E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



£104 (artment of the Treasury-Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space	÷.
For the year Ja	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	oarate i	instructions.	
Your first name	e and m	iddle initial	Last na	me							Your so	cial sec	urity number	_
KARTHIK			ASHA	_							007	65	8741	
	spouse's	s first name and middle initial	Last na	me									security numl	ber
TEJASWI	NT		VANT	PENTA							315	99	5822	
		er and street). If you have a P.O. box, see						A	Apt. no.				ection Campa	ign
2817 CH	ESTE	R DR									Check h	nere if y	ou, or your	Ŭ
		ice. If you have a foreign address, also co	mplete s	paces bel	ow.	Sta	te	ZIP c	ode			0.	jointly, want \$	
Celina						TX	ζ	750	109		•		nd. Checking not change	а
Foreign countr	y name		F	Foreign pr	ovince/state/	count	ty	Foreig	n postal c		your tax		•	
												Yo	ou 🗌 Spou	ıse
Filing Status	s \square	Single					Head of h	ouseh	old (HOI	— ⊣)				
Check only		Married filing jointly (even if only o	ne had i	ncome)										
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spou	use (C	QSS)			
	If y	you checked the MFS box, enter the	name c	of your sp	oouse. If you	u che	ecked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	
	qu	ıalifying person is a child but not you	ır deper	ndent:										_
Digital	Δt aı	ny time during 2023, did you: (a) rec	oiva (as	a reward	l award or	navr	ment for prope	rtv or	sarvicas'). or (h) sell			_
Assets		nange, or otherwise dispose of a digi						-					es 🗵 No	
Standard		neone can claim: You as a de					a dependent	, ,						_
Deduction		 Spouse itemizes on a separate retur	•		•		•							
A are /Dlindnes								m bafa		a.m O	1050		- blind	
		: Were born before January 2, 1	959 _	_ Are bli ⊺	<u> </u>	ouse		- 1					s blind	
Dependent		instructions): First name Last name		(2) Social security (3) Relationship number to you		hip (4) Check the b			1		r other depende			
If more	· ·			000		<u></u>	-	,			, ait	Orodit 10		
than four dependents,	NA.	INIKA ASHA		000	-73-563	3	Daughter		<u> </u>					_
see instruction	ıs								<u> </u>					_
and check here [ı —								l	<u> </u>				_
-	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruc	tions)				l		1a		182,353	
Income	b	Household employee wages not re	,		,						1b	_	102/000	·
Attach Form(s)		Tip income not reported on line 1a									1c	_		_
W-2 here. Also attach Forms	d	•	•		Form(s) W-2 (see instructions)					1d	_		_	
W-2G and	e	Taxable dependent care benefits f									1e	_		_
1099-R if tax was withheld.	f	Employer-provided adoption bene									1f			_
If you did not	g g	Wages from Form 8919, line 6 .			000,10 20	•					1g			_
get a Form	h	Other earned income (see instructi	ions)								1h		0	_
W-2, see instructions.	i	Nontaxable combat pay election (s	,				1 _{1i}	Ì.		•				_
	z	Add lines 1a through 1h									1z		182,353	
Attach Sch. B	 2a		2a	-	ĺ	b T	axable interes	t.			2b		· · ·	
if required.	3a	· —	3a				ordinary divide				3b			_
	4a		4a				axable amoun				4b			
Standard	5a	Pensions and annuities	5a				axable amoun				5b			
Deduction for— Single or	6a		6a				axable amoun				6b			
Married filing separately,	С	If you elect to use the lump-sum e	lection r	method,	check here					. 🗆				
\$13,850	7	Capital gain or (loss). Attach Sche		•		`	,			. 🗆	7			
 Married filing jointly or 	8 Additional income from Schedule 1, line 10						8		-18,677					
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	•								9		163,676	
\$27,700	10	Adjustments to income from Sche		•							10			
 Head of household, 	11	Subtract line 10 from line 9. This is			gross incor	ne					11		163,676	
\$20,800	12	Standard deduction or itemized	•	-	_						12		27,700	
If you checked any box under	13	Qualified business income deducti					5-A				13			
Standard Deduction,	14	Add lines 12 and 13									14		27,700	
see instructions.	15	Subtract line 1/1 from line 11. If zer	o or loc	c ontor	O This is y	our t	tavabla incom				15		135 976	

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	20,530.	
Credits	17	Amount from Schedule 2, lin	ne 3					17		
	18	Add lines 16 and 17						18	20,530.	
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	2,000.	
	20	Amount from Schedule 3, lin	ne 8					20		
	21	Add lines 19 and 20						21	2,000.	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	18,530.	
	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	18,530.	
Payments	25	Federal income tax withheld	l from:							
	а	Form(s) W-2				25a 18	3,193.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	18,193.	
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20)22 return			26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27				
allacii Scii. ElC.	28	Additional child tax credit from	m Schedule 8812	2		28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	ne 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	18,193.	
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amoun	t you overpaid		34		
	35a	Amount of line 34 you want			is attached, chec	k here	🗆	35a		
Direct deposit?	b	Routing number X X X					Savings			
See instructions.	d	Account number X X X	X X X X	X X X Z	X X X X	XX				
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	337.	
roa o we	38	Estimated tax penalty (see in	=	-				37	337.	
Third Party		you want to allow another								
Designee		•	•				omplete	below.	X No	
Doolgilloo	De	signee's		Phone			onal ident			
	na	me		no.		num	ber (PIN)			
Sign		der penalties of perjury, I declare the lief, they are true, correct, and com			, , ,		,		, ,	
Here	Yo	ur signature		Date	Your occupation		If th	e IRS se	nt you an Identity	
									IN, enter it here	
Joint return?				SOFTWARE ENGINEER1				see inst.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupation	on			nt your spouse an ection PIN, enter it here	
your records.				SOFTWARE ENGINEER				inst.)	ection in the enter it here	
	———Ph	one no. (848) 234-528	5	Email address	KARTHIKASHA		JM L			
		eparer's name	Preparer's signat		IGITITITADIIA	Date	PTIN		Check if:	
Paid		M PRIYA RAM SAGAR GUPTA TALLAM	l		GUPTA TAT.T.AM	02/21/2024	P0208	32703	Self-employed	
Preparer		m's name GLOBAL TA		1211 0110111	COLILI INDUM	1 22/21/2021			(678) 965-9522	
Use Only								n's EIN	84-3171965	
	1 11	III O GGGIOGO Z TO TOONE	- C1 11 11(0	TIONITOIN IN	<u> </u>			II O LIIV	04 21/1303	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

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

KARTHIK ASHA & TEJASWINI VANIPENTA

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

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

Attachment Sequence No. 01 Your social security number

007-65-8741

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-18,677.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	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)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
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	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter	here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-18,677.

Schedule 1 (Form 1040) 2023 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis g			
	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 8l 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:			
0E	Total other adjustments. Add lines 24s through 24z		OF	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter he Form 1040, 1040-SR, or 1040-NR, line 10	iere and on	26	
	1 01111 1040, 1040-011, 01 1040-1111, 1111 0 10		20	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

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

OMB No. 1545-0074 Attachment Sequence No. 13

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

Your social security number

KART	HIK ASHA & TEJASWINI VANIPENTA						007-6	5-8741	
Part	Income or Loss From Rental Real Estate a Note: If you are in the business of renting personal prop- rental income or loss from Form 4835 on page 2, line 40	ertv. use \$		C . See	instruc	ctions. If you a	are an indiv	vidual, rep	ort farm
Α [Did you make any payments in 2023 that would require yo	u to file F	orm(s)	1099? S	ee ins	tructions .		. 🗌 Ye	s 🛛 No
	f "Yes," did you or will you file required Form(s) 1099?								
1a	Physical address of each property (street, city, state, Z								
				T (7 N N T N	TAT I	= 00026			
A B	HNO:63, LANE 2, ROAD 3 MALAKPET, HYDE	LRABAD	TELAI	NGANA	TIN 3	500036			
C									
1b	Type of Dyopouty 0 Fay cook yeartely and catata group		al .			. Dantal	Davasa	al IIaa	
ID	Type of Property (from list below) 2 For each rental real estate propasove, report the number of fai				Fa	ir Rental Days	Person Da	I	QJV
A	personal use days. Check the C			Α		365		0	
В	if you meet the requirements to	file as a	ı	В				-	
	qualified joint venture. See insti	ructions.		C					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Re	ental	5 Lanc	1	7	Self-Rental			
	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
	•								
		-		_		Propert	ies:		•
Incom				A 7	25.	В			С
3 4	Rents received	3		/.	23.				
Exper	Royalties received	4							
5		5							
6	Advertising	6							
7	Cleaning and maintenance	7		3,2	79				
8	Commissions	8		- J / Z	7 3 .				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		2,6	92.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		,_					
13	Other interest	13							
14	Repairs	14		3,7	15.				
15	Supplies	15		3,8					
16	Taxes	16							
17	Utilities	17		3,5	98.				
18	Depreciation expense or depletion	18		2,2	85.				
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		19,4	02.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If								
	result is a (loss), see instructions to find out if you must	1 1		40 -					
	file Form 6198	21		- 18,6	17.				
22	Deductible rental real estate loss after limitation, if any,			10 ==	_ (,		,	
	on Form 8582 (see instructions)	22 (18,67)	()
23a	Total of all amounts reported on line 3 for all rental prop				23a		725.		
b	Total of all amounts reported on line 4 for all royalty pro	•			23b				
C	Total of all amounts reported on line 12 for all properties				23c		205		
d	Total of all amounts reported on line 18 for all properties			•	23d		2,285. 9,402.		
e 24	Total of all amounts reported on line 20 for all properties		 . anv lo		23e	Τ2	. 24		
24 25	Income. Add positive amounts shown on line 21. Do no Losses. Add royalty losses from line 21 and rental real esta		-		· ·	· · · ·		(L8,677.)
	• •								
26	Total rental real estate and royalty income or (loss) here. If Parts II, III, and IV, and line 40 on page 2 do n								
	Schedule 1 (Form 1040), line 5. Otherwise, include this						. 26	-	-18 , 677.

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 KARTHIK ASHA & TEJASWINI VANIPENTA 007-65-8741 **Child Tax Credit and Credit for Other Dependents** 1 Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR . 1 163,676. 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 2c Add lines 2a through 2c 2d3 3 163,676. 4 Number of qualifying children under age 17 with the required social security number 5 5 2,000. 6 Number of other dependents, including any qualifying children who are not under age 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. 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 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. **Yes.** Subtract line 11 from line 8. Enter the result. 13 Enter the amount from Credit Limit Worksheet A 13 20,530. Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents 2,000. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19. If the amount on line 12 is more than the amount on line 14, you may be able to take the additional child tax credit on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27

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

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	27 .	
16a	Subtract line 14 from line 12. If zero, stop here; you cannot take the additional child tax credit. Skip Parts II-A		
	and II-B. Enter -0- on line 27	16a	0.
b	Number of qualifying children under 17 with the required social security number: x \$1,600.		
	Enter the result. If zero, stop here; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	
	TIP: The number of children you use for this line is the same as the number of children you used for line 4.		
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result	20	
	Next. On line 16b, is the amount \$4,800 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
Dank	Otherwise, go to line 21.	f D	t. Dian
	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	SOTP	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	-	
24	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 larger 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	

(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

KAR'	THIK ASHA & TEJASWINI VANIPENTA	007-65-874	1		
repare	r's name	Preparer tax identifica	ation numb	oer	
	M PRIYA RAM SAGAR GUPTA TALLAM	P02082703			
Part	Due Diligence Requirements				
	e check the appropriate box for the credit(s) and/or HOH filing status claimed on the return benefit(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 by 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 Schedu 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 , or your own	×		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you meet the following.	nust do both of			
	• 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.	s responses to			
	• Review information to determine that the taxpayer is eligible to claim the credit(s) and 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 inconsist answer questions 4a and 4b. If " No ," go to question 5.)	tent? (If "Yes,"		×	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent infe	ormation? .			
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 impact the			
5	Did you satisfy the record retention requirement? To meet the record retention requirement 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) p taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing star	, a copy of any prepare Form rovided 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 ecredit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return is selected for audit?	eturn if his/her	×		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous		X		
a	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.) 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 88	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	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	Yes	No	N/A
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?			
Part	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes	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?	×		
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 que		Yes	No
	tuition and related expenses for the claimed AOTC?			
Part			Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax and provided more than half of the cost of keeping up a home for the year for a qualifying person?	x year	Yes	No
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 HOI	H filing	status
	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);	nses on s) and/o	the ret or HOH	urn or filing
	 B. Complete this Form 8867 truthfully and accurately and complete the actions described in this check credit(s) claimed and HOH filing status, if claimed; 	list for a	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.			
	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
	A record of how, when, and from whom the information used to prepare this form and the applica obtained.	ble worl	ksheet(s) was
	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	payer's ınt(s) of	respon the cre	ses, to dit(s).
	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 complete?	t, and	Yes	No
	1	orm 88		<u> </u>