# Form **8879**

(Rev. January 2021)

Department of the Treasury 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.

OMB No. 1545-0074

Submi	ssion Identification Number (SID)			•		
Taxpaye	r's name	Se	ocial security	number		
HAR]	IKRISHNA ANUMANDLA		277-21-	0147		
Spouse's	s name	Sı	pouse's soci	al security	number	
NEEF	HARIKA CHINTA		416-89-	4193		
Part	Tax Return Information — Tax Year Ending Decem	nber 31, 2023 (Enter ye	ear you ar	e autho	rizing.)	1
Enter v	whole dollars only on lines 1 through 5.					
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blar	nk.				
1	Adjusted gross income			1	110,	,319.
2	Total tax		[	2		0.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	12,	868.
4	Amount you want refunded to you			4	13,	499.
5	Amount you owe			5		
Part	II Taxpayer Declaration and Signature Authorization	(Be sure you get and kee	ер а сору	of you	ır retur	n)
return (control to send for any Agent to paymer authorize paymer business taxes to personal	owledge and belief, it is true, correct, and complete. I further declare the original or amended) I am now authorizing. I consent to allow my intermet I my return to the IRS and to receive from the IRS (a) an acknowledgement delay in processing the return or refund, and (c) the date of any refund. It is initiate an ACH electronic funds withdrawal (direct debit) entry to the first of my federal taxes owed on this return and/or a payment of estimated zation is to remain in full force and effect until I notify the U.S. Treasurnt, I must contact the U.S. Treasury Financial Agent at 1-888-353-453 and says prior to the payment (settlement) date. I also authorize the finance or receive confidential information necessary to answer inquiries and real identification number (PIN) below is my signature for the income tax renic Funds Withdrawal Consent.	diate service provider, transmitteent of receipt or reason for rejection of applicable, I authorize the U.S. nancial institution account indicated tax, and the financial institution to ye Financial Agent to terminate the IT. Payment cancellation requestial institutions involved in the prospect of the payment cancellation requestial institutions involved in the payment cancellation to the payment cancellation the prospect of the payment cancellation the payment cancellation to the payment cancel according to the payment cancel according to the payment of the properties of the payment o	r, or electron on of the tra Treasury and ded in the tall to debit the electronical ts must be becessing of ment. I furth	nic returnansmission its des x prepara entry to to to to received the electure acknown as well as to the electure received the electure received the	n originate on, (b) the ignated F ation soft his accourevoke (c I no later ronic pay owledge	or (ERO) e reason financial ware for unt. This cancel) a r than 2 ment of that the
	yer's PIN: check one box only					
<b>X</b>		to enter or generate my	PIN [1]		4   7	as my
	ERO firm name signature on the income tax return (original or amended) I am r		Ente	er five dig 't enter al		,
	I will enter my PIN as my signature on the income tax return (c if you are entering your own PIN <b>and</b> your return is filed using below.					
Your s	ignature ▶	Date ▶				
Snous	e's PIN: check one box only					
X		to enter or generate my		4 1 er five dig	9 3	as my
	signature on the income tax return (original or amended) I am r	ow authorizing.		't enter al		
	I will enter my PIN as my signature on the income tax return (c if you are entering your own PIN <b>and</b> your return is filed using below.					
Spous	e's signature ►	Date <b>▶</b>				
	Practitioner PIN Method Return					
Part	II Certification and Authentication — Practitioner Pl	N Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit se	elf-selected PIN. 2 2 2	4 9 6			1
authoriz	that the above numeric entry is my PIN, which is my signature for the extended to file for tax year indicated above for the taxpayer(s) indicated above ments of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorities	ove. I confirm that I am submittir	ng this retur	n in acc	ordance	
ERO's	signature ►	Date <b>▶</b>				
	ERO Must Retain This Form	- See Instructions				

Don't Submit This Form to the IRS Unless Requested To Do So

# E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2023
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OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding _		, 20	See sep	parate instructions.
Your first name	and m	iddle initial	Last na	ıme				Your so	cial security number
HARIKRIS	ANHS		ANUN	MANDLA				277	21 0147
-		s first name and middle initial	Last na						s social security number
NEEHARII	ζA		CHIN	JTA				416	89 4193
		er and street). If you have a P.O. box, see					Apt. no.		ntial Election Campaig
109 OSI	ER P	ASS						Check h	nere if you, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	ate	ZIP code	1 .	if filing jointly, want \$3
HUTTO					T	X	78634	1 -	this fund. Checking a ow will not change
Foreign country	y name			Foreign province/state/	coun	ty	Foreign postal code		or refund.
									You Spous
Filing Status	s $\square$	Single				Head of ho	usehold (HOH)	•	
Check only	_	Married filing jointly (even if only o	ne had	income)					
one box.		Married filing separately (MFS)				Qualifying	surviving spouse	(QSS)	
	If y	you checked the MFS box, enter the	name o	of your spouse. If you	u ch	ecked the HOH	or QSS box, ente	er the chi	ld's name if the
	qu	alifying person is a child but not you	ır depei	ndent:					
Digital	Δt aı	ny time during 2023, did you: (a) rec	aiva (as	a reward award or	navi	ment for proper	ty or services): or	r (h) sell	
Digital Assets		nange, or otherwise dispose of a dig	•				•	. ,	☐ Yes ☒ No
Standard		neone can claim:  You as a de					, (	,	
Deduction	_	Spouse itemizes on a separate retur	•			•			
				_	unoi				
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind Spo	ouse	: U Was bori	n before January		Is blind
Dependent				(2) Social security	y	(3) Relationshi	P   ' '		fies for (see instructions)
If more	<u> </u>	irst name Last name		number		to you	Child tax o	redit	Credit for other dependent
than four	RIY	YANKRISHNA ANUMANDLA		749-94-860	6	Son	X		
dependents, see instruction	s						<u> </u>		<u> </u>
and check	, —						<u> </u>		<u> </u>
here L				<u> </u>					
Income	1a	Total amount from Form(s) W-2, b	•	•				. 1a	-
Attach Form(s)	b	Household employee wages not re	•	• •				. 1b	
W-2 here. Also	C	Tip income not reported on line 1a	•	•				. 1c	
attach Forms W-2G and	d	Medicaid waiver payments not rep		.,,	nstru	uctions)		. 1d	
1099-R if tax	e	Taxable dependent care benefits f		•				. <u>1e</u>	
was withheld.	f	Employer-provided adoption bene		·				. <u>1f</u>	
If you did not get a Form	g	Wages from Form 8919, line 6 .						. 1g	
W-2, see	h :	Other earned income (see instruct	,				· · · · ·	. 1h	0.
instructions.	l -	Nontaxable combat pay election (s	see inst	rucuons)		<u>1i</u>	1		110,281.
Attach Cala D	<u>z</u> 2a	Add lines 1a through 1h  Tax-exempt interest	2a	<u>i</u>	 ьт	axable interest		. 1z	
Attach Sch. B if required.	2a 3a	·	2a 3a	38.		axable interest Ordinary dividen	 ds	. 3b	2.0
	<u>3a</u> _ 4a		4a			axable amount		. 4b	
Standard	5a		5a			axable amount		. 5b	
Deduction for— Single or	6a		6a			axable amount		. 6b	
Married filing	C	If you elect to use the lump-sum e		method, check here					
separately, \$13,850	7	Capital gain or (loss). Attach Sche		,	`	,			
Married filing jointly or	8	Additional income from Schedule		•		•		. 8	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						. 9	110,319.
surviving spouse, \$27,700	10	Adjustments to income from Sche		•				. 10	
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is	-					. 11	110,319.
\$20,800	12	Standard deduction or itemized	-					. 12	
If you checked any box under	13	Qualified business income deduct		•	,	95-A		. 13	
Standard Deduction,	14							. 14	
see instructions.	15	Subtract line 14 from line 11. If zer				tavahla incom	<b>a</b>	15	

Form 1040 (2023	3)							Page <b>2</b>	
Tax and	16	Tax (see instructions). Check if any from Form	m(s): <b>1</b> 881	4 <b>2</b> 4972	3 🗌		16	9,469.	
Credits	17	Amount from Schedule 2, line 3					17		
	18	Add lines 16 and 17					18	9,469.	
	19	Child tax credit or credit for other depende	nts from Sched	lule 8812			19	1,369.	
	20	Amount from Schedule 3, line 8					20	8,100.	
	21	Add lines 19 and 20					21	9,469.	
	22	Subtract line 21 from line 18. If zero or less	, enter -0				22	0.	
	23	Other taxes, including self-employment tax					23	0.	
	24	Add lines 22 and 23. This is your total tax					24	0.	
Payments	25	Federal income tax withheld from:							
•	а	Form(s) W-2			<b>25a</b> 12	2,868.			
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c					25d	12,868.	
If you have a	26	2023 estimated tax payments and amount	applied from 20	022 return			26		
qualifying child,	27	Earned income credit (EIC)		No .	27				
attach Sch. EIC.	28	Additional child tax credit from Schedule 881	2		28	631.			
	29	American opportunity credit from Form 886	33, line 8		29				
	30	Reserved for future use			30				
	31	Amount from Schedule 3, line 15			31				
	32	Add lines 27, 28, 29, and 31. These are you	ır total other p	ayments and refu	indable credits		32	631.	
	33	Add lines 25d, 26, and 32. These are your t	total payments				33	13,499.	
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33	. This is the amour	nt you <b>overpaid</b>		34	13,499.	
	35a	Amount of line 34 you want refunded to yo		8 is attached, chec	ck here	🗆	35a	13,499.	
Direct deposit?	b	Routing number 1 1 1 1 0 0 0 0			Checking	Savings			
See instructions.	d	Account number 4 8 8 0 6 0 7	2 5 0	0 2					
	36	Amount of line 34 you want applied to you	r 2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24. This is the <b>an</b> For details on how to pay, go to www.irs.go	•				37		
	38	Estimated tax penalty (see instructions) .			38				
Third Party Designee		you want to allow another person to distructions	scuss this retu	rn with the IRS?	_	omplete l	pelow.	X No	
	De	signee's	Phone	•	Pers	onal identi	fication		
		me	no.			ber (PIN)			
Sign Here		der penalties of perjury, I declare that I have examin lief, they are true, correct, and complete. Declaration						,	
пеге	Yo	ur signature	Date	Your occupation		If the	If the IRS sent you an Identity		
							ection P inst.)	IN, enter it here	
Joint return? See instructions.			-	SOFTWARE E					
Keep a copy for your records.	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Date Spouse's occupation  SOFTWARE ENGINEER			If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Ph	one no. (786)238-3837	Email address	ANUMANDLA.H		'MC			
D-:-I		eparer's name Preparer's sign	ature		Date	PTIN		Check if:	
Paid	SYA	M PRIYA RAM SAGAR GUPTA SYAM PRI	YA RAM SA	GAR GUPTA	04/03/2024	P0208	2703	Self-employed	
Preparer		m's name GLOBAL TAXES LLC					ne no. (678)965-9522		
Use Only		m's address 245 ROONEY CT E BR	UNSWICK N	J 08816			's EIN		
	/_	40406 1 1 11 11 11 11 11 11						- 1010 (	

# SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

## **Additional Credits and Payments**

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

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

OMB No. 1545-0074

2023

Attachment
Sequence No. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR HARIKRISHNA ANUMANDLA & NEEHARIKA CHINTA Your social security number 277-21-0147

	Nonretundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses from Form 2441, line 11. A Form 2441	ttach	2	600.
3	Education credits from Form 8863, line 19		3	
4	Retirement savings contributions credit. Attach Form 8880		4	
5a	Residential clean energy credit from Form 5695, line 15		5a	
b	Energy efficient home improvement credit from Form 5695, line 32		5b	
6	Other nonrefundable credits:			
а	General business credit. Attach Form 3800 6a			
b	Credit for prior year minimum tax. Attach Form 8801 6b			
С	Adoption credit. Attach Form 8839 6c			
d	Credit for the elderly or disabled. Attach Schedule R 6d			
е	Reserved for future use			
f	Clean vehicle credit. Attach Form 8936 6f	,500.		
g	Mortgage interest credit. Attach Form 8396 6g			
h	District of Columbia first-time homebuyer credit. Attach Form 8859 6h			
i	Qualified electric vehicle credit. Attach Form 8834 6i			
j	Alternative fuel vehicle refueling property credit. Attach Form 8911 6j			
k	Credit to holders of tax credit bonds. Attach Form 8912 <b>6k</b>			
I	Amount on Form 8978, line 14. See instructions 6I			
m	Credit for previously owned clean vehicles. Attach Form 8936 . <b>6m</b>			
z	Other nonrefundable credits. List type and amount:			
	6z			
7	Total other nonrefundable credits. Add lines 6a through 6z		7	7,500.
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 1040, 1040-S	SR, or		
	1040-NR, line 20		8	8,100.

Schedule 3 (Form 1040) 2023 Page **2** 

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

# 2441

### **Child and Dependent Care Expenses**

OMB No. 1545-0074

provided in 2024, don't include these expenses in column (d) of line 2 for 2023. See the instructions.

Form					$\bigcirc \bigcirc $
Department of the Treasury	Attach to Form 1040, 10	40-SR, or 1040-NR.			
Internal Revenue Service Go to www.irs.gov/Form2441 for instructions and the latest information.					Attachment Sequence No. <b>21</b>
Name(s) shown on return				Your social s	security number
HARIKRISHNA ANU	JMANDLA & NEEHARIKA CHINTA			277-21-	0147
	redit for child and dependent care expenses if you he instructions under <i>Married Persons Filing Sep</i>	-	• .	-	
	se was a student or was disabled during 2023 and e income rules listed in the instructions under If You				
	or Organizations Who Provided the Carve more than three care providers, see the				
1 (a) Care provider's name	(b) Address (number, street, apt. no., city, state, and ZIP code)	(c) Identifying number (SSN or EIN)	(d) Was the care p household employ For example, this ger nannies but not day (see instruc	ree in 2023? nerally includes rcare centers.	(e) Amount paid (see instructions)
	449 ED SCHMIDT BLVD				

449 ED SCHMIDT BLVD Yes X No HUTTO TX 78634 81-4150204 AMAZING EXPLORERS ACADEMY OF HUTTO 3,945. ☐ Yes □No ☐ Yes □No No - Complete only Part II below. Did you receive

dependent care benefits? Complete Part III on page 2 next. Caution: If the care provider is your household employee, you may owe employment taxes. For details, see the Instructions for Schedule H (Form 1040). If you incurred care expenses in 2023 but didn't pay them until 2024, or if you prepaid in 2023 for care to be

#### **Credit for Child and Dependent Care Expenses** Part II Information about your qualifying person(s). If you have more than three qualifying persons, see the instructions and check this box (c) Check here if the (d) Qualified expenses (a) Qualifying person's name (b) Qualifying person's you incurred and paid qualifying person was over in 2023 for the person social security number age 12 and was disabled. First Last (see instructions) listed in column (a) RIYANKRISHNA ANUMANDLA 749-94-8606 3,945. Add the amounts in column (d) of line 2. **Don't** enter more than \$3,000 if you had one qualifying person 3 or \$6,000 if you had two or more persons. If you completed Part III, enter the amount from line 31 3 3,000. Enter your **earned income**. See instructions . . . . . . . . . . . . 70,281. 4 4 If married filing jointly, enter your spouse's earned income (if you or your spouse was a student 5 or was disabled, see the instructions); all others, enter the amount from line 4 . . . . . . . 5 40,000. 6 Enter the **smallest** of line 3, 4, or 5 . . . . . . . . . . . . 3,000. 7 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11 . . . Enter on line 8 the decimal amount shown below that applies to the amount on line 7. If line 7 is: If line 7 is: If line 7 is: **But not** But not Decimal But not **Decimal Decimal** Over Over Over amount is over amount is over amount is over \$0 - 15,000\$25,000-27,000 .29 \$37,000 - 39,000.23 .28 .22 15,000 - 17,000.34 27,000 - 29,00039,000 - 41,000X .20 8 17,000 - 19,000.33 29,000-31,000 .27 41,000 - 43,000.21 19,000-21,000 .32 31,000 - 33,000.26 43,000-No limit .20 21,000-23,000 .31 33,000-35,000 .25 23,000-25,000 .30 35,000 - 37,000.24 9a Multiply line 6 by the decimal amount on line 8 600. . . . . . . . If you paid 2022 expenses in 2023, complete Worksheet A in the instructions. Enter the amount from line 13 of the worksheet here. Otherwise, enter -0- on line 9b and go to line 9c . . . . . 9b 0. c Add lines 9a and 9b and enter the result 9с 600. Tax liability limit. Enter the amount from the Credit Limit Worksheet in the instructions 10 10 Credit for child and dependent care expenses. Enter the smaller of line 9c or line 10 here and on Schedule 3 (Form 1040), line 2 . . . . . . . . . . . . . . . 600. 11

#### SCHEDULE 8812 (Form 1040)

# Credits for Qualifying Children and Other Dependents

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

2023

OMB No. 1545-0074

Attachment Sequence No. 47

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Your social security number HARIKRISHNA ANUMANDLA & NEEHARIKA CHINTA 277-21-0147 Child Tax Credit and Credit for Other Dependents 1 Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR 1 110,319. Enter income from Puerto Rico that you excluded . . . . . 2a Enter the amounts from lines 45 and 50 of your Form 2555 . . . b 2b 0 c Enter the amount from line 15 of your Form 4563 . . . . Add lines 2a through 2c . . . . . . . . . . . . . . . . 2d 3 3 110,319. 4 Number of qualifying children under age 17 with the required social security number 5 5 2,000. Number of other dependents, including any qualifying children who are not under age 6 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 7 8 Add lines 5 and 7 . . . . . . . . 8 2,000. Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 9 400,000. Subtract line 9 from line 3. 10 • 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 11 0. Is the amount on line 8 more than the amount on line 11? . . . 12 2,000. 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. **X** Yes. Subtract line 11 from line 8. Enter the result. 13 Enter the amount from Credit Limit Worksheet A 13 1,369. Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents 1,369.

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.

Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.

BAA

Schedule 8812 (Form 1040) 2023

Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line	e 27 .	
16a	Subtract line 14 from line 12. If zero, <b>stop here</b> ; you cannot take the additional child tax credit. Skip Parts II-A		
	and II-B. Enter -0- on line 27	16a	631.
b	Number of qualifying children under 17 with the required social security number: 1 x \$1,600.		
	Enter the result. If zero, <b>stop here</b> ; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	1,600.
	<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 <b>smaller</b> of line 16a or line 16b	17	631.
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.		
	X Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19 107,781.		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\dots \dots \dots \dots \dots \dots \dots \dots \dots$	20	16,167.
	<b>Next.</b> 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.		. 5.
Part	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	S Of F	uerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or		
	if you are a bona fide resident of Puerto Rico, see instructions		
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 .		
23	Add lines 21 and 22	-	
		-	
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	
26	Enter the <b>larger</b> of line 20 or line 25	26	
	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	631

## 8936

### Clean Vehicle Credits

OMB No. 1545-2137 Attachmen

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form8936 for instructions and the latest information.

Name(s) shown on return Identifying number HARIKRISHNA ANUMANDLA & NEEHARIKA CHINTA 277-21-0147 Notes: • Complete a separate Schedule A (Form 8936) for each clean vehicle placed in service during the tax year. • Individuals completing Parts II, III, or IV, must also complete Part I. See "Note" text below. **Modified Adjusted Gross Income Amount** Part I 1a Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR 110,319. Enter any income from Puerto Rico you excluded 1b c Enter any amount from Form 2555, line 45 . . . . . . . . 1c Enter any amount from Form 2555, line 50 . . . . . . . . . . 1d Enter any amount from Form 4563, line 15 . . . . . . . . 1e е 2 2 Add lines 1a through 1e . . . . . . 110,319. За Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR 3a Enter any income from Puerto Rico you excluded 3b Enter any amount from Form 2555, line 45 . . . . . . 3с Enter any amount from Form 2555, line 50 . . . . 3d Enter any amount from Form 4563, line 15 . . . . . . . 4 Enter the **smaller** of line 2 or line 4 5 110,319. Credit for Business/Investment Use Part of New Clean Vehicles Part II Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$150,000 (\$300,000 if married filing jointly or a qualifying surviving spouse; \$225,000 if head of household). Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936) . . . 6 6 0. 7 New clean vehicle credit from partnerships and S corporations (see instructions) 7 Business/investment use part of credit. Add lines 6 and 7. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1y . . . 8 0. Part III **Credit for Personal Use Part of New Clean Vehicles** Note: You can't claim the Part III credit if Part I, line 5, is more than \$150,000 (\$300,000 if married filing jointly or a qualifying surviving spouse; \$225,000 if head of household). 9 Enter the total credit amount figured in Part III of Schedule(s) A (Form 8936) . 9 7,500. 10 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18 . . . 10 9,469. Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions) 11 11 600. 12 Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't claim the personal use 12 8,869. 13 Personal use part of credit. Enter the smaller of line 9 or line 12 here and on Schedule 3 (Form 13 7,500. Part IV Credit for Previously Owned Clean Vehicles Note: You can't claim the Part IV credit if Part I, line 5, is more than \$75,000 (\$150,000 if married filing jointly or a qualifying surviving spouse; \$112,500 if head of household). Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936) . . . . . . . . . 14 14 15 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18 . . . 15 16 Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions) 16 Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't claim the Part IV credit 17 17 Enter the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040), line 6m. If line 17 is 18 18 **Credit for Qualified Commercial Clean Vehicles** Part V Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936) . . . . . . . . . . . . 19 19 20 Qualified commercial clean vehicle credit from partnerships and S corporations (see instructions) . 20 21 Add lines 19 and 20. Partnerships and S corporations, stop here and report this amount on Schedule

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#### **SCHEDULE A** (Form 8936)

### **Clean Vehicle Credit Amount**

OMB No. 1545-2137

Attachment Sequence No. **69A** 

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form8936 for instructions and the latest information.

Name(s) shown on return				Identifying number				
HAR	IKRISHNA ANUMANDLA & NEEHARIKA CHINTA	27	7-21	L-014	:7			
Part	Vehicle Details							
1a	Year		2	2023				
b	Make	TE	SLA					
С	Model	_MC	DEL	Y				
2	Vehicle identification number (VIN) (see instructions) 7 S A Y G D E E C	P	А	1 1	8	6	8 4	
3		05	5/15/	/2023	;			
4	Was the vehicle used primarily outside the United States? Answer "No" if it was but an exception applies. See instructions.  ☐ Yes. Stop here. You can't claim a credit amount for a vehicle used primarily outside the United States.  ☒ No.							
5	Does the VIN entered on line 2 belong to a <b>new clean vehicle</b> placed in service during the tax definitions.  X Yes. Go to Part II.  No. Go to line 6.	year'	? See	instru	ction	າs for		
6	Does the VIN entered on line 2 belong to a <b>previously owned clean vehicle</b> acquired after 202 the tax year? See instructions for definitions.       Yes. Go to Part IV.   No. Go to line 7.	.2 an	ıd plad	ced in	serv	rice d	luring	
7	Does the VIN entered on line 2 belong to a <b>qualified commercial clean vehicle</b> acquired after during the tax year? See instructions for definitions.  Yes. Go to Part V.  No. Stop here. You can't use this schedule to figure a credit amount for a vehicle not described.						се	
Part	II Credit Amount for Business/Investment Use Part of New Clean Vehicle							
8	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person.  ☑ Yes.  ☐ No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to resale.			-				
9	Tentative credit amount (see instructions)	9				7,50	00.	
10	Business/investment use percentage (see instructions)	10					%	
11	Multiply line 9 by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you entered 100% on line 10, stop here. Otherwise, go to Part III below	11					0.	
Part	Credit Amount for Personal Use Part of New Clean Vehicle							
12	Subtract line 11 from line 9 in Part II. Stop here and include this credit amount on line 9 in Part III of Form 8936	12				7,5	00.	
			_			_		

Schedu	e A (Form 8936) 2023		Page 2
Part			
13a	Is the sales price of the vehicle more than \$25,000?		
	Yes. Stop here. The vehicle doesn't qualify for the Part IV credit.		
	∐ No.		
b	Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehic	le fror	n another person.
	☐ Yes.		
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a	cquire	ed for resale.
С	Can you be claimed as a dependent on another person's tax return, such as your parent's return	rn?	
	☐ <b>Yes. Stop here.</b> You can't claim a credit amount if you can be claimed as a dependent.		
	□ No.		
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions.		
	☐ Yes.		
	☐ No.		
		[	
14	Enter the sales price of the vehicle	14	
15	Multiply line 14 by 30% (0.30)	15	
16	Maximum vehicle credit amount	16	4,000.
10	Waximum vehicle credit amount	10	4,000.
17	Enter the smaller of line 15 or line 16. Stop here and include this credit amount on line		
	14 in Part IV of Form 8936	17	
Part	V Credit Amount for Qualified Commercial Clean Vehicle		
18a	Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exceentities discussed in the instructions applies.  Yes.  No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception		
b	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person.  Yes.  No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to resale.		_
С	Is the vehicle also powered by gas or diesel? See instructions.  Yes.  No.	ı	
19	Enter the cost or other basis of the vehicle. See instructions	19	
20	Section 179 expense deduction (see instructions)	20	
21	Subtract line 20 from line 19	21	
	M II'   I'   04   450( /0.45) [000( /0.00) [0]   I'   40   I   ' (%)   '''		
22	Multiply line 21 by 15% (0.15) [30% (0.30) if the answer on line 18c above is "No"]	22	
23	Enter the incremental cost of the vehicle. See instructions	23	
24	Enter the smaller of line 22 or line 23	24	
25	<b>Maximum credit.</b> Enter \$7,500 (\$40,000 if the vehicle's gross vehicle weight rating (GVWR) is 14,000 pounds or more)	25	
00	, ,		
26	Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V		

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(Rev. November 2023)

Department of the Treasury Internal Revenue Service

Taxpayer name(s) shown on return

Paid Preparer's Due Diligence Checklist

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

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

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

Sequence No. 70

Taxpayer identification number

HAR	KRISHNA ANUMANDLA & NEEHARIKA CHINTA	277-21-014	7		
repare	's name	Preparer tax identifica	ation numb	oer	
	M PRIYA RAM SAGAR GUPTA	P02082703			
Part	•				
Please or the	check the appropriate box for the credit(s) and/or HOH filing status claimed on the retubenefit(s) claimed (check all that apply).		the rel		arts I-V HOH
1	Did you complete the return based on information for the applicable tax year provided I or reasonably obtained by you?	by the taxpayer	Yes	No	N/A
2	If credits are claimed on the return, did you complete the applicable EIC and/or C worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Sched 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions worksheet(s) that provides the same information, and all related forms and schedules claimed?	ule 8812 (Form s, or your own	X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you nathe following.				
	<ul> <li>Interview the taxpayer, ask questions, and contemporaneously document the taxpayer determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.</li> </ul>	's responses to			
	• Review information to determine that the taxpayer is eligible to claim the credit(s) an status and to figure the amount(s) of any credit(s)		X		
4	Did any information provided by the taxpayer or a third party for use in preparing information reasonably known to you, appear to be incorrect, incomplete, or inconsis answer questions 4a and 4b. If " <b>No</b> ," go to question 5.)	tent? (If "Yes,"		×	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent int				
b	Did you contemporaneously document your inquiries? (Documentation should include you asked, whom you asked, when you asked, the information that was provided, and information had on your preparation of the return.)	the questions the impact the			
5	Did you satisfy the record retention requirement? To meet the record retention requirer keep a copy of your documentation referenced in question 4b, a copy of this Form 8867 applicable worksheet(s), a record of how, when, and from whom the information used to 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) processes that you relied on to determine eligibility for the credit(s) and/or HOH filing states.	ment, you must 7, a copy of any o prepare Form provided by the			
	the amount(s) of the credit(s)	_	×		
	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 credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return is selected for audit?	return if his/her	X		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous (If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)	year?	×		
а	Did you complete the required recertification Form 8862?				
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a correct Schedule C (Form 1040)?				

orm 8	867 (Rev. 11-2023)			Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a		Yes	No	N/A
	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.)			
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?			
_	has supported the child the entire year?			
C	more than one person (tiebreaker rules)?			
Part		claim C	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	Yes	No	N/A
	a citizen, national, or resident of the United States?	×		
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with			
	the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's			
	custodial parent has released a claim to exemption for the child?	×		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or			
	separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?	×		
Part			 Part \	/\
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qu		Yes	No
	tuition and related expenses for the claimed AOTC?			П
Part	Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing statu	s, go to	D Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax	x year	Yes	No
	and provided more than half of the cost of keeping up a home for the year for a qualifying person?			
Part	VI Eligibility Certification			
	You will have complied with all due diligence requirements for claiming the applicable credit(s) and on the return of the taxpayer identified above if you:	or HO	H filing	status
	<ul> <li>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);</li> </ul>	nses on s) and/c	the ref or HOH	turn or filing
	<ul> <li>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;</li> </ul>	ist for a	ny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 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.			
	3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).	"s eligib	ility for	the
	<ol><li>A record of how, when, and from whom the information used to prepare this form and the applica obtained.</li></ol>	ble worl	ksheet(	s) was
	<ol><li>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</li></ol>	payer's ınt(s) of	respon the cre	ses, to
	If you have not complied with all due diligence requirements, you may have to pay a penalty for each related to a claim of an applicable credit or HOH filing status (see instructions for more information	h failur ).	e to co	mply
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct	t. and	Yes	No
	complete?		×	