Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

	-				
Submission Ide	entification Number (SID)				
Taxpayer's name	<u>'</u>	Social secu	rity numl	ber	
MOHAN SIV.	A KRISHNA KONAKANCHI	736-06	5 - 979	2	
Spouse's name		Spouse's so			er
Double To	Debuggi Information Tou Very Fielding December 04	o /F		Ala a simila a	
		3 (Enter year you	are au	tnorizing	.)
	ollars only on lines 1 through 5. 40-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	d gross income		1 1	268	3,127.
-	X		2		1,086.
	income tax withheld from Form(s) W-2 and Form(s) 1099		3	I	2,286.
	t you want refunded to you		4		2,2001
5 Amount	t you owe		5	1	L,800.
Part II Ta	axpayer Declaration and Signature Authorization (Be sure you g	et and keep a co	py of y	our retu	ırn)
return (original or to send my return for any delay in p Agent to initiate a payment of my fe authorization is t payment, I must business days pr taxes to receive personal identific	and belief, it is true, correct, and complete. I further declare that the amounts in P r amended) I am now authorizing. I consent to allow my intermediate service provide to to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reas processing the return or refund, and (c) the date of any refund. If applicable, I author an ACH electronic funds withdrawal (direct debit) entry to the financial institution acederal taxes owed on this return and/or a payment of estimated tax, and the financia to remain in full force and effect until I notify the U.S. Treasury Financial Agent to to contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancell rior to the payment (settlement) date. I also authorize the financial institutions involved confidential information necessary to answer inquiries and resolve issues related to the total process. Withdrawal Consent.	er, transmitter, or elect on for rejection of the rize the U.S. Treasury count indicated in the al institution to debit terminate the authori ation requests must be add in the processing of the the transmitter. I further	ronic re transminand its and its tax prepose entry zation. The per receipt the elerther according	turn origina ssion, (b) to designated paration so to this acco To revoke ived no lata lectronic po cknowledge	ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the
	N: check one box only				
	•	jenerate my PIN	5 9 '	7 9 2	as my
_	ERO firm name ture on the income tax return (original or amended) I am now authorizing.	T E		digits, but er all zeros	ao my
☐ I will e	enter my PIN as my signature on the income tax return (original or amended are entering your own PIN and your return is filed using the Practitioner F				
Your signature	>	Date ▶			
Spausa's DIN:	check one box only				
l autho		jenerate my PIN			ac my
	ERO firm name		nter five	digits, but	as my
signat	ture on the income tax return (original or amended) I am now authorizing.	d	on't ente	er all zeros	
	enter my PIN as my signature on the income tax return (original or amender are entering your own PIN and your return is filed using the Practitioner For.				
Spouse's signa	ature ►	Date ►			
	Practitioner PIN Method Returns Only—continue	e below			
Part III Co	ertification and Authentication — Practitioner PIN Method Only				
ERO's EFIN/P	IN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2 4 9	6 0	- -	7 1
		Don tel	uli 20	00	
authorized to file	above numeric entry is my PIN, which is my signature for the electronic individual e for tax year indicated above for the taxpayer(s) indicated above. I confirm that I the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Prov	am submitting this re	turn in a	accordance	
ERO's signatur	re ▶ 「	Date ►			
	ERO Must Retain This Form — See Instruc				
	Don't Submit This Form to the IRS Unless Request				

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	0074	IRS Use Only	–Do not v	vrite or staple in	this space.
For the year Ja	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, endi	ing			, 20	See se	parate instru	uctions.
Your first name	e and m	iddle initial	Last na	ame						Your so	ocial security	number
MOHAN S	IVA :	KRISHNA	KONA	AKANCH	ΗI					736	06 97	92
If joint return, s	spouse's	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	instruct	ions.				Α	pt. no.	Preside	ntial Election	ո Campaigr
1669 ST	OWER	S TRAIL								1	here if you, c	,
City, town, or	oost offi	ice. If you have a foreign address, also co	mplete s	spaces be	elow.	Sta	ite	ZIP co	ode		if filing jointl	
HASLET						TΧ	ζ	760	52		this fund. C low will not c	•
Foreign countr	y name			Foreign p	rovince/state/c	count	ty	Foreig	n postal code	1	x or refund.	3.
											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	surviv	ing spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name o	of your s	pouse. If you	che	ecked the HOH	or Q	SS box, ente	er the ch	ild's name if	f the
	qu	ıalifying person is a child but not you	ır depei	ndent:								
Digital	Δt a	ny time during 2023, did you: (a) rec	eive (as	a rewar	d award or r	าลงก	ment for propert	v or	services): or	(h) sell		
Assets		nange, or otherwise dispose of a dig				-		-		. ,	Yes	⊠ No
Standard		neone can claim: You as a de					a dependent	(- (-		,		
Deduction	_	Spouse itemizes on a separate retur	•		•		•					
		: Were born before January 2, 1	959	Are b	lind Spo	use	: U Was born		re January 2	-	☐ Is blin	
Dependent				(2)	Social security		(3) Relationship	(4			ifies for (see in	
If more	(1) F	First name Last name			number		to you		Child tax c	reait	Credit for othe	r dependents
than four dependents,								_			L	<u></u>
see instruction	ıs							_			L	<u></u>
and check	, —										L	<u></u>
here L		T	4.1	 	\							0 170
Income	1a	Total amount from Form(s) W-2, b	•		•							9,173.
Attach Form(s)		Household employee wages not re	•		. ,							
W-2 here. Also attach Forms	C	Tip income not reported on line 1a	•		,					. 10		
W-2G and	d	Medicaid waiver payments not rep			,	istru	ictions)			. 10		
1099-R if tax was withheld.	e	Taxable dependent care benefits f			-	•				. 16		
If you did not	ا ~	Employer-provided adoption bene			·			• •		. 11		
get a Form	g					•		• •		. 10		0.
W-2, see	h i	Other earned income (see instruct Nontaxable combat pay election (s	,			•		. ·		. 1h	•	· ·
instructions.	ı Z	Add lines 1a through 1h	000 IIISL	. actioi (8)	,	•		1		. 12	26	9,173.
Attach Sch. B	<u>_</u> 2a		2a			· h T	axable interest			. 12		-,-,-,
if required.	2a 3a	· –	3a				axable interest Ordinary divident	ds				
	4a		4a				axable amount				_	1,472.
Standard	5a	_	5a				axable amount				1	0,142.
Deduction for— Single or	6a	_	6a				axable amount			. 6k		· ·
Married filing	C	If you elect to use the lump-sum e		method.								
separately, \$13,850	7	Capital gain or (loss). Attach Sche			,		,			7		
 Married filing jointly or 	8	Additional income from Schedule								_ <u> </u>	_	2,660.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9	_	8,127.
surviving spouse, \$27,700	10	Adjustments to income from Sche		•						. 10		· · · ·
 Head of household, 	11	Subtract line 10 from line 9. This is								. 11		8,127.
\$20,800	12	Standard deduction or itemized	-							. 12		4,091.
 If you checked any box under 	13	Qualified business income deduct		`		,	95-A			. 13		<u>, , , = = •</u>
Standard Deduction,	14									. 14		4,091.
see instructions.	15	Subtract line 1/1 from line 11. If zer				31 IF 1	tavabla income			15		

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	53,807.
Credits	17	Amount from Schedule 2, lir						17	
	18	Add lines 16 and 17						18	53,807.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	I. If zero or less,	enter -0				22	53,807.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	279.
	24	Add lines 22 and 23. This is	your total tax					24	54,086.
Payments	25	Federal income tax withheld							
•	а	Form(s) W-2				25a 50	,139.		
	b	Form(s) 1099				25b 2	2,029.		
	С	Other forms (see instruction	s)			25c	118.		
	d	Add lines 25a through 25c						25d	52,286.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20)22 return			26	
qualifying child,	27	Earned income credit (EIC)			No	27			
attach Sch. EIC.	28	Additional child tax credit from			_	28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir	ne 15			31			
	32	Add lines 27, 28, 29, and 31				ndable credits		32	
	33	Add lines 25d, 26, and 32. T						33	52,286.
Refund	34	If line 33 is more than line 24	•					34	·
riciana	35a	Amount of line 34 you want				•	🗀	35a	
Direct deposit?	b	Routing number X X X				_	Savings		
See instructions.	d	Account number X X X					J.		
	36	Amount of line 34 you want				36			
Amount	37	Subtract line 33 from line 24							
You Owe	٠.	For details on how to pay, g						37	1,800.
	38	Estimated tax penalty (see in	nstructions) .			38			·
Third Party	Do	you want to allow another				See			
Designee	ins	structions				. Yes. C	omplete	below.	⋈ No
		signee's		Phone			onal ident	ification	
		me	h = 4	no.			ber (PIN)		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com							
Here		ur signature		Date	Your occupation				nt vou an Identity
	10	ur signature		Date	Tour occupation		I .		PIN, enter it here
Joint return?					SOFTWARE E	NGINEER	(see	inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupation	on			nt your spouse an
your records.							I .	itity Prot inst.)	ection PIN, enter it here
		one no (200) 200 E11	1	Email address	MOTIVICATIVE	UND 1 CO CMD TT C			
		one no. (269) 290-511 eparer's name	Preparer's signat		MOHANSIVAKRIS	Date	PTIN		Check if:
Paid		•	'		רווסחו תחוד זיי	03/03/2024	P0208	2702	Self-employed
Preparer		M PRIYA RAM SAGAR GUPTA TALLAM m's name GLOBAL TA	1	NAU SAGAK	GOLIA TATTAM	03/03/2024			
Use Only			XES LLC Y CT E BRU	INCMTOR M	T 08816				(678) 965-9522
	ΓII	m 3 addiess ZHU ROUNE	T CI E DRU	TANATON IN	0 00010		Fill	i's EIN	84-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

MOHAN SIVA KRISHNA KONAKANCHI

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

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

Your social security number 736-06-9792

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	ach Schedule E .	5	-12,660.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
s	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente	r here and on Form	10	-12,660

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				
	discrimination claims (see instructions)	24h		-	
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect				
	tax law violations	24i		-	
J	Housing deduction from Form 2555	24j		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k			
Z	Other adjustments. List type and amount:				
0E	Total ather adjustments Add lines 04s through 04s	24z			
25 06	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	nere and on	06	
				26	I- 4 (F 4040) 2222
	BAA	REV 02/	23/24 PRO	ocnedu	le 1 (Form 1040) 2023

SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Taxes

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. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR MOHAN SIVA KRISHNA KONAKANCHI

Your social security number 736-06-9792

			-
Pa	tl Tax		
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17.	3	
Par	t Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137		
6	Uncollected social security and Medicare tax on wages. Attach Form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.		
	If not required, check here	8	161.
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	118.
12	Net investment income tax. Attach Form 8960	12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	
	(cc	ontinu	ıed on page 2)

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

Schedule 2 (Form 1040) 2023

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

Part II Other Taxes (continued)

7	Other additional taxes:				
а	Recapture of other credits. List type, form number, and amount:				
		17a			
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b			
С	Additional tax on HSA distributions. Attach Form 8889	17c			
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d			
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e			
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f			
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g	_		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h			
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i	-		
j	Section 72(m)(5) excess benefits tax	17j			
k	Golden parachute payments	17k			
I	Tax on accumulation distribution of trusts	171			
m	Excise tax on insider stock compensation from an expatriated corporation	17m			
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n			
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17o			
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p			
q	Any interest from Form 8621, line 24	17q			
Z	Any other taxes. List type and amount:				
		17z			
8	Total additional taxes. Add lines 17a through 17z		18		
9	Reserved for future use		19		
20	Section 965 net tax liability installment from Form 965-A	20			
21	Add lines 4, 7 through 16, and 18. These are your total other taxe on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b.	es. Enter here and	24		070
	OH FORM 1040 OF 1040-OH, IIII0 23, OF FORM 1040-NA, IIII0 230		21	<u> </u>	279.

SCHEDULE A (Form 1040)

Itemized Deductions

Attach to Form 1040 or 1040-SR.

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

OMB No. 1545-0074

2023

Attachment
Sequence No. 07

Department of the Treasury Internal Revenue Service

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Name(s) shown on	Form	1040 or 1040-SR			You	r so	cial security number
MOHAN SIV	A K	RISHNA KONAKANCHI			73	6-0	06-9792
Medical		Caution: Do not include expenses reimbursed or paid by others.					
and	1	Medical and dental expenses (see instructions)	1		- 1		
Dental		Enter amount from Form 1040 or 1040-SR, line 11 2	-		\exists		
Expenses		Multiply line 2 by 7.5% (0.075)	3		- 1		
		Subtract line 3 from line 1. If line 3 is more than line 1, enter -0			\exists	4	
Taxes You	5	State and local taxes.					
Paid		State and local income taxes or general sales taxes. You may include					
		either income taxes or general sales taxes on line 5a, but not both. If			- 1		
		you elect to include general sales taxes instead of income taxes,			- 1		
		check this box	5a	1,58			
	ŀ	State and local real estate taxes (see instructions)	5b	7,760			
		State and local personal property taxes	5c	7,700			
		I Add lines 5a through 5c	5d	9,348	$\overline{}$		
		Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing	ou	9,340	-		
	•	separately)	5е	9,348	,		
	6	Other taxes. List type and amount:		<i>J,</i> 540			
			6				
	7	Add lines 5e and 6				7	9,348.
Interest	8	Home mortgage interest and points. If you didn't use all of your home					
You Paid		mortgage loan(s) to buy, build, or improve your home, see			- 1		
Caution: Your		instructions and check this box			- 1		
mortgage interest deduction may be	a	Home mortgage interest and points reported to you on Form 1098.			- 1		
limited. See		See instructions if limited	8a	24,743	3.		
instructions.	ŀ	Home mortgage interest not reported to you on Form 1098. See		,			
		instructions if limited. If paid to the person from whom you bought the			- 1		
		home, see instructions and show that person's name, identifying no.,					
		and address	8b				
	C	Points not reported to you on Form 1098. See instructions for special					
		rules	8c		_		
		Reserved for future use	8d				
		Add lines 8a through 8c	8e	24,743	3.		
		Investment interest. Attach Form 4952 if required. See instructions	9		_		
		Add lines 8e and 9				10	24,743.
Gifts to	11	Gifts by cash or check. If you made any gift of \$250 or more, see					
Charity		instructions	11		_		
Caution: If you made a gift and	12	Other than by cash or check. If you made any gift of \$250 or more,			- 1		
got a benefit for it,		see instructions. You must attach Form 8283 if over \$500	12		_		
see instructions.		Carryover from prior year	13		_		
		Add lines 11 through 13				14	
Casualty and	15	Casualty and theft loss(es) from a federally declared disaster (other		•			
Theft Losses		disaster losses). Attach Form 4684 and enter the amount from line 1					
	40	instructions	•			15	
Other	16	Other—from list in instructions. List type and amount:					
Itemized Deductions						10	
						16	
Total	17	Add the amounts in the far right column for lines 4 through 16. Also, e				47	24 001
Itemized Deductions	10	Form 1040 or 1040-SR, line 12			- 1	17	34,091.
Deductions	18	If you elect to itemize deductions even though they are less than your check this box	stan	uard deduction	ı, 		

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

MOH	AN SIVA KRISHNA KONAKANCHI						736-0	6-9792		
Pa	t I Income or Loss From Rental Real Estate an	nd Roy	alties							
	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	c . See	instru	ctions. If you are	e an indi	vidual, rep	ort farm	
Α	Did you make any payments in 2023 that would require you	to file I	Form(s)	1099? S	See ins	structions		. \(\) Y	es X N	0
В	If "Yes," did you or will you file required Form(s) 1099? .									
1a										
Α	GUNTUR, ANDHRA PRADESH GUNTUR ANDHRA PR	D V D F C	u tn [522111	<u> </u>					
В	GONTOR, ANDREA FRADESII GONTOR ANDREA FE	KADES	11 11N C	722411	<u> </u>					
C										
	Time of Diseasety 0 Familiary to the control of		1			in Dental	D	-111		
1b	Type of Property (from list below) 2 For each rental real estate properties above, report the number of fair	erty IISte rental a	ea and		Fa	nir Rental Days	Persor Da		QJV	1
Α	personal use days. Check the Qu			Α		365		0		
	if you meet the requirements to the	file as a	a	В		363			\vdash	
C	qualified joint venture. See instru	uctions.		С					\vdash	
_	of Property:									
	Single Family Residence 3 Vacation/Short-Term Ren	ntol .	5 Lanc	1	7	Self-Rental				
	Multi-Family Residence 4 Commercial	ııaı	6 Roya				20)			
	Wulli-Falfilly Residence 4 Commercial		o noya	aities	0	Other (descri	Je)			
						Propertie	s:			
Inco	me:			Α		В			С	
3	Rents received	3		6	10.					
4	Royalties received	4								
Ехре	enses:									
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		2,9	70.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,7	70.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14		3,4						
15	Supplies	15		2,6	60.					
16	Taxes	16								
17	Utilities	17		2,4	60.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		13,2	70.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If									
	result is a (loss), see instructions to find out if you must file Form 6198			- 12 , 6	60					
		21		<u>-12,6</u>	60.					
22	Deductible rental real estate loss after limitation, if any,	00	(10 ((. 0 ,	,	\	,		١
00-	on Form 8582 (see instructions)	22 (12,66		(610.	(
23a					23a		610.			
b	, , , , , , , , , , , , , , , , , , , ,				23b					
C					23c					
d					23d 23e	1 2	270.			
e 24	Total of all amounts reported on line 20 for all properties Income. Add positive amounts shown on line 21. Do not		 le any le		236	13,	24			
24 25	Losses. Add royalty losses from line 21 and rental real estat		•		· ·	tal losses here	25	(12 660	
	• •							(12,660	•)
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 at						26		-12,66	0 -

Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

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

OMB No. 1545-0074 Attachment

	Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/Form5329 for instructions and the latest information.						Attachment Sequence No. 29		
		o additio	onal tax. If married filing jointly, see instructions.				cial securi		
	· ·		KONAKANCHI				06-979	-	
			Home address (number and street), or P.O. box	r if mail is not delivered to y	our home		Apt. i		
				•			'		
	Your Address	-	City, town or post office, state, and ZIP code. I	f you have a foreign addres	s, also complete the spaces				
	a Are Filing This by Itself and N		below. See instructions.			If this is	s an amen	ded	
	Your Tax Retur						check he		
			Foreign country name	Foreign province/state/	county	Foreign	postal cod	е	
If you	only owe the a	additio	nal 10% tax on the full amount of the	e early distributions,	you may be able to r	eport th	his tax d	irectl	y on
Sche	dule 2 (Form 104	l0), line	e 8, without filing Form 5329. See instr	uctions.					
Par	Addition	nal Ta	x on Early Distributions. Comple	te this part if you too	k a taxable distribution	on (othe	er than a	qual	lified
			ution) before you reached age 591/2						
			ntract (unless you are reporting this t						
			ete this part to indicate that you qualif	y for an exception to	the additional tax on	early c	distributio	ns o	r for
			A distributions. See instructions.						
1			cludible in income (see instructions). For			1	1:	1,61	<u>4.</u>
2	•		cluded on line 1 that are not subject to	•	•				
_			e exception number from the instructio			2		0,00	
3	•		dditional tax. Subtract line 2 from line 1			3		1,61	
4			r 10% (0.10) of line 3. Include this amo	· ·		4		16	51.
			of the amount on line 3 was a distribu		RA, you may have to				
Part			amount on line 4 instead of 10%. See in x on Certain Distributions From		to and ADI E Asso	unto (Complete	+bio	
rail			an amount in income, on Schedule 1						
			fied tuition program (QTP), or on Sched					acci	ount
5			d in income from a Coverdell ESA, a Q			5			
6			d on line 5 that are not subject to the a			6			
7			dditional tax. Subtract line 6 from line 5			7			
8	•		r 10% (0.10) of line 7. Include this amo			8			
Part			x on Excess Contributions to Tra		•	contrib	uted moi	e to	vour
			for 2023 than is allowable or you had						,
9	Enter your exce	ess con	ntributions from line 16 of your 2022 For	n 5329. See instruction	ns. If zero, go to line 15	9			
10	If your tradition	nal IR	RA contributions for 2023 are less that	nan your maximum					
	allowable cont	ributio	n, see instructions. Otherwise, enter -0)	10				
11	2023 traditiona	al IRA c	distributions included in income (see in	structions)	11				
12	2023 distributi	ons of	prior year excess contributions (see in	structions)	12				
13			l 12			13			
14	•		ntributions. Subtract line 13 from line 9			14			
15			for 2023 (see instructions)			15			
16			utions. Add lines 14 and 15			16			
17			6% (0.06) of the smaller of line 16 or th						
Dowl			23 contributions made in 2024). Include the			17			
Part			x on Excess Contributions to Ro	•		buted r	more to y	our l	Roth
40			nan is allowable or you had an amount			10			
18	-		ntributions from line 24 of your 2022 For		115. 11 2610, 90 to 11116 23 	18			
19			tributions for 2023 are less than your ructions. Otherwise, enter -0		19				
20			om your Roth IRAs (see instructions)		20				
21	Add lines 19 a					21			
22			ntributions. Subtract line 21 from line 1			22			
23	-		for 2023 (see instructions)			23			
24			utions. Add lines 22 and 23			24			
25			6% (0.06) of the smaller of line 24 or t						

2023 (including 2023 contributions made in 2024). Include this amount on Schedule 2 (Form 1040), line 8

25

Form 5329 (2023) Page **2**

Part \				tributions to Coverdell ESAs. Contain is allowable or you had an amount		•		,
26				of your 2022 Form 5329. See instruction:				
27				SAs for 2023 were less than the				
			-	uctions. Otherwise, enter -0	27			
28	2023	distributions	from your Coverdell ESA	As (see instructions)	28			
29	Add I	ines 27 and 2	28				29	
30	Prior	year excess	contributions. Subtract li	ne 29 from line 26. If zero or less, ente	r -0		30	
31	Exces	ss contribution	ons for 2023 (see instruct	ions)			31	
32	Total	excess cont	ributions. Add lines 30 ar	nd 31			32	
33				er of line 32 or the value of your Coverde				
	_	<u> </u>		in 2024). Include this amount on Schedu	•	,		
Part \				ibutions to Archer MSAs. Comple	•			• •
		-		nan is allowable or you had an amount				n 5329. ⊤
34				of your 2022 Form 5329. See instruction	ıs. If zero, g	o to line 39	34	
35				or 2023 are less than the maximum				
00				herwise, enter -0	35		-	
36				from Form 8853, line 8	36			
37		ines 35 and 3					37	
38		-		ne 37 from line 34. If zero or less, ente			38	
39 40			•	ions)				
40				nd 39			40	
41				smaller of line 40 or the value of your butions made in 2024). Include this a				
	(Form	1040), line 8	8				41	
Part V				tributions to Health Savings Ac			omplete	e this part if you
			n your behalf, or your en ne 49 of your 2022 Form	nployer contributed more to your HS 5329.	As for 202	23 than is	allowat	ole or you had ar
42				of your 2022 Form 5329. If zero, go to	o line 47		42	
43				2023 are less than the maximum				
				herwise, enter -0	43			
44				rm 8889, line 16	44			
45		ines 43 and	_				45	
46	Prior	year excess		ne 45 from line 42. If zero or less, ente			46	
47	Exces	ss contribution	ons for 2023 (see instruct	ions)			47	
48	Total	excess cont	ributions. Add lines 46 ar	nd 47			48	
49	Addit	ional tax. Er	nter 6% (0.06) of the sm a	aller of line 48 or the value of your HS	SAs on Dec	cember 31	,	
				2024). Include this amount on Schedule			49	
Part V	Π .	Additional	Tax on Excess Contr	ibutions to an ABLE Account. Co	omplete th	is part if co	ontribut	ions to your ABLE
			2023 were more than is a					
50			ons for 2023 (see instruct	•			50	
51				maller of line 50 or the value of yo				
				n Schedule 2 (Form 1040), line 8			51	
Part I				nulation in Qualified Retirement	•	_	RAs).	Complete this part
		-		quired distribution from your qualified		•		I
52 50		•	,	e instructions)			52	
53		•	-	(see instructions)			53	
54			om line 52. If zero or less				54	
55				o calculate the additional tax. If you que	•	ie 10% tax		
				ne qualified retirement plan, check this 040), line 8 or Form 1041, Schedule G			55	
								st of my knowledge and
		nly if You nis Form	belief, it is true, correct, and com	clare that I have examined this form, including accorplete. Declaration of preparer (other than taxpayer) is	s based on all i	nformation of v	which prep	parer has any knowledge.
by Itse	lf and	Not With						
Your T	ax Re	eturn	Your signature			Date		
Paid		Print/Type prep	parer's name	Preparer's signature	Date	Chec	k 🔲 if	PTIN
Prepa	arer					self-e	mployed	
Use (Firm's name				Firm's EIN		
	,	Firm's address	1			Phone no.		

Form **8959**

Department of the Treasury Internal Revenue Service

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions. Attach to Form 1040, 1040-SR, 1040-NR, or 1040-SS.

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. 71

Name(s) shown on return

MOHAN SIVA KRISHNA KONAKANCHI

736-06-9792

Down	Additional Madisons Towns Madisons Wasses	, , , , , ,	
Part			
1	Medicare wages and tips from Form W-2, box 5. If you have more than one		
_	Form W-2, enter the total of the amounts from box 5	-	
2	Unreported tips from Form 4137, line 6		
3	Wages from Form 8919, line 6		
4	Add lines 1 through 3		
5	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately		
	Single, Head of household, or Qualifying surviving spouse \$200,000 5 200,000.		
6	Subtract line 5 from line 4. If zero or less, enter -0	6	13,062.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to		
	Part II	7	118.
Part	Additional Medicare Tax on Self-Employment Income		
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you		
	had a loss, enter -0		
9	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately		
	Single, Head of household, or Qualifying surviving spouse \$200,000 9		
10	Enter the amount from line 4		
11	Subtract line 10 from line 9. If zero or less, enter -0	-	
12	Subtract line 11 from line 8. If zero or less, enter -0	12	
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and		
10	go to Part III	13	
Part	Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation		
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14		
14	(see instructions)		
15	Enter the following amount for your filing status:	-	
13	Married filing jointly		
	Married filing separately		
40	· · · · · · · · · · · · · · · · · · ·	10	
16	Subtract line 15 from line 14. If zero or less, enter -0	16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009).	4-	
Dout	Enter here and go to Part IV	17	
Part			
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-SS		
Dowl	filers, see instructions), and go to Part V	18	118.
Part			
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form		
	W-2, enter the total of the amounts from box 6		
20	Enter the amount from line 1		
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax		
	withholding on Medicare wages		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Additional Medicare Tax		
	withholding on Medicare wages	22	118.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box		
	14 (see instructions)	23	
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with		
	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-SS filers,		
	see instructions)	24	118.

Form **8960**

Net Investment Income Tax— Individuals, Estates, and Trusts

Department of the Treasury Internal Revenue Service Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.

2023 Attachment Sequence No. 72

OMB No. 1545-2227

Name(s)	Name(s) shown on your tax return			our social security number or EIN 36-06-9792	
MOHA					
Part	Investment Income ☐ Section 6013(g) election (see instructions)		•		
	☐ Section 6013(h) election (see instructions)				
	☐ Regulations section 1.1411-10(g) election (see ins	tructions)			
1	Taxable interest (see instructions)			1	
2	Ordinary dividends (see instructions)			2	
3	Annuities (see instructions)			3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or				
		4a −12	,660.		
b	Adjustment for net income or loss derived in the ordinary course of a non-				
	section 1411 trade or business (see instructions)	4b			
С	Combine lines 4a and 4b			4c	-12,660.
5a	Net gain or loss from disposition of property (see instructions)	5a			
b	Net gain or loss from disposition of property that is not subject to net				
		5b			
С	Adjustment from disposition of partnership interest or S corporation stock (see				
		5c			
d	Combine lines 5a through 5c			5d	
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)			6	
7	Other modifications to investment income (see instructions)			7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			8	-12,660.
Part	Investment Expenses Allocable to Investment Income and Modific	ations			
9a	Investment interest expenses (see instructions)	9a			
b	State, local, and foreign income tax (see instructions)	9b			
С	Miscellaneous investment expenses (see instructions)	9с			
d	Add lines 9a, 9b, and 9c			9d	
10	Additional modifications (see instructions)			10	
11	Total deductions and modifications. Add lines 9d and 10			11	
Part	Tax Computation				
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, co				
	Estates and trusts, complete lines 18a–21. If zero or less, enter -0			12	0.
	Individuals:	1			
13	, ,		<u>,127.</u>		
14	,		,000.		
15			, 127.		
16	Enter the smaller of line 12 or line 15			16	0.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter				
	on your tax return (see instructions)			17	0.
	Estates and Trusts:	1			
18a	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	18a			
b	Deductions for distributions of net investment income and charitable				
	` ' '	18b			
С	Undistributed net investment income. Subtract line 18b from line 18a (see	_			
	· · · · · · · · · · · · · · · · · · ·	18c			
	, ,	19a			
b	,	9b			
C	· · · · · · · · · · · · · · · · · · ·	19c			
20	Enter the smaller of line 18c or line 19c			20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.03	88). Enter her	e and		
	include on your tax return (see instructions)			21	

BAA