Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID)			
Taxpayer's name	Social securit	v numher	
AKHIL DENCHANALA	659-34-		
Spouse's name		al security numbe	r
Part I Tax Return Information — Tax Year Ending December 31, 2023 (E	 nter year you aı	e authorizing	.)
Enter whole dollars only on lines 1 through 5.			<i>,</i>
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1 Adjusted gross income			949.
2 Total tax		_	5,524.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			<u>,979.</u>
4 Amount you want refunded to you			<u>,455.</u>
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amen			
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tra to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent.	r rejection of the tra- ne U.S. Treasury are t indicated in the ta- itution to debit the inate the authorizal requests must be the processing of the payment. I furth	ansmission, (b) that its designated x preparation so entry to this accuration. To revoke received no lat the electronic paper acknowledge	he reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the
Taxpayer's PIN: check one box only	ata my DIN	7 3 3 2	
X I authorize GLOBAL TAXES LLC to enter or gener ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	er five digits, but 't enter all zeros	as my
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN melow.			
Your signature ▶ Date	-		
Spouse's PIN: check one box only			
I authorize to enter or gener	ate my PIN		as my
ERO firm name	-	er five digits, but	asiny
signature on the income tax return (original or amended) I am now authorizing.	dor	't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN m below.			
Spouse's signature ▶ Date I	•		
Practitioner PIN Method Returns Only—continue be	low		
Part III Certification and Authentication — Practitioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	1-1-1-1-1	6 0 8 2 5 er all zeros	7 1
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incon authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am s requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers	ubmitting this retu	rn in accordance	I am now with the
ERO's signature ▶ Date			
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested 1			

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

20**23** OMB No. 1545-0074

						0.11.2 1.101 10 10		, 50		
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20	See s	eparate instructions.	
Your first name	and m	iddle initial	Last na	ame				Your s	social security number	
AKHIL			DEN	CHANALA					34 7332	
	pouse's	s first name and middle initial	Last na						e's social security num	ıber
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.			Apt. no.	Presid	lential Election Campa	aign
9001 AME	BERG:	LEN BLVD					1201		k here if you, or your	
City, town, or p	ost offi	ice. If you have a foreign address, also co	mplete	spaces below.	State	е	ZIP code		e if filing jointly, want stothis fund. Checking	
AUSTIN					TX		78729		elow will not change	a
Foreign country	y name			Foreign province/state/o	county	'	Foreign postal co	de your ta	ax or refund.	
									∐ You ∐ Spot	use
Filing Status	s X	Single				Head of h	ousehold (HOH)			
Check only		Married filing jointly (even if only or	ne had	income)	_	_				
one box.		Married filing separately (MFS)			L		surviving spous			
		you checked the MFS box, enter the			u ched	cked the HOH	l or QSS box, e	nter the c	hild's name if the	
	qu	alifying person is a child but not you	ır depe	ndent:						
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	paym	ent for prope	rty or services);	or (b) sell	,	
Assets	exch	nange, or otherwise dispose of a digi	ital ass	et (or a financial intere	est in	a digital asse	et)? (See instruct	ions.)	☐ Yes ☐ No	
Standard	Som	neone can claim:	pender	nt Your spouse	e as a	dependent				
Deduction		Spouse itemizes on a separate retur	n or yo	u were a dual-status	alien					
Age/Blindness	s You	: Were born before January 2, 19	959	Are blind Spo	ouse:	☐ Was bor	n before Januar	v 2 1959	☐ Is blind	
Dependent			000 [(4) Chook the		alifies for (see instruction	ns):
-		First name Last name		(2) Social security number	′	(3) Relationsh to you	Child tax	•	Credit for other depende	•
If more than four	• •]	 	
dependents,								1		
see instructions and check	s]		
here]									
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (se	ee instructions)				. 1	a 112,370).
Attach Form(s)	b	Household employee wages not re	eported	on Form(s) W-2				. 1	b	
W-2 here. Also	С	Tip income not reported on line 1a	ı (see ir	nstructions)				. 1	С	
attach Forms	d	Medicaid waiver payments not rep	orted o	on Form(s) W-2 (see in	nstruc	ctions)		. 1	d	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	orm 2441, line 26				. 1	е	
was withheld.	f	Employer-provided adoption bene	fits from	m Form 8839, line 29				. 1	If	
If you did not get a Form	g	Wages from Form 8919, line 6 .						. 1	g	
W-2, see	h	Other earned income (see instructi	,					. 1	h 0).
instructions.	i	Nontaxable combat pay election (s	see inst	tructions)		<u>1i</u>			110 270	,
	Z	Add lines 1a through 1h							112,370	•
Attach Sch. B if required.	2a	'	2a			xable interest			2b	
	3a_		3a			dinary divide			Bb	
Standard	4a		4a			xable amoun			lb	
Deduction for—	5a		5a			xable amoun			ib	
Single or Married filing	6a	,	6a	mathad abady bara		xable amoun			6b	
separately, \$13,850	С 7	If you elect to use the lump-sum election Capital gain or (loss). Attach Scheo			•	•		HF.	7	
Married filing	8	Additional income from Schedule							8 -13,421	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							9 98,949	
surviving spouse, \$27,700	10	Add lines 12, 25, 35, 45, 35, 65, 7, Adjustments to income from Sche							10	•
Head of household,	11	Subtract line 10 from line 9. This is							98,949	<u> </u>
\$20,800	12	Standard deduction or itemized	-						13,850	
If you checked any box under	13	Qualified business income deducti				i-A			13,000	•
Standard Deduction,	14	Add lines 12 and 13							13,850	
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter -0 This is y	our t a	axable incom	ne		85,099	

	Page 2	
14,	024.	
14,	024.	
7,	500.	
	500. 500. 524.	
· · · · · ·	0	
6,	0. 524.	
,		
16,	979.	
16,	979. 455. 455.	
10,	455.	
10,	455.	
X No		

Form 1040 (2023) **Tax** (see instructions). Check if any from Form(s): **1** 8814 **2** 4972 16 16 Tax and **Credits** 17 Amount from Schedule 2, line 3 17 Add lines 16 and 17 18 18 19 Child tax credit or credit for other dependents from Schedule 8812 19 20 Amount from Schedule 3, line 8 20 21 Add lines 19 and 20 21 22 Subtract line 21 from line 18. If zero or less, enter -0-22 23 Other taxes, including self-employment tax, from Schedule 2, line 21 23 24 Add lines 22 and 23. This is your total tax 24 **Payments** 25 Federal income tax withheld from: 16,979. Form(s) W-2 . 25a а Form(s) 1099 . . . 25b b Other forms (see instructions) 25c С 25d d Add lines 25a through 25c 26 2023 estimated tax payments and amount applied from 2022 return 26 If you have a qualifying child 27 Earned income credit (EIC) 27 attach Sch. EIC. 28 Additional child tax credit from Schedule 8812 28 29 29 American opportunity credit from Form 8863, line 8. 30 30 Reserved for future use 31 Amount from Schedule 3, line 15 31 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 32 33 Add lines 25d, 26, and 32. These are your total payments 33 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 34 Refund Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a 35a Routing number 0 6 2 2 0 3 7 5 1 Direct deposit? b **c** Type: X Checking Savings See instructions. Account number 2 7 2 3 2 8 7 3 3 6 d 36 Amount of line 34 you want applied to your 2024 estimated tax . . . 36 Amount 37 Subtract line 33 from line 24. This is the amount you owe. You Owe For details on how to pay, go to www.irs.gov/Payments or see instructions . 37 Estimated tax penalty (see instructions) Third Party Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. Designee Designee's Phone Personal identification number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and Sign belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Here If the IRS sent you an Identity Your signature Date Your occupation Protection PIN, enter it here (see inst.) SOFTWARE DEVELOPER Joint return? See instructions. If the IRS sent your spouse an Spouse's signature. If a joint return, both must sign. Date Spouse's occupation Keep a copy for Identity Protection PIN, enter it here your records. (see inst.) Phone no. (601)307 - 2837Email address AKHIL.DENCHANALA@GMAIL.COM

Preparer's signature

SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM

GLOBAL TAXES LLC Firm's name **Use Only** 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's address Go to www.irs.gov/Form1040 for instructions and the latest information.

Preparer's name

Paid

Preparer

BAA

REV 12/21/23 PRO

01/09/2024

Date

PTIN

P02082703

Firm's EIN

84-3171965 Form 1040 (2023)

Self-employed

Check if:

Phone no. (678) 965-9522

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

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

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

AKHIL DENCHANALA

659-34-7332

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	-13,421.
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		
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		
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	-13,421.

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-b	basis government		
	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 8l from the			
		24b	-	
С	The state of the s			
		24c	-	
d		24d	-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g		24g		
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	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		
j	· · · · · · · · · · · · · · · · · · ·	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 .			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	

BAA

SCHEDULE 3 (Form 1040)

Department of the Treasury

AKHIL DENCHANALA

Additional Credits and Payments

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. 03

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

Your social security number 659-34-7332

Par	t I Nonrefundable Credits						
1	Foreign tax credit. Attach Form 1116 if required				1		
2	Credit for child and dependent care expenses from Form 2441 Form 2441	, lin	e 11. /	Attach	2		
3	Education credits from Form 8863, line 19				3		
4	Retirement savings contributions credit. Attach Form 8880				4		
5a	Residential clean energy credit from Form 5695, line 15				5a		
b	Energy efficient home improvement credit from Form 5695, line 32				5b		
6	Other nonrefundable credits:						
а	General business credit. Attach Form 3800	6a					
b	Credit for prior year minimum tax. Attach Form 8801	6b					
С	Adoption credit. Attach Form 8839	6с					
d	Credit for the elderly or disabled. Attach Schedule R	6d					
е	Reserved for future use	6e					
f	Clean vehicle credit. Attach Form 8936	6f		7,500.			
g	Mortgage interest credit. Attach Form 8396	6g					
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h					
i	Qualified electric vehicle credit. Attach Form 8834	6i					
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j					
k	Credit to holders of tax credit bonds. Attach Form 8912	6k					
I	Amount on Form 8978, line 14. See instructions	61					
m	Credit for previously owned clean vehicles. Attach Form 8936 .	6m					
Z	Other nonrefundable credits. List type and amount:						
		6z					
7	Total other nonrefundable credits. Add lines 6a through 6z				7	7,50	0.
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10 1040-NR, line 20				8	7,50	00.

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

Par	Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions)	10		
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for repayment of amounts included in income from earlier years	13b		
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c		
d	Deferred amount of net 965 tax liability (see instructions)	13d		
Z	Other payments or refundable credits. List type and amount:	13z		
14	Total other payments or refundable credits. Add lines 13a through	n 13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 104 line 31		15	

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

2023
Attachment Sequence No. 13

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

Your social security number

AKH]	IL DENCHANALA						659-3	4-7332	
Part	Income or Loss From Rental Real Estate ar Note: If you are in the business of renting personal prope rental income or loss from Form 4835 on page 2, line 40.			e C. See	instru	ctions. If you ar	e an indiv	/idual, rep	ort farm
A	Did you make any payments in 2023 that would require you	ı to file	Form(s)	1099? S	ee ins	structions .		. \(\subseteq \text{Y}\epsilon	es 🛛 No
В	If "Yes," did you or will you file required Form(s) 1099?							. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city, state, ZI	P cod	e)						
Α	CHINTA NEKKONDA WARANGAL TELANGANA I	N 50	6369						
В									
С									
1b	Type of Property (from list below) 2 For each rental real estate properties above, report the number of fair	rental	and		Fa	ir Rental Days	Person Da		QJV
Α	g personal use days. Check the Q if you meet the requirements to	JV bo	x only	Α		300		0	
В	qualified joint venture. See instru	uction:	a S.	В					
С				С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Rer Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (descri			
				•		Propertie	es:		
Incon				A	20.	В			С
3 4	Rents received	3		0	20.				
Expe		+							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,0	15.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,2	47.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		3,2	54.				
15	Supplies	15		3,1	61.				
16	Taxes	16							
17	Utilities	17		2,5	00.				
18	Depreciation expense or depletion	18		2,8	64.				
19	Other (list)								
20	Total expenses. Add lines 5 through 19	20		14,0	41.				
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 file Form 6198			-13,4	21.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(13,42	1.)	()	()
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		620.		
b	Total of all amounts reported on line 4 for all royalty prop				23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d	2	,864.		
е	Total of all amounts reported on line 20 for all properties				23e	14	,041.		
24	Income. Add positive amounts shown on line 21. Do no		-						
25	Losses. Add royalty losses from line 21 and rental real estate							(13,421.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this a						n		-13,421.

Health Savings Accounts (HSAs)

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form8889 for instructions and the latest information. OMB No. 1545-0074 Attachment Sequence No. 52

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

AKHIL DENCHANALA

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions.

659-34-7332

3efo	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, it	f requ	ired.
Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for		
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2023. See instructions	X Se	elf-only \square Family
2	HSA contributions you made for 2023 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2023. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	0.
3	If you were under age 55 at the end of 2023 and, on the first day of every month during 2023, you were, or were considered, an eligible individual with the same coverage, enter \$3,850 (\$7,750 for family coverage). All others , see the instructions for the amount to enter	3	3,850.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2023 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2023, also include any amount contributed to your spouse's Archer MSAs	4	0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5	3,850.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family		
	coverage under an HDHP at any time during 2023, see the instructions for the amount to enter	6	3,850.
7	If you were age 55 or older at the end of 2023, married, and you or your spouse had family coverage under an HDHP at any time during 2023, enter your additional contribution amount. See instructions.	7	0.
8	Add lines 6 and 7	8	3,850.
9	Employer contributions made to your HSAs for 2023		7, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	769.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	3,081.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	0.
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		
Part	HSA Distributions. If you are filing jointly and both you and your spouse each have separate Part II for each spouse.	rate l	HSAs, complete
14a	Total distributions you received in 2023 from all HSAs (see instructions)	14a	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b	
С	Subtract line 14b from line 14a	14c	
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f	16	
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	
Part	Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instruction completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.		
18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f .	20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21	

Form **8936**

Clean Vehicle Credits

OMB No. 1545-2137

Identifying number

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

Attach to your tax return. Go to www.irs.gov/Form8936 for instructions and the latest information. Attachment Sequence No. **69**

AKH]	IL DENCHANALA	659-34	4-73	32
Notes	• Complete a separate Schedule A (Form 8936) for each clean vehicle placed in service during	the tax y	ear.	
	• Individuals completing Parts II, III, or IV, must also complete Part I. See "Note" text below.			
Part	Modified Adjusted Gross Income Amount			
1a	Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR 1a 98,	,949.		
b	Enter any income from Puerto Rico you excluded			
С	Enter any amount from Form 2555, line 45			
d	Enter any amount from Form 2555, line 50			
е	Enter any amount from Form 4563, line 15			
2	Add lines 1a through 1e		2	98,949.
3a	Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR 3a 76,	,981.		
b	Enter any income from Puerto Rico you excluded			
С	Enter any amount from Form 2555, line 45			
d	Enter any amount from Form 2555, line 50			
е	Enter any amount from Form 4563, line 15			
4	Add lines 3a through 3e		4	76,981.
5	Enter the smaller of line 2 or line 4	[5	76,981.
Part		<u> </u>		•
	Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$150,000 (\$300,	,000 if m	arried	I filing jointly or a
	qualifying surviving spouse; \$225,000 if head of household).			
6	Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936)		6	
7	New clean vehicle credit from partnerships and S corporations (see instructions)	[7	
8	Business/investment use part of credit. Add lines 6 and 7. Partnerships and S corporations, stop	o here		
	and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1y	٠	8	
Part	III Credit for Personal Use Part of New Clean Vehicles			
	Note: You can't claim the Part III credit if Part I, line 5, is more than \$150,000 (\$300,00 qualifying surviving spouse; \$225,000 if head of household).	00 if ma	rried	filing jointly or a
9	Enter the total credit amount figured in Part III of Schedule(s) A (Form 8936)		9	7,500.
10	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18		10	14,024.
11	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)	[11	,
12	Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't claim the personal	al use		
	part of the credit		12	14,024.
13	Personal use part of credit. Enter the smaller of line 9 or line 12 here and on Schedule 3	(Form		•
	1040), line 6f. If line 12 is smaller than line 9, see instructions		13	7,500.
Part	V Credit for Previously Owned Clean Vehicles			
	Note: You can't claim the Part IV credit if Part I, line 5, is more than \$75,000 (\$150,00 qualifying surviving spouse; \$112,500 if head of household).	00 if ma	rried	filing jointly or a
14	Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936)		14	
15	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18	H	15	
16	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)	-	16	
17	Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't claim the Part IV of	credit	17	
18	Enter the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040), line 6m. If line			
	smaller than line 14, see instructions		18	
Part	V Credit for Qualified Commercial Clean Vehicles			
19	Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936)		19	
20	Qualified commercial clean vehicle credit from partnerships and S corporations (see instructions)	[20	
21	Add lines 19 and 20. Partnerships and S corporations, stop here and report this amount on Sch			
	K. All others, report this amount on Form 3800, Part III, line 1aa		21	

SCHEDULE A (Form 8936)

Clean Vehicle Credit Amount

OMB No. 1545-2137

2023

Attachment Sequence No. **69A**Identifying number

Department of the Treasury Internal Revenue Service Name(s) shown on return Attach to your tax return.

Go to www.irs.gov/Form8936 for instructions and the latest information.

659-34-7332 AKHIL DENCHANALA Part I Vehicle Details 2023 Year TESLA h Make Model . MODEL 3 2 Vehicle identification number (VIN) (see instructions) . . . 5 Y J 3 E 1 E A 2 P F 5 9 9 2 6 0 3 Enter date vehicle was placed in service (MM/DD/YYYY) Was the vehicle used primarily outside the United States? Answer "No" if it was but an exception applies. See instructions. Yes. Stop here. You can't claim a credit amount for a vehicle used primarily outside the United States. X No. 5 Does the VIN entered on line 2 belong to a new clean vehicle placed in service during the tax year? See instructions for definitions. X Yes. Go to Part II. No. Go to line 6. Does the VIN entered on line 2 belong to a previously owned clean vehicle acquired after 2022 and placed in service during the tax year? See instructions for definitions. ☐ Yes. Go to Part IV. X No. Go to line 7. Does the VIN entered on line 2 belong to a qualified commercial clean vehicle acquired after 2022 and placed in service during the tax year? See instructions for definitions. Yes. Go to Part V. No. Stop here. You can't use this schedule to figure a credit amount for a vehicle not described on line 5, 6, or 7. Credit Amount for Business/Investment Use Part of New Clean Vehicle Part II 8 Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you are leasing the vehicle from another person. Yes. No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to lease to others, or acquired for resale. 9 Tentative credit amount (see instructions) 9 7,500. 10 Business/investment use percentage (see instructions) . . . 10 % 11 Multiply line 9 by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you entered 100% on line 10, stop here. Otherwise, go to Part III below. 11 Credit Amount for Personal Use Part of New Clean Vehicle Part III 12 Subtract line 11 from line 9 in Part II. Stop here and include this credit amount on line 9 in Part III of Form 8936 12 7,500.

For Paperwork Reduction Act Notice, see the Form 8936 instructions. BAA

REV 12/21/23 PRO

Schedule A (Form 8936) 2023

DO NOT FILE

Schedu	le A (Form 8936) 2023		Page 2
Part	V Credit Amount for Previously Owned Clean Vehicle		
13a	Is the sales price of the vehicle more than \$25,000?		
	Yes. Stop here. The vehicle doesn't qualify for the Part IV credit.		
	□ No.		
b	Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehicle	le fror	n another person.
	☐ Yes.		
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a	cquire	ed for resale.
С	Can you be claimed as a dependent on another person's tax return, such as your parent's return	rn?	
	☐ Yes. Stop here. You can't claim a credit amount if you can be claimed as a dependent.		
	□ No.		
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions.		
	☐ Yes.		
	No.		
14	Enter the sales price of the vehicle	14	
	·		
15	Multiply line 14 by 30% (0.30)	15	
16	Maximum vehicle credit amount	16	4,000.
47	Enter the smaller of line 15 or line 10. Oten have and include this gradit amount on line		
17	Enter the smaller of line 15 or line 16. Stop here and include this credit amount on line 14 in Part IV of Form 8936	17	
Part			
18a	Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exce	ption	for certain tax-exempt
	entities discussed in the instructions applies.		·
	Yes.		
	No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception	appli	es.
b	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you	are le	easing the vehicle from
	another person.		
	Yes.		
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to resale.	o leas	e to others, or acquired for
	resale.		
С	Is the vehicle also powered by gas or diesel? See instructions.		
	☐ Yes. ☐ No.		
	□ NO.		
19	Enter the cost or other basis of the vehicle. See instructions	19	40,240.
20	Section 179 expense deduction (see instructions)	20	
20	Gection 179 expense deduction (see instructions)	20	
21	Subtract line 20 from line 19	21	
22	Multiply line 21 by 15% (0.15) [30% (0.30) if the answer on line 18c above is "No"]	22	
23	Enter the incremental cost of the vehicle. See instructions	23	
04	Enter the smaller of line 22 or line 23	04	
24	Enter the Smaller of line 22 of line 23	24	
25	Maximum credit. Enter \$7,500 (\$40,000 if the vehicle's gross vehicle weight rating (GVWR) is		
	14,000 pounds or more)	25	
26	Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V		
	of Form 0006	00	I

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2023

Attachment
Sequence No. 179

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

AKHIL DENCHANALA

Business or activity to which this form relates
Sch E CHINTA NEKKONDA

Identifying number 659-34-7332

Pa			rtain Property Und			nplete Part I.		
1	Maximum amount (see instruction	s)				1	1,160,000.
2			placed in service (se				2	2 000 000
3	Threshold cost of se Reduction in limitat	4	2,890,000.					
-						-0 If married filing	4	
5	separately, see inst		otract line 4 from lin				5	
6	(a) De	scription of proper	ty	(b) Cost (busin	ness use only)	(c) Elected cost		
7			from line 29					
8			property. Add amount				8	
9			aller of line 5 or line 8				9	
10	•		from line 13 of your				10	
11				•	,	line 5. See instructions	11	
12	•		dd lines 9 and 10, bu		1		12	
13	•		to 2024. Add lines 9			13		
			for listed property. Ir			alicata Paka di ancia ankio	0	!
Par						clude listed property	. See	instructions.)
14						ty) placed in service	44	
45							14	
15 16		,,,	1) election				15 16	
Par			on't include listed				10	
rai	UIII WACKS DE	oreciation (D	on thiclade listed	Section A	e mstruction.	5.)		
17	MACRS deductions	for assets play	ced in service in tax y		ng before 2023		17	
						one or more general		-
	asset accounts, che				-			
-	Section B	-Assets Plac	ed in Service During	2023 Tax Y	ear Using the	General Depreciation	Syste	em
(a)	Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method		epreciation deduction
19a	3-year property							
b	5-year property							
c	7-year property							
	10-year property							
	15-year property							
	20-year property			0.5		0.11		
	25-year property			25 yrs.		S/L		
h	Residential rental	05/23	126,000.	27.5 yrs.	MM	5/L		2,864.
	property			27.5 yrs.	MM	5/L		
ı	Nonresidential real			39 yrs.	MM	S/L		
					k / k /	C /I		
	property	Assats Dissa	dia Comico Design	0000 Tau Va	MM	S/L	0	
-00-	Section C-	-Assets Place	d in Service During	2023 Tax Yea		Alternative Depreciation	on Sys	stem
	Section C-	-Assets Place	d in Service During			Alternative Depreciation	on Sys	stem
b	Section C- Class life 12-year	-Assets Place	d in Service During	12 yrs.	ar Using the A	S/L S/L	on Sys	stem
b	Section C- Class life 12-year 30-year	-Assets Place	d in Service During	12 yrs. 30 yrs.	ar Using the A	S/L S/L S/L S/L	on Sys	stem
b	Section C- Class life 12-year 30-year 40-year			12 yrs.	ar Using the A	S/L S/L	on Sys	stem
b d Par	Section C- Class life 12-year 30-year 40-year t IV Summary (See instruction	ons.)	12 yrs. 30 yrs.	ar Using the A	S/L S/L S/L S/L		stem
Par 21	Section C- Class life 12-year 30-year 40-year USummary Listed property, Ent	See instruction	ons.) n line 28	12 yrs. 30 yrs. 40 yrs.	MM MM	S/L S/L S/L S/L S/L S/L S/L	on Sys	stem
21 22	Section C- Class life 12-year 30-year 40-year t IV Summary (Listed property. Ent Total. Add amount here and on the app	See instruction are amount from the from line 12, propriate lines of	ons.) n line 28	12 yrs. 30 yrs. 40 yrs. lines 19 and rships and S	MM MM MM 20 in column corporations—	S/L		2,864.

BAA