Subtotal (add columns (i) through (vi))
1	Foreign tax carryover from tax year (enter amounts fr appropriate columns of lin worksheet in the instruction	rom the ne 6 of the	0.	0.	0.	0.	0.		0.	0.
2	Adjustments to line 1 (ent description – see instructi									
а	Carryback adjustment (see	e instructions)								
b	Adjustments for section 9 redeterminations (see inst		0.	0.	0.	0.	0.		0.	0.
с			0.	0.	0.	0.	0.		0.	0.
d			0.	0.	0.	0.	0.		0.	0.
e			0.	0.	0.	0.	0.		0.	0.
f			0.	0.	0.	0.	0.		0.	0.
			0.	0.	0.	0.	0.		0.	0.
3	Adjusted foreign tax carry prior tax year (combine lir		0.	0.	0.	0.	0.		0.	0.
4	Foreign tax carryover use tax year (enter as a negati	d in current	0.	0.	0.	0.	0.		0.	0.
5	Foreign tax carryover exp in current tax year (enter a number)	ired unused	0.							0.
6	Foreign tax carryover gen current tax year	erated in								
7	Actual or estimated amou to be carried back to prior (enter as a negative numb	r tax year								
8	Foreign tax carryover to the tax year. Combine lines 3		-0-	0.	0.	0.	0.		0.	0.

For Paperwork Reduction Act Notice, see the separate instructions.

REV 09/09/22 PRO

Sche	dule B (Form 1116) (12-2021)							Page 2
	Foreign Tax Carryover Reconciliation <i>(continued)</i>	(viii) Subtotal from page 1 (enter the amounts from column (vii) on page 1)	(ix) 4th Preceding Tax Year	(x) 3rd Preceding Tax Year	(xi) 2nd Preceding Tax Year	(xii) 1st Preceding Tax Year	(xiii) Current Tax Year	(xiv) Totals (add columns (viii) through (xiii))
1	Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 6 of the worksheet in the instructions)	0.	0.	0.	0.	0.		0.
2	Adjustments to line 1 (enter description—see instructions):							
а	Carryback adjustment (see instructions)					0.		0.
b	Adjustments for section 905(c) redeterminations (see instructions)	0.	0.	0.	0.	0.		0.
С		0.	0.	0.	0.	0.		0.
d		0.	0.	0.	0.	0.		0.
е		0.	0.	0.	0.	0.		0.
f		0.	0.	0.	0.	0.		0.
g		0.	0.	0.	0.	0.		0.
3	Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1116, Part III, line 10.	0.	0.	0.	0.	0.		0.
4	Foreign tax carryover used in current tax year (enter as a negative number)	0.	0.	0.	0.	0.		0.
5	Foreign tax carryover expired unused in current tax year (enter as a negative number)	0.						0.
6	Foreign tax carryover generated in current tax year						389.	389.
7	Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)						0.	0.
8	Foreign tax carryover to the following tax year. Combine lines 3 through 7.	0.	0.	0.	0.	0.	389.	389.

BAA

REV 09/09/22 PRO

Schedule B (Form 1116) (12-2021)

Schedule B (Form 1116) (12-2021)

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents



OMB No. 1545-0074

21

20 Attachment Sequence No. 47

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Internal Revenue Service (99)
Name(s) shown on return

Department of the Treasury

			al security number
		731-0	9-4256
Part			
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	. 1	3,949.
2a	Enter income from Puerto Rico that you excluded	_	
b		0.	
c	Enter the amount from line 15 of your Form 4563 2c		
d	Add lines 2a through 2c	. <u>2</u> d	
3	Add lines 1 and 2d	. 3	3,949.
4a		3.	
b		1.	
c		2.	
5	If line 4a is more than zero, enter the amount from the Line 5 Worksheet; otherwise, enter -0	. 5	9,600.
6	Number of other dependents, including any qualifying children who are not under age18 or who do not have the required social security number6	0.	
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resider alien. Also, do not include anyone you included on line 4a.	nt	
7	Multiply line 6 by \$500	. 7	
8	Add lines 5 and 7	. 8	9,600.
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	
12	Subtract line 11 from line 8. If zero or less, enter -0-		
13	Check all the boxes that apply to you (or your spouse if married filing jointly).		
	A Check here if you (or your spouse if married filing jointly) had a principal place of abode in the United State	es	
	for more than half of 2021		
	B Check here if you (or your spouse if married filing jointly) were a bona fide resident of Puerto Rico for 2021		
Part	I-B Filers Who Check a Box on Line 13		
Cautio	on: If you did not check a box on line 13, do not complete Part I-B; instead, skip to Part I-C.		
14a	Enter the smaller of line 7 or line 12	. 14	a
b	Subtract line 14a from line 12	. 14	b
c	If line 14a is zero, enter -0-; otherwise, enter the amount from the Credit Limit Worksheet A		c
d	Enter the smaller of line 14a or line 14c	. 14	d
e	Add lines 14b and 14d	. 14	e
f	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received	ed	
	for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see th	ne	
	instructions before entering an amount on this line. If you didn't receive any advance child tax credit paymen		e
	for 2021, enter -0-		1
	Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.	11	
-		14	
g	Subtract line 14f from line 14e. If zero or less, enter -0- on lines 14g through 14i and go to Part III		5
h	Enter the smaller of line 14d or line 14g. This is your credit for other dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR		h
i	Subtract line 14h from line 14g. This is your refundable child tax credit. Enter this amount on line 28 (•
1			
	your Form 1040, 1040-SR, or 1040-NR	. 14	•

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Part	I-C Filers Who Do Not Check a Box on Line 13		
Cautio	n: If you checked a box on line 13, do not complete Part I-C.		
15a	Enter the amount from the Credit Limit Worksheet A	15a	0.
b	Enter the smaller of line 12 or line 15a	15b	0.
	Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items.		
	1. You are not filing Form 2555.		
	2. Line 4a is more than zero.		
	3. Line 12 is more than line 15a.		
c	If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0	15c	217.
d	Add lines 15b and 15c	15d	217.
e	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0-	15e	0.
	Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.		
f	Subtract line 15e from line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III	15f	217.
g	Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax credit and credit for other		
8	dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR	15g	Ο.
h	Subtract line 15g from line 15f. This is your additional child tax credit. Enter this amount on line 28 of your		
	Form 1040, 1040-SR, or 1040-NR	15h	217.
Part	II-A Additional Child Tax Credit (use only if completing Part I-C)		
	n: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.		
Cautio	on: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child ta	x credi	t
16a	Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27	16a	9,600.
b	Number of qualifying children under 18 with the required social security number: $3 x $1,400$.		
	Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27	16b	4,200.
	TIP: The number of children you use for this line is the same as the number of children you used for line 4a.		
17	Enter the smaller of line 16a or line 16b	17	4,200.
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 \dots 19 1, 449.		
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	217.
	Next. On line 16b, is the amount \$4,200 or more?		
	No. If line 20 is zero, enter -0- on line 15c. 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			
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, 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 . 22 0.		
23	Add lines 21 and 22		
24	1040 and		
	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27a, and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11. J 24		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	0.
26	Enter the larger of line 20 or line 25	26	217.
	Next, enter the smaller of line 17 or line 26 on line 27.		
Part			
27	Enter this amount on line 15c	27	217.
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Part III Additional Tax (use only if line 14g or line 15f, whichever applies, is zero)				
28a	Enter the amount from line 14f or line 15e, whichever applies	28a		
b	Enter the amount from line 14e or line 15d, whichever applies	28b		
29	Excess advance child tax credit payments. Subtract line 28b from line 28a. If zero, stop; you do not owe the additional tax	29		
30	Enter the number of qualifying children taken into account in determining the annual advance amount you received for 2021. See your Letter 6419 for this number. If you are missing your Letter 6419, you are filing a joint return, or you received more than one Letter 6419, see the instructions before entering a number on this line	30		
	Caution: If the amount on this line doesn't match the number of qualifying children reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.			
31	Enter the smaller of line 4a or line 30	31		
32	Subtract line 31 from line 30. If zero, skip to line 40 and enter the amount from line 29; otherwise, continue to line 33	32		
33	Enter the amount shown below for your filing status.			
	• Married filing jointly or Qualifying widow(er)—\$60,000			
	• Head of household—\$50,000			
	• All other filing statuses—\$40,000	33		
34	Subtract line 33 from line 3. If zero or less, enter -0	34		
35	Enter the amount from line 33	35		
36	Divide line 34 by line 35. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or more, enter 1.000	36		
37	Multiply line 32 by \$2,000	37		
38	Multiply line 37 by line 36	38		
39	Subtract line 38 from line 37	39		
40	Subtract line 39 from line 29. If zero or less, enter -0 This is your additional tax. If more than zero, enter			
	this amount on Schedule 2 (Form 1040), line 19	40		
	BAA REV 09/09/22 PRO Sch	hedule 8812 (Form	1040) 2021	

Form	8867	Paid Preparer's Due Diligence Che	ecklist	OMB No. 1545	5-0074		
		Earned Income Credit (EIC), American Opportunity Tax Cred Child Tax Credit (CTC) (including the Additional Child Tax Cred Credit for Other Dependents (ODC)), and Head of Household (HC	dit (AOTC), lit (ACTC) and				
(Rev. December 2021)		Credit for Other Dependents (ODČ)), and Head of Household (HC	DH) Filing Status	Attachment			
	nent of the Treasury Revenue Service	 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. 			Sequence No. 70		
Taxpaye	er name(s) shown or	n return	Taxpayer ident	tification number			
		SOBIA SATTAR	731-09-4	4256			
Enter pr	reparer's name and	PTIN					
		M SAGAR GUPTA TALLAM	P020827	03			
Part		igence Requirements					
		propriate box for the credit(s) and/or HOH filing status claimed on t ned (check all that apply).	•		arts I–V HOH		
1		lete the return based on information for the applicable tax year pro obtained by you? (See instructions if relying on prior year earned inc		Yes No	N/A		
2	worksheets fo 1040) instruct worksheet(s) t	claimed on the return, did you complete the applicable EIC an bund in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or cions, and/or the AOTC worksheet found in the Form 8863 instr that provides the same information, and all related forms and sche	Schedule 8812 (Form ructions, or your own				
3		y the knowledge requirement? To meet the knowledge requirement	, you must do both of				
		e taxpayer, ask questions, and contemporaneously document the ta nat the taxpayer is eligible to claim the credit(s) and/or HOH filing sta					
		rmation to determine that the taxpayer is eligible to claim the cred o figure the amount(s) of any credit(s)					
4	information re	mation provided by the taxpayer or a third party for use in pre- asonably known to you, appear to be incorrect, incomplete, or in ons 4a and 4b. If " No, " go to question 5.)	consistent? (If "Yes,"				
а	Did you make	reasonable inquiries to determine the correct, complete, and consis	tent information? .				
b	you asked, wh	emporaneously document your inquiries? (Documentation should nom you asked, when you asked, the information that was provide ad on your preparation of the return.)	d, and the impact the				
5	keep a copy c applicable wo 8867 and any	y the record retention requirement? To meet the record retention r of your documentation referenced in question 4b, a copy of this Forr rksheet(s), a record of how, when, and from whom the information applicable worksheet(s) was obtained, and a copy of any docume you relied on to determine eligibility for the credit(s) and/or HOH fil	m 8867, a copy of any used to prepare Form ent(s) provided by the				
	the amount(s)	of the credit(s)	•				
6	credit(s) and/o	ne taxpayer whether he/she could provide documentation to substa or HOH filing status and the amount(s) of any credit(s) claimed or ted for audit?	n the return if his/her				
7		e taxpayer if any of these credits were disallowed or reduced in a pr					
	•	re disallowed or reduced, go to question 7a; if not, go to questio	-				
а	Did you comp	lete the required recertification Form 8862?					
8	If the taxpayer correct Sched	r is reporting self-employment income, did you ask questions to proule C (Form 1040)?	epare a complete and				
For Pa		tion Act Notice, see separate instructions. REV 09/09/22 PR		Form 8867 (Rev.	12-2021)		

Form 8	367 (Rev. 12-2021)			Page 2
Part	II Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	Yes	No	N/A
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?			
с Part	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)?	claim (D TC, A	CTC,
	or ODC, go to Part IV.)			
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?	×		
Part			Part \	<u> </u>
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the quituition and related expenses for the claimed AOTC?	alified	Yes	No
Part			o Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax		Yes	No
	and provided more than half of the cost of keeping up a home for the year for a qualifying person?			
Part	 Eligibility Certification You will have complied with all due diligence requirements for claiming the applicable credit(s) and the applicable credit(s) are applicable credit(s) and the applicable credit(s) are appl	nd/or H	OH fili	ng
	status on the return of the taxpayer identified above if you:			
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's respo in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(status and to figure the amount(s) of the credit(s);			
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this check credit(s) claimed and HOH filing status, if claimed;	list for a	iny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 Document Retention.	67 instr	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	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).	-	-	
	A record of how, when, and from whom the information used to prepare this form and the applica obtained.			
	5. A record of any additional information you relied upon, including questions you asked and the tax determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount			
	If you have not complied with all due diligence requirements, you may have to pay a penalty for e comply related to a claim of an applicable credit or HOH filing status (see instructions for more in			
			V	NI-

15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and	Yes	No
	complete?	×	
	REV 09/09/22 PRO Form 88	67 (Rev.	12-2021)