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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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
YESHWANTH KUMAR MUTCHERLA	878-88-5856
Spouse's name	Spouse's social security number
SOWMYA PARUPALLI	981-98-3961
Part I Tax Return Information – Tax Year Ending December 31, 2023 (E	Enter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
<b>1</b> Adjusted gross income	<b>1</b> 75,695.
<b>2</b> Total tax	<b>2</b> 3,317
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>3</b> 8,969.
4 Amount you want refunded to you	<b>4</b> 5,652.
<b>5</b> Amount you owe	

#### 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

				EBO firm name		Ē
X	I authorize	GLOBAL '	TAXES	LLC	to enter or generate my PIN	2

8	5	8	5	6	00 00
Ent don	er fiv n't er	/e di nter a	gits, all ze	but ros	as my

3 8

9 6

Enter five digits, but don't enter all zeros

1

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

#### 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 ►	Da	te 🕨	•				 		
Practitioner PIN Method Returns Only—co	ntinue	bel	ow						
Part III Certification and Authentication – Practitioner PIN Method	Only								
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected F	PIN.	2	2			0 III zer	 2 7	' 1	

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 ►								
-	Must Retain This Form — See Instructions This Form to the IRS Unless Requested To Do \$	So							
For Denemoral Deduction Act Nation and vous t		Earm 8879 (Boy, 01 2021)							

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 01/12/24 PRO

Date

to enter or generate my PIN

<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Tax</b>		turn	202	3	OMB No. 1545	-0074	IRS Use Only	y−Do not w	vrite or sta	aple in this space.		
For the year Jan	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate i	instructions.		
Your first name	and m	iddle initial	Last n							Your social security number				
YESHWANT	н кі	UMAR	MUT	CHERLA						878	88	5856		
		s first name and middle initial	Last n		-							security numbe		
SOWMYA			PAR	UPALLI						981	98	3961		
	(numbe	er and street). If you have a P.O. box, see						A	pt. no.			ection Campaig		
36536 JE	। सन्नयः	RSON CT						1	2201		Check here if you, or your			
		ce. If you have a foreign address, also co	mplete	spaces bel	ow.	Sta	ate	ZIP c				jointly, want \$3		
FARMINGT	'ON I	HILLS				м	г	483	35			nd. Checking a not change		
Foreign country				Foreign pr	ovince/state/o				n postal code		c or refu	0		
										-	Yo	ou 🗌 Spouse		
Filing Status		] Single					Head of he	ouseh	old (HOH)					
		Married filing jointly (even if only or	ne had	income)										
Check only one box.		] Married filing separately (MFS)		,				surviv	ving spouse	(QSS)				
one box.	lf v	you checked the MFS box, enter the	name	of your si	oouse. If vou	u che			• •	. ,	ild's na	me if the		
		alifying person is a child but not you			<b>, ,</b>				, .					
									· · ·	·····				
Digital		ny time during 2023, did you: (a) rece									Πv	es 🛛 No		
Assets		hange, or otherwise dispose of a digi						1)? (36		ns.)	∐ Ye			
Standard Deduction	_	neone can claim: 🗌 You as a de	•				a dependent							
Deduction		Spouse itemizes on a separate return	n or yo	u were a	dual-status a	allen	1							
		: Were born before January 2, 1	959	Are bl	ind Spo	ouse	: 🗌 Was bor		ore January	,		s blind		
Dependents				(2) S	Social security		(3) Relationsh	ip <b>(4</b>				(see instructions)		
If more	<u> </u>	(1) First name Last name			number		to you		Child tax o	redit	Credit to	or other dependent		
than four dependents,	DAK	DAKSH MUTCHERLA			-66-402	6	Son		<u> </u>					
see instructions	s ——													
and check														
here	4.				1					4				
Income	1a	Total amount from Form(s) W-2, bo			,						-	93,401.		
Attach Form(s)	b	Household employee wages not re	•		.,						-			
W-2 here. Also attach Forms	C	Tip income not reported on line 1a	•				· · · ·			. 10	-			
W-2G and	d	Medicaid waiver payments not rep						• •		. 1d	-			
1099-R if tax	e	Taxable dependent care benefits for						• •	· · ·	. 1e	-			
was withheld. If you did not	f	Employer-provided adoption bene						• •		. 1f	-			
get a Form	g L	Wages from Form 8919, line 6 .				• •		• •		. 1g		0.		
W-2, see	h :	Other earned income (see instructi Nontaxable combat pay election (s	,	· · ·		• •	· · · · ·	· ·		. 1h	1	0.		
instructions.	i -	Add lines 1a through 1h	see ins	tructions)		• •	· ·			. 1z		93,401.		
	z 2a		2a		· · · ·	 ьт	axable interest	•••		. 12 . 2b	-	,1011		
Attach Sch. B if required.	2a 3a		2a 3a				Ordinary divider				-			
·	4a	· · · · · · · · · · · · · · · · · · ·	4a				axable amount				-			
Standard	ча 5а		+a 5a				axable amount		· · ·	. 40	-			
Deduction for -	5a 6a		6a				axable amoun			. 6b	-			
<ul> <li>Single or Married filing</li> </ul>	C	If you elect to use the lump-sum el		mothod							· · · ·			
separately, \$13,850	7	Capital gain or (loss). Attach Sched				•	,	• •	[	7				
<ul> <li>Married filing</li> </ul>	8			•	•			• •		. 8	+	-17,706.		
jointly or Qualifying	9	Additional income from Schedule 1, line 10         .							. 9	+	75,695.			
surviving spouse, \$27,700	9 10									. 10	<u> </u>	, , , , , , , , , , , , , , , , , , , ,		
<ul> <li>Head of</li> </ul>	Head of							. 11		75,695.				
household, \$20,800	<u>11</u> 12	Standard deduction or itemized	•	-	-			• •		. 12	-	27,700.		
If you checked any box under	13	Qualified business income deducti				,		• •		. 13	-	<u></u> ,100.		
Standard	13 14	Add lines 12 and 13				099	<u>ю</u> п	• •		. 14		27,700.		
Deduction, see instructions.	14	Subtract line 14 from line 11. If zer	o or le	ss enter :	 .0- This is v	 	taxable incom	 e				47,995.		
				55, ontor -	5 . 1113 13 y	501		• .		. 10	· .			

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

Form **1040** (2023)

Form 1040 (2023	3)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3 🗌		16	5,317.
Credits	17	Amount from Schedule 2, lin	ie3				[	17	
	18	Add lines 16 and 17					[	18	5,317.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812		[	19	2,000.
	20	Amount from Schedule 3, lin	e8				[	20	
	21	Add lines 19 and 20					[	21	2,000.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[	22	3,317.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		[	23	0.
	24	Add lines 22 and 23. This is	your total tax				[	24	3,317.
Payments	25	Federal income tax withheld							
<b>.</b>	а	Form(s) W-2				<b>25a</b> 8	,969.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c					2	25d	8,969.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	)22 return		[	26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit				29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3. lin				31			
	32	Add lines 27, 28, 29, and 31	. These are vour	total other pa	avments and refu	undable credits		32	
	33	Add lines 25d, 26, and 32. T	,	•	•		-	33	8,969.
Refund	34	If line 33 is more than line 24						34	5,652.
lioiuliu	35a	Amount of line 34 you want	-			, .	. 🗆 🗄	35a	5,652.
Direct deposit?	b	Routing number 2 7 2					Savings		
See instructions.	d	Account number 8 0 0					J. J.		
	36	Amount of line 34 you want a			ed tax	36			
Amount	37	Subtract line 33 from line 24							
You Owe	01	For details on how to pay, g						37	
	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another							
Designee		structions	•				omplete bel	ow.	🗙 No
	De	signee's		Phone			onal identifica		
	nar	ne		no.		numb	ber (PIN)		
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com							, ,
Here		· · · ·	piete. Declaration						, ,
	Yo	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					DATA ANALY	ZST	(see ins		
See instructions.	Sp	ouse's signature. If a joint return, <b>i</b>	ooth must sign.	Date	Spouse's occupat		If the IR	S ser	nt your spouse an
Keep a copy for	·	<b>o ,</b> ,	Ū.				Identity	Prote	ection PIN, enter it here
your records.					HOME MAKEN	ર	(see ins	t.)	
		one no. (313)775-390		Email address	YESHWANTH.MUT	CHERLA@GMAIL.CO			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/23/2024	P020827	03	Self-employed
Use Only	Fin	m's name GLOBAL TAX	XES LLC				Phone r	ю. (	678)965-9522
	Firi	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's E	IN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/12/24 PRO			Form <b>1040</b> (2023)

REV 01/12/24 PRO

SCHEDULE	1
(Form 1040)	

## Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 2023

Attachment Sequence No. **01** 

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number YESHWANTH KUMAR MUTCHERLA & SOWMYA PARUPALLI 878-88-5856

Par	t Additional Income	·		
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach S	chedule E .	5	-17,706.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	(	)	
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555	(	)	
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property 81			
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)		-	
n	Section 951(a) inclusion (see instructions)		-	
0	Section 951A(a) inclusion (see instructions)		-	
р	Section 461(I) excess business loss adjustment		-	
q	Taxable distributions from an ABLE account (see instructions)       8q		-	
r	Scholarship and fellowship grants not reported on Form W-2 . 8r		-	
S	Nontaxable amount of Medicaid waiver payments included on Form	(		
	1040, line 1a or 1d		4	
t	Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan			
	a nongovernmental section 457 plan		-	
u -	Other income List type and amount:		-	
z	Other income. List type and amount: 8z			
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter here			
	1040, 1040-SR, or 1040-NR, line 8		10	-17,706.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	le 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis govern	nment		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
с	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here a			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	<b>BAA</b> REV 01/12/24 PRO		Schedule 1 (F	orm 1040) 202

			Supplementa							OMB No	o. 1545-0074
(Form	1040)	(From re	ntal real estate, royalties, partners		-			trusts, REMIC	s, etc.)	20	<b>23</b>
	ent of the Treasury Revenue Service		Attach to Form 1040, Go to www.irs.gov/ScheduleE fo					formation		Attachm	nent ce No. <b>13</b>
	shown on return		do to www.iis.gov/Scheduler 10	i insu u			itest in		Your soci	al security	
.,		R MUTCH	IERLA & SOWMYA PARUPALI	г.т						8-5856	
Part			From Rental Real Estate an		valties				0,0 0	0 0000	
	Note: If yo	ou are in the	e business of renting personal prope			<b>c</b> . See	instru	ctions. If you ar	re an indi	vidual, rep	ort farm
			from Form 4835 on page 2, line 40.	1 - Cl -	<b>F</b>	0000	!				- <b>X</b> N-
			ts in 2023 that would require you								
			u file required Form(s) 1099?			• •	• •			re	
1a			ch property (street, city, state, Zl								
<u>A</u>	1-1-220 ,	VIVEK	NAGAR CHIKADPALLY, HYI	DERAE	BAD TEI	LANGA	NA	IN 500020			
<u>C</u>	Turne of Durne						_				
1b	Type of Prope (from list below		For each rental real estate prope above, report the number of fair				⊢a	ir Rental Days		nal Use ays	QJV
Α	1		personal use days. Check the Q			Α		365		0	
B	-		if you meet the requirements to t			B				•	
С			qualified joint venture. See instru	uctions	5.	С					
Туре	of Property:	•			•						
1	Single Family R	esidence	3 Vacation/Short-Term Ren	ntal	5 Land	1		Self-Rental			
2	Multi-Family Re	sidence	4 Commercial		6 Roya	alties	8	Other (descri	ibe)		
								Propertie			
Incom	e:					Α		. В			С
3	Rents received	ł		3		8	20.				
4	Royalties recei	ived		4							
Expen											
5	-			5							
6			ructions)	6							
7	•		ce	7			58.				
8				8		7	95.				
9 10				9 10							
11			onal fees	11		<u> </u>	59.				
12	-		o banks, etc. (see instructions)	12		2,0	57.				
13	Other interest			13							
14				14		5,6	98.				
15				15		3,9	65.				
16	Taxes			16							
17				17		3,6	51.				
18	-	xpense o	depletion	18							
19				19			0.6				
20	-		es 5 through 19	20		18,5	26.				
21			e 3 (rents) and/or 4 (royalties). If tructions to find out if you must								
				21	-	-17,7	06.				
22			state loss after limitation, if any,	21		_ , , ,					
			uctions)	22	(	17,70	)6.)	(	)	(	)
23a		-	orted on line 3 for all rental prope				23a	<u>x</u>	820.		,
b			orted on line 4 for all royalty prop				23b				
с			orted on line 12 for all properties				23c				
d			orted on line 18 for all properties				23d				
е			orted on line 20 for all properties				23e	18	,526.		
24			mounts shown on line 21. Do not								
25			es from line 21 and rental real estat							(	17,706.)
26			and royalty income or (loss).								
			IV, and line 40 on page 2 do no , line 5. Otherwise, include this a						n · 26		-17,706.
For Pa			tice, see the separate instructions		NF			-17,706			orm 1040) 2023
				-						(F	2 IOTOJ 2020

### SCHEDULE 8812 (Form 1040)

Department of the Treasury

Internal Revenue Service

### Credits for Qualifying Children and Other Dependents

OMB No. 1545-0074

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

2023 Attachment Sequence No. 47

Name(s	s) shown on return	You	r social se	ecurity number
YESH	WANTH KUMAR MUTCHERLA & SOWMYA PARUPALLI	878	8-88-5	856
Pa		I		
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR		1	75,695.
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	75,695.
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	0		
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S.	resident		
	alien. Also, do not include anyone you included on line 4.			
7	Multiply line 6 by \$500		7	
8	Add lines 5 and 7		8	2,000.
9	Enter the amount shown below for your filing status.			
	• Married filing jointly—\$400,000			
	• All other filing statuses—\$200,000 }		9	400,000.
10	Subtract line 9 from line 3.			•
	• If zero or less, enter -0			
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For			
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.		10	0.
11	Multiply line 10 by 5% (0.05)		11	0.
12	Is the amount on line 8 more than the amount on line 11?		12	2,000.
	No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child ta	ax credit.		
	Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.			
	<b>Yes.</b> Subtract line 11 from line 8. Enter the result.			
13	Enter the amount from Credit Limit Worksheet A		13	5,317.
14	Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents		14	2,000.
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.		L	
	If the amount on line 12 is more than the amount on line 14, you may be able to take the <b>ado</b>	litional c	hild tay	credit

f 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. BAA REV 01/12/24 PRO Schedule 8812 (Form 1040) 2023

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	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		
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	
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	<b>8867</b>	Paid Preparer's Due Diligence Checklist	I	OMB	No. 1545	-0074
	Bases       Paid Preparer's Due Diligence Checklist         Form       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			For tax year 20 <u>23</u>		
	tment of the Treasury al Revenue Service Go to www.irs.gov/Form8867 for instructions and the latest information.		·SS.	Attachment Sequence No. <b>70</b>		70
Taxpay	er name(s) shown on	return Taxpayer ident	ification r	number		
YES	HWANTH KUMA	AR MUTCHERLA & SOWMYA PARUPALLI 878-88-	5856			
Prepare	r's name	Preparer tax id	entificatio	on numl	oer	
		I SAGAR GUPTA TALLAM P020827	03			
Part		gence Requirements				
		propriate box for the credit(s) and/or HOH filing status claimed on the return and com ned (check all that apply).	nplete t			НОН
1		lete the return based on information for the applicable tax year provided by the taxpa	ayer	Yes X	No	N/A
2	worksheets for 1040) instructi	claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/C und in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 8812 (Fi ions, and/or the AOTC worksheet found in the Form 8863 instructions, or your of hat provides the same information, and all related forms and schedules for each cr	orm own	X		
3	<ul><li>the following.</li><li>Interview the determine th</li><li>Review information</li></ul>	the knowledge requirement? To meet the knowledge requirement, you must do bot taxpayer, ask questions, and contemporaneously document the taxpayer's response at the taxpayer is eligible to claim the credit(s) and/or HOH filing status. mation to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing of gure the amount(s) of any credit(s)	s to	X		
4	information rea	mation provided by the taxpayer or a third party for use in preparing the return asonably known to you, appear to be incorrect, incomplete, or inconsistent? (If " <b>Y</b> oons 4a and 4b. If " <b>No</b> ," go to question 5.)	es,"		X	
а	Did you make	reasonable inquiries to determine the correct, complete, and consistent information?	. [			
b	you asked, wh	emporaneously document your inquiries? (Documentation should include the questing you asked, when you asked, the information that was provided, and the impact d on your preparation of the return.)				
5	keep a copy of applicable wor 8867 and any taxpayer that y the amount(s)	y the record retention requirement? To meet the record retention requirement, you m f your documentation referenced in question 4b, a copy of this Form 8867, a copy of 'ksheet(s), a record of how, when, and from whom the information used to prepare For applicable worksheet(s) was obtained, and a copy of any document(s) provided by you relied on to determine eligibility for the credit(s) and/or HOH filing status or to fig of the credit(s)	any orm the	X		
6	credit(s) and/o	e taxpayer whether he/she could provide documentation to substantiate eligibility for or HOH filing status and the amount(s) of any credit(s) claimed on the return if his, red for audit?	/her	X		
7	Did you ask the	e taxpayer if any of these credits were disallowed or reduced in a previous year?	. Г	X		
		e disallowed or reduced, go to question 7a; if not, go to question 8.)				
а		ete the required recertification Form 8862?				
8		is reporting self-employment income, did you ask questions to prepare a complete ule C (Form 1040)?				
		· · ·				

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Part	<b>II</b> Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)			
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	Yes	No	N/A		
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?					
C	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?					
Part	or ODC, go to Part IV.)		лс, а	UIC,		
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 que tuition and related expenses for the claimed AOTC?	alified	Yes	No		
Part	V Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing statu	is, go te	o Part '	VI.)		
14 Part	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? Eligibility Certification		Yes	No		
	You will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filing status on the return of the taxpayer identified above if you:					
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responses on the return or in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s);					
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this check credit(s) claimed and HOH filing status, if claimed;	list 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'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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Form **8867** (Rev. 11-2023)