<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		ırn	202	3	OMB No. 1545-	0074	IRS Use Onl	y—Do not v	vrite or sta	ple in this space.
For the year Jan	. 1–Dec	e. 31, 2023, or other tax year beginning		, 2023, ending , 20					, 20	See se	parate i	nstructions.
Your first name	and mi	 iddle initial	Last nan	ne						Your so	cial sec	urity number
MAHESH E	ARII		KATR	т								8429
	-	s first name and middle initial	Last nan								· · ·	security number
GEETA RANI KATRI							665	33	3294			
		er and street). If you have a P.O. box, see						A	pt. no.		• •	ction Campaign
11341 SC	лтп	1420 WEST										ou, or your
		ce. If you have a foreign address, also co	mplete sp	aces bel	ow.	Sta	ite	ZIP co	ode			jointly, want \$3
SOUTH JC	RDA	N				רט	C I	840	95			nd. Checking a not change
Foreign country	name		F	oreign pr	ovince/state/c	count	ty	Foreig	n postal code		x or refu	
											🗌 Yo	u Spouse
Filing Status	; [	Single	•				Head of ho	useho	old (HOH)			
Check only		Married filing jointly (even if only or	ne had ir	ncome)								
one box.		Married filing separately (MFS)					Qualifying :	surviv	ing spouse	(QSS)		
	lf y	ou checked the MFS box, enter the	name of	f your sp	oouse. If you	ı che	ecked the HOH	or QS	SS box, ent	er the ch	ild's nar	me if the
	qu	alifying person is a child but not you	ır depene	dent:								
Digital	Δt ar	ny time during 2023, did you: (a) rece	aiva (as a	a reward	award or i	navr	ment for proper	tvors	services): o	r (h) sell		
Digital Assets		ange, or otherwise dispose of a digi						-			ΠYe	es 🛛 No
Standard		eone can claim:  You as a de		·			a dependent	/- (				
Deduction	_	Spouse itemizes on a separate return	•		-		•					
Age/Blindness		Were born before January 2, 1		Are bl			_	n befo	re January	2. 1959		s blind
Dependents				-	Social security		(3) Relationshi					see instructions):
If more		irst name Last name		(2)	number		to you		Child tax of	redit	Credit fo	r other dependents
than four	PRA	ANAY KATRI		927	-98-167	6	Son					X
dependents,	HAS	SINI KATRI			-91-8790		Daughter					 X
see instructions and check	s ——											
here												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instruc	tions)					. <b>1</b> a	i	120,487.
Attach Form(s)	b	Household employee wages not re	eported o	on Form	(s) W-2					. 1t	)	
W-2 here. Also	С	Tip income not reported on line 1a	ı (see ins	truction	s)	•				. 10	;	
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s	) W-2 (see ir	nstru	uctions)			. 10	1	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Forr	m 2441,	line 26 .	•				. 16	•	
was withheld.	f	Employer-provided adoption bene	fits from	Form 8	839, line 29					. 11	:	
If you did not	g	Wages from Form 8919, line 6 .				•				. 1ç	1	
get a Form W-2, see	h	Other earned income (see instruction	ions) .			•		· ·		. <u>1</u> ł	1	0.
instructions.	i	Nontaxable combat pay election (s	see instru	uctions)		•	<b>1</b> i					
	Z	Add lines 1a through 1h	·			•				. 1z	: 	120,487.
Attach Sch. B	2a	· ·	2a				axable interest	•		. 2t		
if required.	<u>3a</u>	-	3a				Ordinary dividen				-	
Standard	4a		4a				axable amount			. 4k	-	
Deduction for—	5a		5a				axable amount			. 5k	-	
<ul> <li>Single or Married filing</li> </ul>	6a	, _	6a				axable amount	• •		. 6k	)	
separately, \$13,850	с _	If you elect to use the lump-sum e						• •				
<ul> <li>Married filing</li> </ul>	7	Capital gain or (loss). Attach Sche						• •				_10 700
jointly or Qualifying	8	Additional income from Schedule								. 8		-18,789.
surviving spouse, \$27,700	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•				• •	· · ·	. 9		101,698.
<ul> <li>Head of</li> </ul>	10 11	Adjustments to income from Sche						• •		. 10		101 600
household, \$20,800	11	Subtract line 10 from line 9. This is	•	-	-			• •		· 11		101,698.
• If you checked any box under	12 13	Standard deduction or itemized Qualified business income deduction						• •		· 12 · 13		27,700.
Standard	13 14	Add lines 12 and 13		1 0111 03		033	<u>.</u>	• •		. 14		27,700.
Deduction, see instructions.	14	Subtract line 14 from line 11. If zer		 enter -	 .0- This is .//		taxable incom	 a		. 15		73,998.
	10		0 01 1033	, onter -	5 . 1113 13 y			<b>·</b> .		· R	<u> </u>	10,000.

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	8,437.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17					[	18	8,437.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	1,000.
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	1,000.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	7,437.
	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	7,437.
Payments	25	Federal income tax withheld							
· · · <b>,</b> · · · · · ·	а	Form(s) W-2				<b>25a</b> 15	,027.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c	·					25d	15,027.
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20	)22 return			26	
qualifying child,	27	Earned income credit (EIC)			No	27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	15,027.
Refund	34	If line 33 is more than line 24	l, subtract line 24	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	7,590.
	35a	Amount of line 34 you want	refunded to you	I. If Form 8888	3 is attached, che	ck here	. 🗆 [	35a	7,590.
Direct deposit?	b	Routing number 3 2 3							
See instructions.	d	Account number 4 8 5	0 0 4 6	2 5 1 9	9 0 9				
	36	Amount of line 34 you want a	applied to your	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe					
You Owe		For details on how to pay, g	o to <i>www.irs.gov</i>	//Payments or	see instructions			37	
	38	Estimated tax penalty (see ir	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	uss this retu	rn with the IRS?				_
Designee	ins	structions				🗌 Yes. C	omplete be	elow.	i≍ No
	De nai	signee's		Phone no.			onal identific oer (PIN)	cation	
Ciarra		der penalties of perjury, I declare th	nat I have examined		accompanying sche		. ,	e hest	of my knowledge and
Sign		ief, they are true, correct, and com							
Here	Yo	ur signature		Date Your occupation				IRS ser	nt you an Identity
							Protec	ction P	IN, enter it here
Joint return?					SR QA ANAI		(see ir	ist.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>t</b>	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an ection PIN, enter it here
your records.					CHILD CARI			section Fina, enter it here	
	Ph	one no. (610) 763-421	Λ	Email address		RI@GMAIL.CC			
		eparer's name	Preparer's signat	I	MAILESIINATI		PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM					P02082	703	Self-employed
Preparer		n's name GLOBAL TAX		ITTU DAGAN	SOLIN INDAM	02/00/2024	Phone		(678) 965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816		Firm's		84-3171965
Go to www.irs.cr		1040 for instructions and the late		TADAATOIN IN			1 1 11 1 5		Form <b>1040</b> (2023)
GO 10 WWW.113.90		in the initial deciding and the late	scanornation.		BAA	REV 01/27/24 PRO			1 0 m 1 <b>0 TU</b> (2023)

Department of the Treasury

# 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

Attachment Sequence No. **01** 

Your social security number

Internal Revenue Service	Go to www.irs.gov/Form1040 for instruction
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR

MAHE	SH BABU & GEETA RANI KATRI		026-75-8	3429
Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		<b>2</b> a	
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			
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta			-18,789.
6	Farm income or (loss). Attach Schedule F.			
7	Unemployment compensation			
8	Other income:			
а	Net operating loss	8a (	)	
b	Gambling	8b		
c	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (	)	
e	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		
i	Activity not engaged in for profit income	8j		
ķ	Stock options	8k		
1	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		
ο	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	r here and on	Form	
	1040, 1040-SR, or 1040-NR, line 8		10	-18,789.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schee	dule 1 (Form 1040) 2023

Par	Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee-					
	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		24a				
b	Deductible expenses related to income reported on line 8I from the					
		24b				
с	Nontaxable amount of the value of Olympic and Paralympic medals					
		24c				
d		24d				
е	Repayment of supplemental unemployment benefits under the Trade					
-		24e				
f		24f				
q		24g				
<b>U</b>	Attorney fees and court costs for actions involving certain unlawful					
		24h				
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	24i				
i	Housing deduction from Form 2555	24j				
, k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	-				
		24k				
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			and on		
	Form 1040, 1040-ŠR, or 1040-NR, line 10				26	
	BAA	REV	)1/27/24 PRC	)	Schedule	1 (Form 1040) 2

		<b>(Fro</b> )		Supplementa					tructo DEMICo			0. 1545-0074
•	Form 1040)       (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)         Department of the Treasury       Attach to Form 1040, 1040-SR, 1040-NR, or 1041.							20	) <b>23</b>			
	Image: Attach to Form 1040, 1040-SR, 1040-NR, or 1041.           Attach to Form 1040, 1040-SR, 1040-NR, or 1041.           Internal Revenue Service         Go to www.irs.gov/ScheduleE for instructions and the latest information.								Attachm Sequen	rent ce No. <b>13</b>		
Name(s)	shown on return								Ye	our socia	al security	
MAHE	SH BABU &	GEET	A RANI KAT	RI					0	26-7	5-8429	
Part				ntal Real Estate an								
	Note: If yo rental inco	ou are i me or	in the business of loss from <b>Form</b> 4	renting personal proper <b>1835</b> on page 2, line 40.	ty, use	Schedule	<b>C</b> . See	instru	ctions. If you are	an indiv	idual, rep	ort farm
Α				hat would require you	to file	Form(s) 1	099? S	ee ins	structions		. 🗆 Ye	s 🛛 No
				ed Form(s) 1099? .								_
1a				(street, city, state, ZIF								
A	-			RD SOUTH JORDAN		,						
B	11341 5 1	120	W 500111 00		. 01	04055						
1b	Type of Prope	rtv	2 For each re	ental real estate prope	rtv list	ted		Fa	ir Rental	Person	al Use	0.11/
	(from list below		above, rep	ort the number of fair i	rental	and			Days	Da		QJV
Α	2			se days. Check the Q			Α		365		0	
В				the requirements to f int venture. See instru			В					
С			quainea jo		otionic		С					
	of Property:											
	Single Family R			ation/Short-Term Rent	tal	5 Land			Self-Rental	,		
2	Multi-Family Re	siden	ce 4 Con	nmercial		6 Roya	lities	8	Other (describe	e)		
									Properties	:		
Incom	ie:						Α		В			С
3					3		6	82.				
		ived.			4							
Expen					-							
5					5							
6 7			-		6 7		3,9	07				
8	•				8		9, ک	07.				
9					9							
10					10							
11	0				11		3,5	10.				
12	-			c. (see instructions)	12							
13	Other interest				13							
14	Repairs				14		2,7	61.				
15					15		2,8	74.				
16					16							
17					17		3,2					
18		xpens	se or depletion		18		3,0	64.				
19 20	Other (list)	Ada	llingo E through	n 19	19 20		10 /	71				
20 21			0	and/or 4 (royalties). If	20		19,4	/⊥.				
21				find out if you must								
					21	-	-18,7	89.				
22	Deductible ren	tal rea	al estate loss a	fter limitation, if any,								
	on Form 8582	(see i	nstructions) .		22	(	18 <b>,</b> 78	9.)	(	)	(	
23a			-	e 3 for all rental prope				23a		682.		
b			-	e 4 for all royalty prop	erties			23b				
c			•	e 12 for all properties				23c				
d			•	e 18 for all properties				23d		)64.		
e 24			•	e 20 for all properties				23e	19,4	_		
24 25				wn on line 21. <b>Do not</b> 21 and rental real estate		-		· ·	tal losses horo	24 25	(	18,789.
25 26				ty income or (loss). (						20		10,109.
20				e 40 on page 2 do no								
				erwise, include this ar						26	-	-18,789.

Schedule E (Form 1040) 2023

-18,789.

SCHEDULE 8812 (Form 1040)

Department of the Treasury

## Credits for Qualifying Children and Other Dependents

OMB No. 1545-0074

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

Internal Revenue Service

N

2023
Attachment Sequence No. 47

all all a secondar

V-

vame(s	) shown on return	Tours	social se	curity number
4AHE	SH BABU & GEETA RANI KATRI	026-	-75-8	429
Par	t I Child Tax Credit and Credit for Other Dependents			
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR		1	101,698.
2a	Enter income from Puerto Rico that you excluded			
b	Enter the amounts from lines 45 and 50 of your Form 2555	0.		
с	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	101,698.
4	Number of qualifying children under age 17 with the required social security number 4	0		
5	Multiply line 4 by \$2,000		5	
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	2		
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resid	lent		
	alien. Also, do not include anyone you included on line 4.			
7	Multiply line 6 by \$500	. [	7	1,000.
8	Add lines 5 and 7		8	1,000.
9	Enter the amount shown below for your filing status.			
	• Married filing jointly—\$400,000			
	• All other filing statuses— $$200,000 \int \dots $		9	400,000.
10	Subtract line 9 from line 3.			
	• If zero or less, enter -0			
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For			
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.	•	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	1,000.
	<b>No. STOP.</b> You cannot take the child tax credit, credit for other dependents, or additional child tax credit as credit.	edit.		
	Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.			
	Yes. Subtract line 11 from line 8. Enter the result.		12	
13	Enter the amount from <b>Credit Limit Worksheet A</b>		13	8,437.
14	Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents	• [	14	1,000.
	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 <b>addition</b>			
	on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-N	R thro	ough lii	ne 27

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

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 01/27/24 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	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	0
b 17 18a b 19	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       .         TIP: The number of children you use for this line is the same as the number of children you used for line 4.         Enter the smaller of line 16a or line 16b       .         Earned income (see instructions)       .         Is the amount on line 18a more than \$2,500?         No. Leave line 19 blank and enter -0- on line 20.	16b 17	
20	<ul> <li>Yes. Subtract \$2,500 from the amount on line 18a. Enter the result</li></ul>	20	
Part	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	s of I	Puerto 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.21		
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 1322		
23	Add lines 21 and 22		
24 25	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.         Subtract line 24 from line 23. If zero or less, enter -0-       24	25	
26	Enter the <b>larger</b> of line 20 or line 25	26	
Daut	Next, enter the smaller of line 17 or line 26 on line 27.		
	II-C Additional Child Tax Credit	27	
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	
	BAA REV 01/27/24 PRO Sch	edule 8	812 (Form 1040) 2023

886 Form

### (Rev. November 2023)

Department of the Treasury Internal Revenue Service

**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 name(s) shown or	return	Taxpayer identification	n number
MAHESH BABU &	GEETA RANI KATRI	026-75-8429	)
Preparer's name		Preparer tax identifica	tion number
SYAM PRIYA RAN	I SAGAR GUPTA TALLAM	P02082703	

#### **Due Diligence Requirements** Part I

For Paperwork Reduction Act Notice, see separate instructions.

Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I-V for the benefit(s) claimed (check all that apply). EIC X CTC/ACTC/ODC HOH

1	Did you complete the return based on information for the applicable tax year provided by the taxpayer	Yes	No	N/A
	or reasonably obtained by you?	×		
2	If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC			
	worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 8812 (Form			
	1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit			
	claimed?	X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of			
3	the following.			
	• Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.			
	• Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing			
	status and to figure the amount(s) of any credit(s) ............................	×		
4	Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes,"			
	answer questions 4a and 4b. If "No," go to question 5.)		X	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent information? .			
b	Did you contemporaneously document your inquiries? (Documentation should include the questions			
	you asked, whom you asked, when you asked, the information that was provided, and the impact the			
_	information had on your preparation of the return.)			
5	Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in guestion 4b, a copy of this Form 8867, a copy of any			
	applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form			
	8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the			
	taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure			
	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 eligibility for the			
	credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her			
	return is selected for audit?	×		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year?	X		
_	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)			
a	Did you complete the required recertification Form 8862?			
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and correct Schedule C (Form 1040)?			
		1 1 1 '		1 1 1

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Form 88	367 (Rev. 11-2023)			Page <b>2</b>
Part	I 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	III 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 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			Part \	/.)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the quatuition 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	s, go to	o 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?	< 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 responsion 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/c	the ret or HOH	urn or filing
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checkl credit(s) claimed and HOH filing status, if claimed;	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 880 Document Retention.	37 instri	uctions	under
	1. A copy of this Form 8867.			

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

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

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

REV 01/27/24 PRO

Form 8867 (Rev. 11-2023)

<b>40301</b>		All state in	vidual Ir	x Commission ICOME TAX R Ilars support educa uals with disabilitie	tion,	2023 TC-40
1000		• An	nended Return -	enter code: (	see instructions)	
Your Social Security No. 026758429 Spouse's Soc. Sec. No. 665333294 If deceased, complete page 3, Part 1	Your first name MAHESH BABU Spouse's first name GEETA RANI Address 11341 SOUTH City SOUTH JORDA	Spouse's last nar KATRI H 1420 WEST State	ne ZIP+4 84095		number 7 6 3 – 4 2 1 4 untry (if not U.S.)	
1 Filing Status - ente	r code	2 Qualifying Dependents		3 Election Can	npaign Fund	
<ul> <li>1 = Single</li> <li>2 = Married fil</li> <li>3 = Married fil</li> <li>4 = Head of h</li> </ul>	ing jointly ing separately ousehold surviving spouse	Dependents age 16 and           Other dependents           Dependents born in 202	23	Does not increa Enter the code fo party of your choi See instruction	ase your tax or re or the You ice. • s for go to <b>incomet</b> a	duce your refund. rself Spouse • ax.utah.gov/elect.
4 Federal adjusted gr	oss income from federal r	eturn			• 4	101698
5 Additions to income	e from TC-40A, Part 1 (atta	ach TC-40A, page 1)			• 5	
6 Total income - add	ine 4 and line 5				6	101698
7 State tax refund inc	luded on federal form <b>104</b>	0, Schedule 1, line 1 (if any)			• 7	
8 Subtractions from in	ncome from TC-40A, Part	2 (attach TC-40A, page 1)			• 8	
9 Utah taxable incor	<b>ne/loss</b> - subtract the sun	n of lines 7 and 8 from line 6			• 9	101698
10 Utah tax - multiply	line 9 by 4.65% (.0465) (n	ot less than zero)			• 10	4729
11 Utah personal exem	ption (multiply line 2d by \$	51,941)	• 11	3882		
12 Federal standard of	itemized deductions		• 12	27700	is qu	tronic filing ick, easy and e, and will
13 Add line 11 and line	12		13	31582		up your refund.
14 State income tax in	cluded in federal itemized	deductions	• 14		To I	earn more, go to
15 Subtract line 14 from	m line 13		15	31582	ta	go to p.utah.gov
16 Initial credit before	phase-out - multiply line 1	5 by 6% (.06)	• 16	1895	L	
	gle or married filing separ or <b>\$33,484</b> (married filing	ately); <b>\$25,114</b> (head of jointly or qualifying surviving spor	• 17 use)	33484		-
18 Income subject to p	hase-out - subtract line 17	7 from line 9 (not less than zero)	18	68214		
19 Phase-out amount	- multiply line 18 by 1.3%	(.013)	• 19	887		
20 Taxpayer tax credit	- subtract line 19 from line	e 16 (not less than zero)			• 20	1008
21 If you are a qualifie	d exempt taxpayer, enter '	'X" (complete worksheet in instr.)	• 21			
22 Utah income tax - REV 11/30/23 PRO	subtract line 20 from line	10 (not less than zero)		-	• 22	3721

403	Utah Individual Incon 302 ssn 026758429	Last name KATRI	INTUIT	TC-40 2023	Pg. 2
23	Enter tax from TC-40, page 1, line 22	•		23	3721
24	Apportionable nonrefundable credits fro	m TC-40A, Part 3 (attach TC-40A, page 1)		• 24	
25	Full-year resident, subtract line 24 from	line 23 (not less than zero) t enter the UTAH TAX from TC-40B, line 41		• 25	3721
26		s from TC-40A, Part 4 (attach TC-40A, page 1)		• 26	
27	Subtract line 26 from line 25 (not less th	an zero)		27	3721
28	Voluntary contributions from TC-40, pag	e 3, Part 4 (attach TC-40, page 3)		• 28	
29	AMENDED RETURN ONLY - previous r	efund		• 29	
30	Recapture of low-income housing credit			• 30	
31	Utah use tax			• 31	
32	Total tax, use tax and additions to tax	(add lines 27 through 31)		32	3721
33	Total withholding - If you have mineral p complete page 3, Part 5. If not, enter on	roduction withholding or pass-through entity withholding, line 33 the total of TC-40W, Part 1.		• 33	5696
34	Credit for Utah income taxes prepaid fro	m TC-546 and 2022 refund applied to 2023		• 34	
35	AMENDED RETURN ONLY - previous p	payments		• 35	
36	Nonapportionable refundable credits fro	m TC-40A, Part 5 (attach TC-40A, page 2)		• 36	
37	Apportionable refundable credits from T	C-40A, Part 6, line c (attach TC-40A, page 2)		• 37	
38	Total withholding and refundable credits	- add lines 33 through 37		38	5696
39	TAX DUE - subtract line 38 from line 32	(not less than zero)		• 39	
40	Penalty and interest (see instructions)			40	
41	TOTAL DUE - PAY THIS AMOUNT - ad	d line 39 and line 40		• 41	
42	<b>REFUND</b> - subtract line 32 from line 38	(not less than zero)		• 42	1975
43	Voluntary subtractions from refund (not Enter the total from page 3, Part 6	greater than line 42)		• 43	
44	• Routing number 323070380	<ul> <li>SIT - your account information (see instructions for foreign</li> <li>Account number 485004625190</li> </ul>	accounts) Type:	checking savings • X •	foreign •

Under penaltie	es of perjury, I declare	e to the best of my knowledge and	belief, this return a	nd accompa	nying schedules are true, correc	t and complete.	
SIGN Your signature D		Date	Spouse's signature (if filing jointly)			Date	
HERE							
Third Party	Name of designee (i	f any) you authorize to discuss this	return		Designee's telephone number	Designee PIN	
Designee						•	
	Preparer's signature	9	Date		Preparer's telephone number	Preparer's PTIN	I
Paid	SYAM PRI	YA RAM SAGAR G	02/06/2	4	6789659522	•	P02082703
Preparer's	Firm's name	GLOBAL TAXES L	LC			Preparer's EIN	
Section	and address	245 ROONEY CT				•	843171965
		E BRUNSWICK		Ν	IJ 08816		

Attach page 3 if you: are filing for a deceased taxpayer, are filing a fiscal year return, filed IRS form 8886, are making contributions, want to deposit into a my529 account, want to apply all/part of your refund to next year's taxes, have mineral production or pass-through entity withholding, or no longer qualify for a homeowner's exemption. REV 11/30/23 PRO Last name KATRI

2023

Line Explanations	IMPORTANT
<ol> <li>Employer/payer ID number from W-2 box "b" or 1099</li> <li>Utah withholding ID number from W-2 box "15" or 1099 (14 characters, ending in WTH, no hyphens)</li> <li>Employer/payer name and address from W-2 box "c" or 1099</li> <li>Enter "X" if reporting Utah withholding from form 1099</li> <li>Employee's Social Security number from W-2 box "a" or 1099</li> <li>Utah wages or income from W-2 box "16" or 1099</li> <li>Utah withholding tax from W-2 box "17" or 1099</li> </ol>	<ul> <li>Do not send your W-2s or 1099s with your return. Instead enter W-2 or 1099 information below, but only if there is Utah withholding on the form.</li> <li>Use additional forms TC-40W if you have more than four W-2s and/or 1099s with Utah withholding tax.</li> <li>Enter mineral production withholding from TC-675R in Part 2 of TC-40W; enter pass-through entity withholding in Part 3 of TC-40W.</li> </ul>
First W-2 or 1099	Second W-2 or 1099
1 205716594	1 454683454
2 11905699003WTH (14 characters, no hyphens	2 13788158003WTH (14 characters, no hyphens)
<sup>3</sup> CHANGE HEALTHCARE SOLUTIONS, LLC 3055 LEBANON PIKE SUITE 1000	<sup>3</sup> OPTUM SERVICES INC 9900 BREN ROAD EAST
NASHVILLE TN37214	MINNETONKA MN55343
4	4
5 026758429	5 026758429
6 33270	6 86853
7 1605	7 4087
Third W-2 or 1099	Fourth W-2 or 1099
1 361924025	1
2 12226717004WTH (14 characters, no hyphens	2 (14 characters, no hyphens)
<sup>3</sup> WALGREEN CO. 200 WILMOT RD	3
DEERFIELD IL60015	
4	4
5 665333294	5
6 364	6
7 4	7

### Total Utah withholding tax from all lines 7:

If you have nothing to enter on TC-40W, page 2, enter this total on TC-40, page 2, line 33. If you have entries on TC-40W, page 2, enter this total on TC-40, page 3, Part 5, line 1.

5696

Submit page ONLY if data entered. Attach completed schedule to your Utah Income Tax Return. Do not attach W-2s or 1099s to your Utah return.

REV 11/30/23 PRO