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

	1				
Submis	ssion Identification Number (SID)				
Taxpaye	r's name	Social securit	y numb	per	
JASW	JANTH PATTIPATI	387-63-	-622	6	
Spouse's	s name	Spouse's soc			
Part	Tax Return Information — Tax Year Ending December 31, 2023 (En	 ter year you a	re all	thorizina	<u> </u>
	whole dollars only on lines 1 through 5.	ter year you a	e au	uionzing.)
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1	68	,635.
	Total tax		2		0.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	11	,112.
	Amount you want refunded to you		4		,112.
	Amount you owe		5		,
Part		d keep a cop	y of y	our retu	rn)
my kno return (of to send for any Agent to payment authoriz payment business taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amend wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I at original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for a delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account into 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 terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation in so days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the process of the income tax return (original or amended) in the Indication number (PIN) below is my signature for the income tax return (original or amended) in Europe Mitherarch (and the process of the income tax return (original or amended) in Europe (III) below is my signature for the income tax return (original or amended)	sove are the amosmitter, or electrorejection of the trace U.S. Treasury andicated in the taution to debit the authorizate the authorizate equests must be the processing of a payment. I furt	ounts for its can answind its can are the can are the elements of the can are	from the incurrence turn original sistem, (b) the designated paration soff to this according to the control of	come tax tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 hyment of that the
	nic Funds Withdrawal Consent. yer's PIN: check one box only				
X		te my PIN	6 2	2 2 6	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent		digits, but er all zeros	asiny
	I will enter my PIN as my signature on the income tax return (original or amended) I amif you are entering your own PIN and your return is filed using the Practitioner PIN me below.				
Your si	ignature ▶ Date ▶				
Spaus	e's PIN: check one box only				
Spous		to my DINI			
Ш	I authorize to enter or general		er five	digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.			r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I amif you are entering your own PIN and your return is filed using the Practitioner PIN me below.				
Spouse	e's signature ► Date ►				
	Practitioner PIN Method Returns Only—continue belo	w			
Part I	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 Don't ente	6 0	8 2 7	1
		Don t enti	or an Zt		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am suments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Pub. 1345, Handb	bmitting this retu	rn in a	accordance	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	o Do So			

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



£1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545-0	074	IRS Use Only	–Do not v	write or staple in	this space.
For the year Ja	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	parate instru	uctions.
Your first name	e and m	iddle initial	Last na	ame						Your so	ocial security	number
JASWANT:	Н		PATI	TIPATI	I					387	63 62	26
		s first name and middle initial	Last na								's social secu	
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.				A	pt. no.	Preside	ential Election	Campaigr
490 BAR	NES :	DR								Check	here if you, o	r your
City, town, or p	oost offi	ice. If you have a foreign address, also co	omplete s	spaces be	elow.	Sta	ite	ZIP co	ode		if filing jointly	
SAN MAR	COS					TΣ	ζ	786	66		o this fund. C low will not c	•
Foreign countr	y name			Foreign p	rovince/state/c	count	ty	Foreig	n postal code	I	x or refund.	95
											You	Spouse
Filing Status	s 🗵	Single	•				☐ Head of ho	useh	old (HOH)			
Check only		Married filing jointly (even if only o	ne had	income)								
one box.		Married filing separately (MFS)					☐ Qualifying s	urviv	ing spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name o	of your s	pouse. If you	ı che	ecked the HOH	or Q	SS box, ente	er the ch	ild's name if	the
	qu	ıalifying person is a child but not you	ır depei	ndent:								
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	d award or i	navr	ment for propert	v or	services): or	(b) sell		
Assets		nange, or otherwise dispose of a dig						-		. ,		⊠ No
Standard		neone can claim: You as a de					a dependent					
Deduction	_	Spouse itemizes on a separate retur	•		-		•					
								h - f -		1050	☐ Is blin	ــــــــــــــــــــــــــــــــــــــ
		: Were born before January 2, 1	909 [Are b	·			14	ore January 2	-	lifies for (see ir	
•	nts (see instructions): (1) First name Last name			(2)	Social security number		(3) Relationship to you	, ,-	Child tax c		Credit for othe	
If more than four	(1)	East name					,					1
dependents,												1
see instruction	ıs —											1
and check here	1											1
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruc	ctions)					. 1a	82	2 , 110.
IIICOIII C	b	Household employee wages not re	`		,							
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	•							. 10		
attach Forms	d	Medicaid waiver payments not rep	•		,					. 10		
W-2G and	e	Taxable dependent care benefits f			,					. 16		
1099-R if tax was withheld.	f	Employer-provided adoption bene			-					. 11		
If you did not	g	Wagaa from Form 2010 line 6								. 10	7	
get a Form	h	Other earned income (see instruct	ions)							. 1h	1	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,				1i					
	z	Add lines 1a through 1h								. 1z	z 82	2,110.
Attach Sch. B	2a		2a			b T	axable interest			. 2t		
if required.	3a	Qualified dividends	3a			b C	Ordinary dividend	ds .		. 3b	o	
	4a	IRA distributions	4a			b T	axable amount			. 4k)	
Standard Deduction for—	5a	Pensions and annuities	5a			b T	axable amount			. 5k	o	
 Single or 	6a	Social security benefits	6a			b T	axable amount			. 6Ł)	
Married filing separately,	С	If you elect to use the lump-sum e	lection	method,	check here ((see	instructions)		[
\$13,850	7	Capital gain or (loss). Attach Sche	dule D i	f require	d. If not requ	ired	, check here		[□ <u> </u>		
 Married filing jointly or 	8	Additional income from Schedule	1, line 1	0						. 8	-13	3,475.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is y	our total inc	omo	e			. 9	68	B , 635.
\$27,700	10	Adjustments to income from Sche	dule 1,	line 26						. 10)	
 Head of household, 	11	Subtract line 10 from line 9. This is	s your a	djusted	gross incon	ne				. 11	I 68	3 , 635.
\$20,800 • If you checked	12	Standard deduction or itemized	deduct	t ions (fro	m Schedule	A)				. 12	2 13	3 , 850.
any box under Standard	13	Qualified business income deduct	ion fron	n Form 8	995 or Form	899	5-A			. 13	3	
Deduction,	14									. 14		3,850.
see instructions.	15	Subtract line 1/1 from line 11. If zer	ro or los	c ontor	O This is w	aur 1	tavabla inaama			15	. 5,	1 725

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	7,358.	
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	7,358.	
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	e8					20	7,358.	
	21	Add lines 19 and 20						21	7,358.	
	22	Subtract line 21 from line 18.	. If zero or less,	enter -0				22	0.	
	23	Other taxes, including self-er	mployment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is	your total tax					24	0.	
Payments	25	Federal income tax withheld	from:							
-	а	Form(s) W-2				25a 11	,112.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	11,112.	
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20	122 return			26		
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	28	Additional child tax credit from	n 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, lin	e 15			31				
	32	Add lines 27, 28, 29, and 31.	32							
	33	Add lines 25d, 26, and 32. The	hese are your to	tal payments				33	11,112.	
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	11,112.	
	35a	Amount of line 34 you want			is attached, chec	k here	. 🗆	35a	11,112.	
Direct deposit?	b	Routing number 1 1 1			c Type:	Checking	Savings			
See instructions.	d	Account number 1 3 3	3 2 4 9	9 1 8						
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24. For details on how to pay, go						37		
	38	Estimated tax penalty (see in	_	-		38		07		
Third Party Designee	Do	you want to allow another	person to disc	cuss this retu		See _	omplete	helow	X No	
Designee		esianee's		Phone			onal ident			
	na	me		no.			ber (PIN)			
Sign Here		der penalties of perjury, I declare the lief, they are true, correct, and com			, , ,		,		, ,	
Here	Yo	ur signature		Date	Your occupation				nt you an Identity	
								ection P	IN, enter it here	
Joint return? See instructions.				5.	ELECTRICAL		`			
Keep a copy for your records.		ouse's signature. If a joint return, b	ootn must sign.	Date Spouse's occupation			Ider	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Ph	one no. (979) 267-525	6	Email address	JASWANTH.PATT	IPATI@GMAIL.C	OM			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAG	GAR GUPTA	04/09/2024	P0208	2703	Self-employed	
Use Only	Fir	Firm's name GLOBAL TAXES LLC Phor						ne no.	(678) 965-9522	
————	Fir	m's address 245 ROONE	CT E BRU	NSWICK N	J 08816		Firm	ı's EIN	84-3171965	
	/-	40406 : 1 1: 111 1.1				-			= 1040 ()	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

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. Attachment Sequence No. **01**

Your social security number

JASV	JANTH PATTIPATI		387-63-6	226
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. Att			-13,475.
6	Farm income or (loss). Attach Schedule F			
7	Unemployment compensation			
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		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	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:	0-		
0	Total other income. Add lines 9a through 97	OZ	9	4
9 10	Total other income. Add lines 8a through 8z			
10	1040, 1040-SR, or 1040-NR, line 8	i ilele alla oli	10	-13,475.
				,

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-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	Jury duty pay (see instructions)	24a		_	
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b		-	
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c		-	
d	Reforestation amortization and expenses	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	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful	041			
_	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	04:			
	Housing deduction from Form 2555	24i 24j		-	
J	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24 j		-	
k	1041)	24k			
_		24K		-	
Z	Other adjustments. List type and amount:	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income			23	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		07/24 PRO		le 1 (Form 1040) 2023
	BAA	INEV U3/	ULIZA ENO	uu	

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

Department of the Treasury Internal Revenue Service Go to www.

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

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

Your social security number 387-63-6226

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	line 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 6	a		
b	Credit for prior year minimum tax. Attach Form 8801	S b		
С	Adoption credit. Attach Form 8839	ic		
d	Credit for the elderly or disabled. Attach Schedule R 6	id		
е	Reserved for future use	ie		
f	Clean vehicle credit. Attach Form 8936	Sf 7,358.		
g	Mortgage interest credit. Attach Form 8396	ig		
h	District of Columbia first-time homebuyer credit. Attach Form 8859	Sh .		
i	Qualified electric vehicle credit. Attach Form 8834	Si .		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911)j		
k	Credit to holders of tax credit bonds. Attach Form 8912 6	ik .		
I	Amount on Form 8978, line 14. See instructions	61		
m	Credit for previously owned clean vehicles. Attach Form 8936 . 6	m		
z	Other nonrefundable credits. List type and amount:			
	6	Sz		
7	Total other nonrefundable credits. Add lines 6a through 6z		7	7,358.
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 104 1040-NR, line 20	10, 1040-SR, or	8	7,358.
		(c		ed on page 2)

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

Par	t II 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, 1040 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.

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

JAS	WANTH PATTIPATI						387-6	3-6226	
Par	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use	Schedule						
	Did you make any payments in 2023 that would require you								
В	If "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Y	es 🗌 No
1a	Physical address of each property (street, city, state, ZIF	P code	e)						
Α	RAJAPUSHPA ETERNA FLAT NO: C902, ROAD NO .1,FIN			TCT. N	ANAKRZ	MGIIDA HYDE	RARAD.	TELANGAN	JA TN 500032
В	I I I I I I I I I I I I I I I I I I I		DIOIN.	101/ 1/1	.1111111111	IIIOODII IIIDD	1410110 /	11111110111	VII 11V 300032
C									
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental	and		Fa	ir Rental Days		nal Use ays	QJV
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	quained joint venture. See institu	JULIONS	٠.	С					
Туре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Land	t	7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
						Properti			
Incor	mor			Α		В	es.		С
3	Rents received	3			80.	В			
4	Royalties received	4			00.				
	nses:	-							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		8	10.				
8	Commissions	8			10.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1 /	20.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		Ι, Ί	20.				
13	Other interest	13							
14	Repairs	14		3 5	20.				
15	Supplies	15			60.				
16	Taxes	16		J, 0	00.				
17	Utilities	17		1 . 4	50.				
18	Depreciation expense or depletion	18			95.				
19	Other (list)	19		- J / U	70.				
20	Total expenses. Add lines 5 through 19	20		14,1	55				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	20		⊥ 1 1 1	55.				
21	result is a (loss), see instructions to find out if you must file Form 6198	21		-13 , 4	75.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(13,47	75 .)	′)()
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		680.		
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	3	3,095.		
е	Total of all amounts reported on line 20 for all properties				23e		,155.		
24	Income. Add positive amounts shown on line 21. Do not						. 24		
25	Losses. Add royalty losses from line 21 and rental real estate		•		nter to	tal losses her	e 25	(13,475.)
26	Total rental real estate and royalty income or (loss).								·
7	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this ar	ot apply	y to you,	also e	nter th	nis amount o			-13,475.

Form **8889**

Department of the Treasury

Health Savings Accounts (HSAs)

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

2023
Attachment
Sequence No. 52

Internal Revenue Service Go to www
Name(s) shown on Form 1040, 1040-SR, or 1040-NR

JASWANTH PATTIPATI

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. 387-63-6226

Befo	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if	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	⊠ Se	lf-only
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		
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	2,940.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	910.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13 Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.	13	0.
Part	HSA Distributions. If you are filing jointly and both you and your spouse each have separate Part II for each spouse.	arate 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 instructi 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	

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8936**

Clean Vehicle Credits

OMB No. 1545-2137

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Identifying number JASWANTH PATTIPATI 387-63-6226 Notes: • Complete a separate Schedule A (Form 8936) for each clean vehicle placed in service during the tax year. • Individuals completing Parts II, III, or IV, must also complete Part I. See "Note" text below. **Modified Adjusted Gross Income Amount** Part I 1a Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR 68,635. Enter any income from Puerto Rico you excluded 1b Enter any amount from Form 2555, line 45 1c Enter any amount from Form 2555, line 50 1d Enter any amount from Form 4563, line 15 1e е 2 Add lines 1a through 1e 2 68,635. 67,187. За Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR 3a Enter any income from Puerto Rico you excluded 3b Enter any amount from Form 2555, line 45 3с Enter any amount from Form 2555, line 50 3d Enter any amount from Form 4563, line 15 4 67,187. Enter the **smaller** of line 2 or line 4 5 67,187. Credit for Business/Investment Use Part of New Clean Vehicles Part II Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$150,000 (\$300,000 if married filing jointly or a qualifying surviving spouse; \$225,000 if head of household). Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936) . . . 6 6 0. 7 New clean vehicle credit from partnerships and S corporations (see instructions) 7 Business/investment use part of credit. Add lines 6 and 7. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1y . . . 8 0. 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 (\$300,000 if married filing jointly or a qualifying surviving spouse; \$225,000 if head of household). 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 7,358. Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions) 11 11 12 Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't claim the personal use 12 7,358. 13 Personal use part of credit. Enter the smaller of line 9 or line 12 here and on Schedule 3 (Form 13 7,358. Part IV **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 (\$150,000 if married filing jointly or a qualifying surviving spouse; \$112,500 if head of household). Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936) 14 14 15 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18 . . . 15 16 Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions) 16 Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't claim the Part IV credit 17 17 Enter the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040), line 6m. If line 17 is 18 18 **Credit for Qualified Commercial Clean Vehicles** Part V Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936) 19 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 Schedule 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.

JAS'	WANTH PATTIPATI	387-	63-6226			
Part	Vehicle Details					
1a	Year		2023			
b	Make	TESLA				
С	Model	MODE	L Y			
2	Vehicle identification number (VIN) (see instructions) 5 Y J 3 E 1 E A 4	l P 1	F 6 1 6 3 4 8			
3	Enter date vehicle was placed in service (MM/DD/YYYY)	07/3	31/2023			
4	Was the vehicle used primarily outside the United States? Answer "No" if it was but an excepti ☐ Yes. Stop here. You can't claim a credit amount for a vehicle used primarily outside the Ur ☒ No.					
5	Does the VIN entered on line 2 belong to a new clean vehicle placed in service during the tax definitions. Yes. Go to Part II. No. Go to line 6.	year? S	ee instructions for			
6	Does the VIN entered on line 2 belong to a previously owned clean vehicle acquired after 202 the tax year? See instructions for definitions. Yes. Go to Part IV. No. Go to line 7.	22 and _I	placed in service during			
7 Part	Does the VIN entered on line 2 belong to a qualified commercial clean vehicle acquired after 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 desc. Credit Amount for Business/Investment Use Part of New Clean Vehicle		·			
8	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you 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.					
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	0.			
Part	Credit Amount for Personal Use Part of New Clean Vehicle					
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.			
	·					

Schedu	le A (Form 8936) 2023		Page 2
Part			
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 fron	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	oquir	od for roado
	The stop here. Tou can't claim a credit amount for a vehicle you didn't acquire for use or a	cquire	eu foi resale.
С	Can you be claimed as a dependent on another person's tax return, such as your parent's retu	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.		
		ı	
4.4	Enter the sales price of the vehicle	14	
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.
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	V Credit Amount for Qualified Commercial Clean Vehicle	•	
18a	Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exceentities discussed in the instructions applies. Yes. No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception		
b	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you 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.		-
С	ls the vehicle also powered by gas or diesel? See instructions. ☐ Yes. ☐ No.	1	
19	Enter the cost or other basis of the vehicle. See instructions	19	
20	Section 179 expense deduction (see instructions)	20	
21	Subtract line 20 from line 19	21	
00	M III II 04 450(/0.45) [000(/0.00) [0] 1 1 40 1 (%) 17		
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	
24	Enter the smaller of line 22 or 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		

26