# 8879 **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

Social security number   Social security number   Spansor   Span	Submission Identification Number (SID)		
Space   Secretary   Space   Secretary   Space   Spa		0	
Part   Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.)			-
Enter whole dollars only on lines 1 through 5.  Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income  2 Total tax  2 G, 2, 15.  3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099  3 10, 735.  4 Amount you want refunded to you  5 Amount you want refunded to you  5 Amount you want refunded to you  5 Amount you want refunded to you  7 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)  1 Under penalties of perjuy, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belef, it is true, correct, and complete. I further declare that the amounts in Part I above are the amountain the income tax return (original or amended) I am now authorizing, I consent to allow my intermediate service provider, transmitter, or electronic return originate (ERO) for any relayin processing the refunder or refund, and fell the date of any relative processing the refunder or refund, and fell the date of any relative intermediate tax and the discretion for the service of a period in the processing the refunder of the care of the ca			
Enter whole dollars only on lines 1 through 5.  Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1	Part I. Tay Peturn Information — Tay Vear Ending December 31 20	22 (Enter year you a	re authorizina )
Notes Form 1040-SS filter use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income 2 Total tax 2 Co.215. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 10, 735. 4 Amount you want refunded to you 5 Amount you ove  Part III Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under pendities of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and beilef, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and beilef, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and beilef, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing, or the manufaction in the income tax return (original or amended) I am now authorizing in creamed in the most income tax return (original or amended) I am now authorizing. Or several returns and/or a payment of estimated tax, and the financial institution account indicated in the tax representation of the payment in creamed in the information amount in contact the U.S. Treasury Financial Agent at 1-888-435-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institution account indicated in the tax return (original or amended) I am now authorizing.    Taxpayer's PIN: check one box only   I authorize		23 (Linter year you a	re authorizing.)
1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 10, 7335. 4 Amount you want refunded to you 4 4 4, 520. 5 Amount you want refunded to you 5 Amount you want refunded to you 6 Amount you want refunded to you 7 Amount you want refunded to you 8 Amount you want refunded to you 8 Amount you want refunded to you 9 Amount you 9 Amount you want refunded to you 9 Amount 9 Amo			
A Amount you want refunded to you	·		<b>1</b> 64,674.
A Amount you want refunded to you	. •		<b>2</b> 6,215.
Amount you want refunded to you  Part III Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)  Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any return (I applicable, I authorize the U.S. Treasury sinansic officed between the U.S. Treasury Financial (Agent to Instead in the preparation software for Agent to Instead and ACI electronic funds without any control of the Agent to Instead in the preparation software for Agent to Instead and the Cartesian Instead (Agent to Instead Agent to Instead Instead (Agent to Instead Agent to Instead Instead (Agent to Instead			
S Amount you owe	4 Amount you want refunded to you		
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended). I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I am now authorizing or and the part I is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing.  I authorize the U.S. Tready Financial Agent to receive on the transmission, (b) the reason of any delay in processing the return or return, and (c) the date of any return of 1 and and 1	5 Amount you owe		5
my knowledge and belief, it is true, correct, and compilete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return original or receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasony Transmitter, or and does not not a supplicable, and or a power of the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cance) a supment, I must contact the U.S. Treasury Financial Agent and the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cance) a supment, I must contact the U.S. Treasury Financial Agent and Tase-Ba-S3-4637 Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of the account of the transmission of the electronic payment of the transmission of the electronic payment of the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of the transmission of the electronic payment of the transmission of the electronic payment of the transmission of the electronic payment of the electronic payment of the processing of the electronic payment of th	Part II Taxpayer Declaration and Signature Authorization (Be sure you	get and keep a cop	y of your return)
Taxpayer's PIN: check one box only	return (original or amended) I am now authorizing. I consent to allow my intermediate service provides send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I auth Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution apayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial untorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cance business days prior to the payment (settlement) date. I also authorize the financial institutions involved to the payment (settlement) date. I also authorize the financial institutions involved to receive confidential information necessary to answer inquiries and resolve issues relatives personal identification number (PIN) below is my signature for the income tax return (original or an	der, transmitter, or electronson for rejection of the transmitter, as on for rejection of the transmitter, as the U.S. Treasury and account indicated in the table in the transmitter in	onic return originator (ERO) cansmission, (b) the reason and its designated Financial ax preparation software for entry to this account. This ation. To revoke (cancel) are received no later than 2 the electronic payment of ther acknowledge that the
I authorize GLOBAL TAXES LLC ERO firm name signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Your signature ▶ Date ▶  Spouse's PIN: check one box only   ERO firm name signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's PIN: check one box only   ERO firm name signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's signature ▶ Date ▶  Practitioner PIN Method Returns Only—continue below  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. 2 2 2 4 9 6 0 8 2 7 1  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions			
Spouse's PIN: check one box only  I authorize  I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing.  Date  Spouse's PIN: check one box only  I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's PIN: check one box only  I authorize  ERO firm name  signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's signature   Practitioner PIN Method Returns Only—continue below  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.  Date  Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature  Date  ERO firm name  to enter five digits, but only as my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature		gonorato my PINI	
I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Your signature ▶ Date ▶  Spouse's PIN: check one box only I authorize to enter or generate my PIN I as my signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's signature ▶ Date ▶  Practitioner PIN Method Returns Only—continue below  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.    Certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions	ERO firm name	Ent	ter five digits, but
Spouse's PIN: check one box only	I will enter my PIN as my signature on the income tax return (original or amend if you are entering your own PIN <b>and</b> your return is filed using the Practitioner		
I authorize	Your signature ▶	Date ▶	
I authorize	Shouse's DIN: check are how only		
ERO firm name signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's signature  Practitioner PIN Method Returns Only—continue below  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.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature  Date  ERO Must Retain This Form — See Instructions	• _	gonorato my DINI	ac my
signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's signature ▶ Date ▶  Practitioner PIN Method Returns Only—continue below  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.    Certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions		_	
Spouse's signature   Practitioner PIN Method Returns Only—continue below  Practitioner PIN Method Returns Only—continue below  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.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature   Date   ERO Must Retain This Form — See Instructions	signature on the income tax return (original or amended) I am now authorizing.		
Practitioner PIN Method Returns Only—continue below  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.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions	if you are entering your own PIN and your return is filed using the Practitioner		
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.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature   Date   ERO Must Retain This Form — See Instructions	Spouse's signature ▶	Date ►	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature   Date   ERO Must Retain This Form — See Instructions	Practitioner PIN Method Returns Only—contin	ue below	
Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions	Part III Certification and Authentication — Practitioner PIN Method Only	<b>y</b>	
authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions	<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.		
ERO Must Retain This Form — See Instructions	authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that	I am submitting this retu	irn in accordance with the
	ERO's signature ▶	Date ►	

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

<b>1040</b>		artment of the Treasury—Internal Revenue Serv <b>S. Individual Income Tax</b>		m 20 <b>2</b>	3	OMB No. 1545-0	074 IR	S Use Onl	ly—Do not v	vrite or sta	aple in this space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ing		, 20		See se	parate	instructions.
Your first name	and m	iddle initial	Last name	9					Your so	ocial sec	curity number
JAYANAGA	A VEI	NKATA ANA	DESU						853	13	4316
		s first name and middle initial	Last name	•							security number
Home address	(numbe	er and street). If you have a P.O. box, see	instructions	S.			Apt. r	10.	Preside	ntial Ele	ection Campaign
4955 USA	AA B	LVD					10		1	,	ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete spa	ces below.	Sta	ite Z	ZIP code				jointly, want \$3 nd. Checking a
SAN ANTO	ONIO				Τ>	ζ ,	78240				not change
Foreign country	y name		For	reign province/state/o	count	ty F	oreign po	stal code	your ta	x or refu	ınd
										Yo	ou Spouse
Filing Status	s X	Single				☐ Head of hou	ısehold	(HOH)			
Check only		Married filing jointly (even if only o	ne had inc	ome)							
one box.		Married filing separately (MFS)				☐ Qualifying s	urviving	spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name of y	your spouse. If you	ı che	ecked the HOH o	or QSS b	ox, ent	ter the ch	ild's na	me if the
	qu	lalifying person is a child but not you	ur depende	ent:							
Digital	Δt ar	ny time during 2023, did you: (a) rec	eive (as a ı	reward award or	navr	ment for property	/ Or Serv	ices). u	r (h) sell		
Digital Assets		nange, or otherwise dispose of a dig								□Ye	es 🛛 No
Standard		neone can claim:  You as a de	•	☐ Your spouse			(		- /		
Deduction	_	Spouse itemizes on a separate retur	•	· ·		-					
									0.4050		1.12.1
		: Were born before January 2, 1	959	Are blind <b>Spo</b>	ouse	: U Was born					s blind
Dependent				(2) Social security number	'	(3) Relationship	1, ,		•	1	(see instructions): or other dependents
If more	(1) F	I) First name Last name		number to you			Child tax credit Credit for of				
than four dependents,								<u> </u>			
see instruction	s							<u> </u>			
and check here	1 —										
-	10	Total amount from Form(s) W-2, b	ov 1 (222 i	inetructions)					1.	.	85 <b>,</b> 338.
Income	1a	Household employee wages not re	,	,					. 1a		00,330.
Attach Form(s)	b	Tip income not reported on line 1a	•	. ,							
W-2 here. Also attach Forms	c C	Medicaid waiver payments not rep	•	*	ootru				. 10		
W-2G and	d	Taxable dependent care benefits for		` '		,			. 10		
1099-R if tax was withheld.	f	Employer-provided adoption bene							. 11		
If you did not	g	Wages from Form 8919, line 6.							. 10		
get a Form	9 h	Other earned income (see instruct							. 1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (				1					
instructions.	z	Add lines 1a through 1h	ooo mondo						. 12	,	85,338.
Attach Sch. B	 2a	-	2a		b T	axable interest					
if required.	3a	· –	3a			ordinary dividend					
	4a		4a			axable amount .					
Standard Deduction for—	5a	Pensions and annuities	5a		b T	axable amount .			. 5k	,	
Single or	6a	_	6a			axable amount .				,	
Married filing separately,	С	If you elect to use the lump-sum e	lection me	ethod, check here (	(see	instructions) .					
\$13,850	7	Capital gain or (loss). Attach Sche	dule D if re	equired. If not requ	ired	, check here .					
Married filing jointly or	8	Additional income from Schedule							. 8		-20,664.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8. Th	nis is your <b>total inc</b>	ome	e			. 9		64,674.
\$27,700	10	Adjustments to income from Sche							. 10	)	
Head of household,	11	Subtract line 10 from line 9. This is	s your <b>adj</b> u	usted gross incon	ne				. 11		64,674.
\$20,800 If you checked	12	Standard deduction or itemized	deduction	ns (from Schedule	A)				. 12	2	13,850.
any box under	13	Qualified business income deduct	ion from F	orm 8995 or Form	899	5-A			. 13	3	<u> </u>
Standard Deduction,	14								. 14	١ _	13 <b>,</b> 850.
see instructions.	15	Subtract line 14 from line 11. If zer	ro or less,	enter -0 This is y	our t	taxable income			. 15	5	50,824.

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 <b>3</b> □ .	. 10	6,489.
Credits	17	Amount from Schedule 2, line 3			. 1	7
	18	Add lines 16 and 17			. 18	6,489.
	19	Child tax credit or credit for other dependent	ts from Sched	ule 8812	. 19	9
	20	Amount from Schedule 3, line 8			. 20	274.
	21	Add lines 19 and 20			. 2	1 274.
	22	Subtract line 21 from line 18. If zero or less,	enter -0		. 2	6,215.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21	. 2	3 0.
	24	Add lines 22 and 23. This is your total tax			. 2	
Payments	25	Federal income tax withheld from:				
-	а	Form(s) W-2		<b>25a</b> 10,7	35.	
	b	Form(s) 1099		25b		
	С	Other forms (see instructions)		25c		
	d	Add lines 25a through 25c			. 25	id 10,735.
f you have a	26	2023 estimated tax payments and amount a	pplied from 20	22 return	. 20	6
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)		No . <b>27</b>		
allach Sch. Elc.	28	Additional child tax credit from Schedule 8812		28		
	29	American opportunity credit from Form 8863	3, line 8	29		
	30	Reserved for future use		30		
	31	Amount from Schedule 3, line 15		31		
	32	Add lines 27, 28, 29, and 31. These are your	total other pa	ayments and refundable credits .	. 3	2
	33	Add lines 25d, 26, and 32. These are your to	tal payments		. 3	10,735.
Refund	34	If line 33 is more than line 24, subtract line 2	4 from line 33.	This is the amount you <b>overpaid</b> .	. 3	4,520.
	35a	Amount of line 34 you want refunded to you		B is attached, check here	☐ 35	4,520.
Direct deposit?	b	Routing number 1 1 1 0 0 0 0		,	ings	
See instructions.	d	Account number 5 8 6 0 3 6 9	4 9 6 6	5   2		
	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. This is the <b>amo</b> For details on how to pay, go to <i>www.irs.go</i>	•		. 3	7
	38	Estimated tax penalty (see instructions) .		38		
Third Party Designee		you want to allow another person to disc structions		□ v _ o	olete belov	w. 🗵 No
•	De nai	signee's me	Phone no.	Personal number	identification	on
Sign Here		der penalties of perjury, I declare that I have examine lief, they are true, correct, and complete. Declaration				,
11016	Yo	ur signature	Date	Your occupation	Protection	sent you an Identity n PIN, enter it here
Joint return?				SOFTWARE ENGINEER	(see inst.)	
See instructions.	Sn	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation	I If the IRS	sent your spouse an

Keep a copy for Identity Protection PIN, enter it here your records. (see inst.) Phone no. (210)780-2791Email address TARUN.DESU07@GMAIL.COM Preparer's name Preparer's signature Date PTIN Check if: **Paid** Self-employed SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 03/23/2024 P02082703 **Preparer** Phone no. (678) 965-9522 GLOBAL TAXES LLC Firm's name **Use Only** 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's address Firm's EIN Form **1040** (2023) Go to www.irs.gov/Form1040 for instructions and the latest information. BAA REV 03/07/24 PRO

#### **SCHEDULE 1** (Form 1040)

**Additional Income and Adjustments to Income** 

OMB No. 1545-0074 Attachment

Department of the Treasury Internal Revenue Service

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

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

Sequence No. 01 Your social security number

JAYANAGA VENKATA ANA DESU 853-13-4316 Part I Additional Income Taxable refunds, credits, or offsets of state and local income taxes . . . . . . . . . . . . . . . . 1 1 2a Date of original divorce or separation agreement (see instructions): 3 3 4 4 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E . . 5 -20,664. 6 6 7 7 8 Other income: 8a d8 8c Foreign earned income exclusion from Form 2555 . . . . . . . . 8d 8e 8f Alaska Permanent Fund dividends . . . . . . . . . . . . . . . . 8i Activity not engaged in for profit income . . . . . . . . . . . . . . . . 8i 8k 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 8m 8n Section 951A(a) inclusion (see instructions) . . . . . . . . . . . . 80 Section 461(I) excess business loss adjustment . . . . . . . . . . . 8p Taxable distributions from an ABLE account (see instructions) . . . 8a Scholarship and fellowship grants not reported on Form W-2 . . . 8r Nontaxable amount of Medicaid waiver payments included on Form 8s Pension or annuity from a nonqualifed deferred compensation plan or 8t **u** Wages earned while incarcerated . . . . . . . . . . . . . . 8u **z** Other income. List type and amount: 9 9 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form

10

-20,664.

10

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 govern	ment		
	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	t t	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:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here are			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	

### **SCHEDULE 3** (Form 1040)

**Additional Credits and Payments** 

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

OMB No. 1545-0074 Attachment Sequence No. 03

Your social security number

Department of the Treasury Internal Revenue Service

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

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

JAY.	ANAGA VENKATA ANA DESU		853-1	13-43	316
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 244 Form 2441		. Attach	2	
3	Education credits from Form 8863, line 19			3	274.
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	<u>.</u>		5b	
6	Other nonrefundable credits:				
а	General business credit. Attach Form 3800	6a			
b	Credit for prior year minimum tax. Attach Form 8801	6b			
С	Adoption credit. Attach Form 8839	6c			
d	Credit for the elderly or disabled. Attach Schedule R	6d			
е	Reserved for future use	6e			
f	Clean vehicle credit. Attach Form 8936	6f			
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	6I			
m	Credit for previously owned clean vehicles. Attach Form 8936 .	6m			
Z	Other nonrefundable credits. List type and amount:				
_	Total athermanish and also are disc. A del Press Co. Here and Co.	6z		_	
7	Total other nonrefundable credits. Add lines 6a through 6z			7	
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 1 1040-NR, line 20		u-sk, or	8	274.

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 Attachment Sequence No. **13** 

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Your social security number

JAY.	ANAGA VENKATA ANA DESU						853-1	3-4316	5	
Par	t I Income or Loss From Rental Real Estate ar	nd Ro	yalties							
	Note: If you are in the business of renting personal proper	rty, use		<b>C</b> . See	instru	ctions. If you a	re an indi	vidual, rep	oort farm	
_	rental income or loss from <b>Form 4835</b> on page 2, line 40.		- ()						77 N	
	Did you make any payments in 2023 that would require you									
В	If "Yes," did you or will you file required Form(s) 1099? .							Ү	es 🗌 No	1
1a	Physical address of each property (street, city, state, ZII	P code	<del>)</del> )							
Α	CHILAKALURIPETA GUNTUR ANDHRA PRADESH	IN 5	522616							
В										
С										
1b	Type of Property 2 For each rental real estate property	erty list	ed:		Fa	ir Rental	Persor	nal Use	0.11/	
	(from list below) above, report the number of fair	rental	and			Days	Da	ays	QJV	
Α	personal use days. Check the Q			Α		365		0		
В	if you meet the requirements to			В						
С	qualified joint venture. See instru	JCHOHS	·.	С						
Туре	of Property:									
1	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Land		7	Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (descri	ibe)			
	·									
lassi				Α		Propertie B	38.	I	С	
Incoi 3	Rents received	3		A 5	90.	В			C	
4		4			90.					
	Royalties received	4								
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1 . 4	78.					
8	Commissions	8			70.					
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,3	65.					
12	Mortgage interest paid to banks, etc. (see instructions)	12			00.					
13	Other interest	13								
14	Repairs	14		4,5	58.					
15	Supplies	15		4,4						
16	Taxes	16								
17	Utilities	17		3,4	57.					
18	Depreciation expense or depletion	18		4,3	82.					
19	Other (list) MISCELLANEOUS	19		1,5	36.					
20	Total expenses. Add lines 5 through 19	20		21,2	54.					
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 <b>Form 6198</b>	21	-	-20,6	64.					
22	Deductible rental real estate loss after limitation, if any,									
	on Form 8582 (see instructions)	22	(	20,66		(	)	(		)
23a	Total of all amounts reported on line 3 for all rental proper				23a		590.			
b	Total of all amounts reported on line 4 for all royalty prop				23b					
C	Total of all amounts reported on line 12 for all properties				23c	-	200			
d	Total of all amounts reported on line 18 for all properties				23d		,382.			
e	Total of all amounts reported on line 20 for all properties				23e	21	,254.			
24	Income. Add positive amounts shown on line 21. <b>Do no</b>		-			Antinone i	. 24	,	20 661	
25	Losses. Add royalty losses from line 21 and rental real estat							(	20,664	. )
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 · <b>26</b>		-20,66	1
	onicado i (i onii 10-0), inic o. Otherwise, incidue tilis a	ouill		a on n	. 10 - 1	on page 2	.   20	1	~ U, UU,	Ι.

Department of the Treasury Internal Revenue Service

### **Education Credits** (American Opportunity and Lifetime Learning Credits)

Attach to Form 1040 or 1040-SR. Go to www.irs.gov/Form8863 for instructions and the latest information. Attachment Sequence No. **50** 

OMB No. 1545-0074

Name(s) shown on return Your social security number JAYANAGA VENKATA ANA DESU 853 13 4316

CAUTION	
Part I	•

Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

Part	Refundable American Opportunity Credit					
1	After completing Part III for each student, enter the total of all amounts from all P	arts I	II, line	30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse	2				
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	3				
4	Subtract line 3 from line 2. If zero or less, <b>stop</b> ; you can't take any education credit	4				
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	5				
6	If line 4 is:  • Equal to or more than line 5, enter 1.000 on line 6				6	
7	at least three places)	e yea an op	ar <b>and</b> portu	nity credit;	7	
8	<b>Refundable American opportunity credit.</b> Multiply line 7 by 40% (0.40). Enter on Form 1040 or 1040-SR, line 29. Then go to line 9 below.	the a	ımoun	t here and	8	
Part	Nonrefundable Education Credits					
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	(see	instru	ctions) .	9	
10	After completing Part III for each student, enter the total of all amounts from a zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19				10	1,370.
11 12	Enter the smaller of line 10 or \$10,000				11 12	1,370. 274.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse	13		90,000.		
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	14		64,674.		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19	15		25,326.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	16		10,000.		
17	If line 15 is: • Equal to or more than line 16, enter 1.000 on line 17 and go to line 18			)		
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (roun least three places)			}	17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet				18	 274.
19	<b>Nonrefundable education credits.</b> Enter the amount from line 7 of the Credit instructions) here and on Schedule 3 (Form 1040), line 3	Limit	Work	sheet (see	19	274

Name(s) shown on return

JAYANAGA VENKATA ANA DESU

Your social security number

853 13 4316



Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

Par	t III Student and Educational Institution Information	n. See instructions.	
20	Student name (as shown on page 1 of your tax return)	21 Student social security number (as s	hown on page 1 of
	JAYANAGA VENKATA ANA	your tax return)	
	DESU	853-13-4316	
	Educational institution information (see instructions)	b. Name of a count of a sectional brother	· · · · ('f - · · · )
ć	a. Name of first educational institution  UNIVERSITY OF THE CUMBERLANDS	<b>b.</b> Name of second educational institution	ion (if any)
_	1) Address. Number and street (or P.O. box). City, town or	(1) Address. Number and street (or P.	O hox) City town or
'	post office, state, and ZIP code. If a foreign address, see instructions.	post office, state, and ZIP code. If instructions.	
	6198 COLEGE STATION DRIVE		
	WILLIAMSBURG KY 40769		
	2) Did the student receive Form 1098-T from this institution for 2023?  ☐ Yes ☐ No	(2) Did the student receive Form 1098 from this institution for 2023?	-T Yes No
	3) Did the student receive Form 1098-T from this institution for 2022 with box   ✓ Yes   ✓ No 7 checked?	(3) Did the student receive Form 1098 from this institution for 2022 with b 7 checked?	
(	4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	(4) Enter the institution's employer ide if you're claiming the American opposed checked "Yes" in (2) or (3). You can 1098-T or from the institution.	portunity credit or if you
	61-0470593		
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?	$\square$ Yes — <b>Stop!</b> Go to line 31 for this student. $\bowtie$ No	— Go to line 24.
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2023 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.		— <b>Stop!</b> Go to line 31 his student.
25	Did the student complete the first 4 years of postsecondary education before 2023? See instructions.	▼ Yes — <b>Stop!</b> Go to line 31 for this student. □ No	— Go to line 26.
26	Was the student convicted, before the end of 2023, of a felony for possession or distribution of a controlled substance?		Complete lines 27 ugh 30 for this student.
CAU	You <b>can't</b> take the American opportunity credit and the li you complete lines 27 through 30 for this student, don't don		in the same year. If
	American Opportunity Credit		
27	Adjusted qualified education expenses (see instructions). Dor		27
28			28
29	- 1- 3 3		29
30	If line 28 is zero, enter the amount from line 27. Otherwise, a enter the result. Skip line 31. Include the total of all amounts f		30
	Lifetime Learning Credit		50
31	Adjusted qualified education expenses (see instructions). Incl	ude the total of all amounts from all Parts	
<b>J</b> 1	III, line 31, on Part II, line 10		<b>31</b> 1,370.

## Form **4562**

**Depreciation and Amortization** 

(Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

2023

Attachment Sequence No. 179

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

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

Business or activity to which this form relates

Identifying number

JAY	ANAGA VENKATA	ANA DESU	Sch	E CHILAKA	ALURIPETA		853	3-13-4316
Pa			rtain Property Und ed property, comple			omplete Part I.		
1	Maximum amount (s	see instructions	s)				1	1,160,000.
2	Total cost of section	n 179 property	placed in service (see	e instructions	)		2	
3	Threshold cost of se	ection 179 prop	perty before reduction	n in limitation	(see instruct	ions)	3	2,890,000.
4	Reduction in limitati	on. Subtract lir	ne 3 from line 2. If zer	o or less, ent	er -0		4	
5	Dollar limitation for separately, see instr	•	otract line 4 from lin			er -0 If married filing	5	
6		scription of proper		(b) Cost (busi		(c) Elected cost		
			•		,,	.,		
7	Listed property. Ent	er the amount	from line 29		7			
						d 7	8	
9		-					9	
10							10	
11	•		•			or line 5. See instructions	11	
12				•	,	ne 11	12	
			to 2024. Add lines 9					
			for listed property. Ir			10		
						nclude listed property	See	instructions)
					•	erty) placed in service	1	
	during the tax year.	See instruction	ns				14	
							15	
16	Other depreciation (	including ACR	S)				16	
Par	III MACRS De	preciation (D	on't include listed	property. Se	e instructio	ns.)		
				Section A				
	MANORO I I I'						4-	
		•	-	-	-	23	17	
		o group any a	-	ce during the	e tax year int	o one or more general	1/	
	If you are electing tasset accounts, che	o group any a eck here	ssets placed in servi	ce during the	e tax year int	o one or more general		em
18	If you are electing tasset accounts, che	o group any a eck here	ssets placed in servi	ce during the	e tax year int	o one or more general	n Syst	em epreciation deduction
18	If you are electing t asset accounts, che Section B	co group any a eck here	assets placed in servi	ce during the	e tax year int	o one or more general	n Syst	
(a) (	If you are electing to asset accounts, che Section B Classification of property 3-year property	co group any a eck here	assets placed in servi	ce during the	e tax year int	o one or more general	n Syst	
(a) (a) 19a	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property	co group any a eck here	assets placed in servi	ce during the	e tax year int	o one or more general	n Syst	
(a) ( 19a b	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property	co group any a eck here	assets placed in servi	ce during the	e tax year int	o one or more general	n Syst	
(a) (iii) 19a b c c d	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property  7-year property	co group any a eck here	assets placed in servi	ce during the	e tax year int	o one or more general	n Syst	
(a) (iii) 19a b c d d e	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property  7-year property  10-year property	co group any a eck here	assets placed in servi	ce during the	e tax year int	o one or more general	n Syst	
(a) (d) (d) (e) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property	co group any a eck here	assets placed in servi	ce during the	e tax year int	o one or more general	n Syst	
(a) (d) (d) (e) (d) (e) (f) (g) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property	o group any a cck here	essets placed in servi	g 2023 Tax Y  (d) Recovery period	e tax year int	o one or more general	n Syst	Depreciation deduction
(a) (d) (d) (e) (d) (e) (f) (g) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property  Residential rental	co group any a eck here	assets placed in servi	ce during the control of the control	e tax year int	o one or more general	n Syst	
(a) (b) CC dd ee	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property  25-year property  Residential rental property	o group any a cck here	essets placed in servi	ce during the control of the control	e tax year int	o one or more general	n Syst	Depreciation deduction
(a) (b) CC dd ee	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property  Residential rental	o group any a cck here	essets placed in servi	ce during the control of the control	e tax year int  ear Using th  (e) Convention  MM  MM	o one or more general  o one or more general  e General Depreciation  (f) Method  S/L  S/L  S/L	n Syst	Depreciation deduction
(a) (b) CC dd ee	If you are electing the asset accounts, check section B. Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property  25-year property  Residential rental property  Nonresidential real property	co group any a ceck here	ced in Service During (c) Basis for depreciation (business/investment use only—see instructions)	ce during the control of the control	e tax year int  Ear Using th  (e) Convention  MM  MM  MM  MM  MM	o one or more general  o one or more general  e General Depreciation  (f) Method  S/L  S/L  S/L  S/L  S/L  S/L  S/L  S/	(g) D	Depreciation deduction
(a) (a) (b) (c) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 15-year property 25-year property 25-year property Residential rental property Nonresidential real property Section C-	co group any a ceck here	ced in Service During (c) Basis for depreciation (business/investment use only—see instructions)	ce during the control of the control	e tax year int  Ear Using th  (e) Convention  MM  MM  MM  MM  MM	o one or more general  o one or more general  e General Depreciation  (f) Method  S/L  S/L  S/L  S/L  S/L  S/L	(g) D	Depreciation deduction
(a) (d) (d) (e) (d) (d) (e) (d) (d) (e) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property  10-year property  15-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C-  Class life	co group any a ceck here	ced in Service During (c) Basis for depreciation (business/investment use only—see instructions)	ce during the control of the control	e tax year int  Ear Using th  (e) Convention  MM  MM  MM  MM  MM	o one or more general  Graph General Depreciation  (f) Method  S/L  S/L  S/L  S/L  S/L  S/L  S/L  S/	(g) D	Depreciation deduction
(a) (a) (b) (c) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	If you are electing to asset accounts, che Section B Classification of property  3-year property  5-year property  10-year property  15-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C -  Class life  12-year	co group any a ceck here	ced in Service During (c) Basis for depreciation (business/investment use only—see instructions)	ce during the control of the control	e tax year int  Ear Using the  (e) Convention  MM  MM  MM  MM  MM  MM  MM  MM  MM	o one or more general  o one or more general  e General Depreciation  (f) Method  S/L  S/L  S/L  S/L  S/L  S/L  S/L  S/	(g) D	Depreciation deduction
(a) (a) (b) (c) (d) (e) (d) (e) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	If you are electing to asset accounts, che Section B Classification of property  3-year property  5-year property  7-year property  10-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C-Class life  12-year  30-year	co group any a ceck here	ced in Service During (c) Basis for depreciation (business/investment use only—see instructions)	ce during the control of the control	e tax year int  ear Using th  (e) Convention  MM  MM  MM  MM  MM  MM  MM  MM  MM	o one or more general	(g) D	Depreciation deduction
(a) (a) (b) (c) (d) (e) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 15-year property 25-year property 25-year property Residential rental property Nonresidential real property Section C- Class life 12-year 30-year	o group any a cck here  —Assets Place  (b) Month and year placed in service  01/23  -Assets Place	ced in Service During (c) Basis for depreciation (business/investment use only—see instructions)  125,755.	ce during the control of the control	e tax year int  Ear Using the  (e) Convention  MM  MM  MM  MM  MM  MM  MM  MM  MM	o one or more general  o one or more general  e General Depreciation  (f) Method  S/L  S/L  S/L  S/L  S/L  S/L  S/L  S/	(g) D	Depreciation deduction
(a) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property  10-year property  15-year property  25-year property  25-year property  Residential rental property  Nonresidential real property  Section C —  Class life  12-year  30-year  40-year	o group any a ck here	ced in Service During (c) Basis for depreciation (business/investment use only—see instructions)  125,755.	ce during the control of the control	e tax year int  ear Using th  (e) Convention  MM  MM  MM  MM  MM  MM  MM  MM  MM	o one or more general	(g) D	Depreciation deduction
(a) (a) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	If you are electing to asset accounts, che Section B Classification of property 3-year property 5-year property 10-year property 15-year property 25-year property 25-year property Residential rental property Nonresidential real property Section C— Class life 12-year 30-year 40-year Listed property. Ent	co group any a ceck here	ced in Service During (c) Basis for depreciation (business/investment use only—see instructions)  125,755.	ce during the control of the control	e tax year int	o one or more general  e General Depreciation  (f) Method  S/L  S/L  S/L  S/L  S/L  S/L  S/L  S/	(g) D	Depreciation deduction
(a) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e	If you are electing to asset accounts, che Section B  Classification of property  3-year property  5-year property  10-year property  15-year property  20-year property  Everyment property  Residential rental property  Nonresidential real property  Section C—  Class life  12-year  30-year  40-year  Listed property. Ent  Total. Add amount here and on the app	o group any a cck here	ced in Service During (c) Basis for depreciation (business/investment use only—see instructions)  125,755.	25 yrs. 27.5 yrs. 40 yrs. 40 yrs.	MM	o one or more general  Be General Depreciation  (f) Method  S/L  S/L  S/L  S/L  S/L  S/L  S/L  S/	(g) D	Depreciation deduction