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

Social security number Spanse's mane Social security number Spanse's security number Spanse'	Submission Identification Number (SID)				
Spouse's name	Taxpayer's name		Social security	number	
Part II Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.) Enter whole Collars only on lines 1 through 5. Note: Form 1040-SS filter use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1	KALYAN CHAKRAVARTHY PATCHAVA		517-59-	1647	
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS filters use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income 2 1, 0.93. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 11, 201. 4 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 10 Amount you want you want you want the law 10 Amount you want you you want you	Spouse's name		Spouse's socia	al security numbe	r
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS files use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1			983-90-	3885	
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 1, 0.09. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 11, 2.01. 4 Amount you want refunded to you 4 10, 119. 5 Amount you want refunded to you 9 Amount you want refunded to you 9 Amount you want refunded to you 9 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) 1 Under penalties of perluy, 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 hutter 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 originator (ERO) to send my return to the IRS and to receive from the IRS (a) an actionwoldegement of receipt or reason for rejection of the respect to the send of the send o	Part I Tax Return Information — Tax Year Ending Decen	nber 31, 2023 (Enter	year you ar	e authorizing	.)
Adjusted gross income Adjusted gross income tax withheld from Form(s) W-2 and Form(s) 1099 Amount you want refunded to you Amount to the amount in you want y	·				
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S Part II					
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, 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, consent to allow my informediate service provider, transmitter, or electronic return original or ERO (income tax) in the provider of the p				- + + -	<u>,192.</u>
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Taxpayer's PIN: check one box only I authorize GLOBAL TAXES LLC ER0 firm name ER0 firm name ER0 firm name 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 D4/09/2024	for any delay in processing the return or refund, and (c) the date of any refund. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the fi payment of my federal taxes owed on this return and/or a payment of estimated authorization is to remain in full force and effect until I notify the U.S. Treasur payment, I must contact the U.S. Treasury Financial Agent at 1–888-353-450 business days prior to the payment (settlement) date. I also authorize the finance taxes to receive confidential information necessary to answer inquiries and repersonal identification number (PIN) below is my signature for the income tax re	If applicable, I authorize the Unancial institution account indictax, and the financial institution in Financial Agent to terminate Payment cancellation required in the institutions involved in the pesolve issues related to the p	S. Treasury and cated in the tax on to debit the extension to the authorization and the processing of ayment. I furth	d its designated c preparation so entry to this accordion. To revoke received no lat the electronic paper acknowledge	Financial ftware for ount. This (cancel) a er than 2 ayment of a that the
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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 ▶			04/09/2024		
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	Practitioner PIN Method Return	s Only—continue below			
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	authorized to file for tax year indicated above for the taxpayer(s) indicated above	ove. I confirm that I am subm	itting this retur	n in accordance	
	ERO's signature ▶	Date ▶			
Don't Submit This Form to the IRS Unless Requested To Do So	ERO Must Retain This Form)o Sc		

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 Ta x		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	–Do not w	rite or sta	aple in thi	is space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, enc	ling			, 20		See se	oarate	nstruc	tions.
Your first name	and m	iddle initial	Last na	ame							Your so	cial sec	urity nı	umber
KALYAN (CHAKI	RAVARTHY	PATO	CHAVA							517	59	164	7
		s first name and middle initial	Last na	ame								•		ty number
VINEELA			 PEMI	MASANI	<u>-</u>						983	90	388.	5
	(numbe	er and street). If you have a P.O. box, see	instruct	ions.				A	Npt. no.		Preside			Campaign
7312 BII	RD CI	HERRY LN								İ	Check h			
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode		spouse if filing jointly, want \$3 to go to this fund. Checking a			
AUBREY						TX	ζ	762	27		box bel			
Foreign countr	y name			Foreign p	rovince/state/	count	ty	Foreig	ın postal c	ode	your tax	or refu	nd	_
		1 o							11/1101			Yo	u	Spouse
Filing Status		Single		, ,			☐ Head of h	ouseh	old (HOF	1)				
Check only		Married filing jointly (even if only o	ne had	income)						,	000)			
one box.	L	Married filing separately (MFS)		•	16		☐ Qualifying		• .	,		,		
	-	you checked the MFS box, enter the			pouse. It you	u cne	ecked the HOF	or Q	SS box,	entei	r the chi	id's na	me if tr	те
	qu	alifying person is a child but not you	ır depe	naent:										
Digital		ny time during 2023, did you: (a) rec	•					•				-		_
Assets		nange, or otherwise dispose of a dig						et)? (Se	ee instru	ction	s.)	X Y	es _	_ No
Standard		neone can claim: U You as a de	•		•		a dependent							
Deduction		Spouse itemizes on a separate retur	n or yo	u were a	dual-status	alien	1							
Age/Blindnes	s You:	: Were born before January 2, 1	959 [Are b	lind Sp o	ouse	: Was bo	n befo	ore Janua	ary 2	, 1959		s blind	
Dependent	s (see	instructions):		(2)	Social security	,	(3) Relationsh	_{iip} (4) Check t	he bo	x if quali	fies for (see inst	tructions):
If more	(1) F	irst name Last name		, ,	number to you Child tax credi		edit	Credit fo	r other d	dependents				
than four									[
dependents, see instruction	. —								[
and check	。 													
here									[
Income	1a	Total amount from Form(s) W-2, b	•		,							_	<u>116,</u>	,807.
Attach Form(s)	b	Household employee wages not re	•		, .						1b	_		
W-2 here. Also	С	Tip income not reported on line 1a	•								1c	_		
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	uctions)				1d	_		
1099-R if tax	е	Taxable dependent care benefits f									1e			
was withheld.	f	Employer-provided adoption bene	efits fror	n Form 8	8839, line 29	•					1f	_		
If you did not get a Form	g	Wages from Form 8919, line 6.									1g			
W-2, see	h	Other earned income (see instruct					· · · · ·	i ·			1h			0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)			<u>1</u> i						116	907
A 1 6 : 5	<u>z</u>	Add lines 1a through 1h	 .		· · i	 . ,	and a later				1z		<u> </u>	,807. 879.
Attach Sch. B if required.	2a	·	2a				axable interes				2b	_		0/3.
	3a_	<u> </u>	3a				Ordinary divide				3b 4b	_		
Standard	4a	 	4a				axable amoun					_		
Deduction for—	5a 6a	<u> </u>	5a 6a				axable amoun axable amoun				5b 6b			
 Single or Married filing 	oa C	If you elect to use the lump-sum e		method	check bere					· -	7 50			
separately, \$13,850	7	Capital gain or (loss). Attach Sche					•				7			
 Married filing 	8	Additional income from Schedule								٠ ـ	8	+	<u>-15</u>	,431.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7									9	+		, 255.
surviving spouse, \$27,700	10	Add lines 12, 25, 35, 45, 35, 65, 7, Adjustments to income from Sche		•							10	+	<u> </u>	
 Head of 	11	Subtract line 10 from line 9. This is									11	_	102	,255.
household, \$20,800	12	Standard deduction or itemized									12			,233. ,700.
 If you checked any box under 	13	Qualified business income deduct		,		•	 15-A				13	_		. , , , , ,
Standard Deduction,	14										14	_	27	700.
see instructions	15	Subtract line 14 from line 11. If zer								•	45			555

Form 1040 (2023	3)								Page 2		
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	8,509.		
Credits	17	Amount from Schedule 2, lir						17			
	18	Add lines 16 and 17						18	8,509.		
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19			
	20	Amount from Schedule 3, lir	ne 8					20	7,500.		
	21	Add lines 19 and 20						21	7,500.		
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				22	1,009.		
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 21			23	0.		
	24	Add lines 22 and 23. This is	your total tax					24	1,009.		
Payments	25	Federal income tax withheld	l from:								
-	а	Form(s) W-2				25a 11	,201.				
	b	Form(s) 1099				25b					
	С	Other forms (see instruction	s)			25c					
	d	Add lines 25a through 25c						25d	11,201.		
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)				27					
attach Sch. EIC.	28	Additional child tax credit fro	m Schedule 8812			28					
	29	American opportunity credit	from Form 8863	8, 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	. These are your	total other pa	ayments and refu	ndable credits		32			
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	11,201.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid							10,192.		
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	3 is attached, chec	k here	. 🗆	35a	10,192.		
Direct deposit?	b	Routing number 1 1 1	0 0 0 6	1 4	c Type: 🕱	Checking	Savings				
See instructions.	d	Account number 1 2 6	1 6 0 1	0 7							
	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 For details on how to pay, g						37			
	38	Estimated tax penalty (see in	nstructions) .			38					
Third Party	Do	you want to allow another				See					
Designee			•				omplete	below.	⋉ No		
•		signee's		Phone			onal iden	tification			
	nai			no.			ber (PIN)				
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com									
Here				· · · ·	' <i>' '</i> '				nt you an Identity		
	10	ur signature		Date	Your occupation		I		IN, enter it here		
Joint return?					SOFTWARE		(see	e inst.)			
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupation	on			nt your spouse an		
Keep a copy for your records.					HOME MARKED	I	ntity Prote e inst.)	ection PIN, enter it here			
,	HOME MAKEN .							3 11131.)			
		Phone no. (314) 755-5315 Email address PATCHAVA.KALYAN@GMAIL.COM							Chapte if:		
Paid		eparer's name	Preparer's signat			Date	PTIN	0700	Check if:		
Preparer		M PRIYA RAM SAGAR GUPTA	l .	A RAM SAC	JAR GUPTA	04/10/2024	P0208		Self-employed		
Use Only							Phone no. (678) 965-9522				
	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	N NAATE		Firr	n'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

KALYAN CHAKRAVARTHY PATCHAVA & VINEELA PEMMASANI

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 soci	ial security number
	517-59	- 1647

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-15,431.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
- 1	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (<u>)</u>	
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:			
	Tabel allowing and Add lines On thousands On	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			
	1040. 1040-SR, or 1040-NR, line 8		10	-15,431.

Page 2 Schedule 1 (Form 1040) 2023

Par	II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-				
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	,	24a			
b	Deductible expenses related to income reported on line 8I from the				
		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals	_			
_	, , , , , , , , , , , , , , , , , , ,	24c		_	
d	' '	24d		_	
е	Repayment of supplemental unemployment benefits under the Trade				
		24e		_	
f	Contributions to section 501(c)(18)(D) pension plans	24f		_	
g	, , , , , , , , , , , , , , , , , , , ,	24g		_	
h	Attorney fees and court costs for actions involving certain unlawful	041			
		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			
	Housing deduction from Form 2555	24j		\dashv	
j k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24)		-	
ĸ		24k			
z	Other adjustments. List type and amount:	24K		\dashv	
_	other adjustifients, List type and amount.	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income				
	Form 1040, 1040-SR, or 1040-NR, line 10			26	
	BAA		/07/24 PRO		le 1 (Form 1040) 2023
	DAA	112 00/	0.,_ 1110		, , ,

SCHEDULE 3 (Form 1040)

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

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

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

_					547
Part	Nonrefundable Credits				
1 F	Foreign tax credit. Attach Form 1116 if required			1	
	Credit for child and dependent care expenses from Form 2441 Form 2441	, line 11. 	Attach	2	
3 E	Education credits from Form 8863, line 19			3	
4 F	Retirement savings contributions credit. Attach Form 8880		4		
5 a F	Residential clean energy credit from Form 5695, line 15			5a	
b E	Energy efficient home improvement credit from Form 5695, line 32			5b	
6	Other nonrefundable credits:				
а (General business credit. Attach Form 3800	6a			
b (Credit for prior year minimum tax. Attach Form 8801	6b			
c A	Adoption credit. Attach Form 8839	6c			
d (Credit for the elderly or disabled. Attach Schedule R	6d			
e F	Reserved for future use	6e			
f (Clean vehicle credit. Attach Form 8936	6f	7 , 500.		
g N	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 A	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j			
k (Credit to holders of tax credit bonds. Attach Form 8912	6k			
1 /	Amount on Form 8978, line 14. See instructions	6 l			
m (Credit for previously owned clean vehicles. Attach Form 8936.	6m			
z (Other nonrefundable credits. List type and amount:				
_		6z			
	Total other nonrefundable credits. Add lines 6a through 6z			7	7,500.
	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10	040, 1040	-SR, or	8	7 500
	10-10 NII, III 0 20		(00		7,500. ued on page 2)

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	13z	 	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31)-NR, 	15	

SCHEDULE E (Form 1040)

Department of the Treasury

Internal Revenue Service

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.

Attachment Sequence No. 13

OMB No. 1545-0074

` '	Shown on return							ar security	number
	AN CHAKRAVARTHY PATCHAVA & VINEELA PEMN						517-5	9-1647	
Part									
	Note: If you are in the business of renting personal proper	ty, use	Schedule	C . See	instru	ctions. If you a	re an indiv	vidual, rep	ort farm
Α Γ	rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you	to file	Form(a) 1	0002 6	`oo ino	tructions			o VI No
В 1	f "Yes," did you or will you file required Form(s) 1099? .			• •	• •			. <u> 16</u>	:5 NO
1a	Physical address of each property (street, city, state, ZIF	ode)						
Α	D.NO: 4-50/1, KANAPARRU NADENDLA (MANDAI	L) GU	JNTUR, <i>P</i>	NDHR.	A PR	ADESH IN	522549	9	
В									
С									
1b	Type of Property 2 For each rental real estate prope				Fa	ir Rental	Person	al Use	QJV
	(from list below) above, report the number of fair					Days	Da	ys	Q01
Α	gersonal use days. Check the Quif you meet the requirements to f			Α		365		0	
В	qualified joint venture. See instru			В					
С	, i i		·	С					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land			Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (descr	ibe)		
						Propertie			
Incom	ie:			Α	T	В			С
3	Rents received	3			10.				
4	Royalties received	4		<u> </u>					
Exper		<u> </u>							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		9	58.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,5	40.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		·					
13	Other interest	13							
14	Repairs	14		3,6	85.				
15	Supplies	15		4,8	50.				
16	Taxes	16							
17	Utilities	17		1,6	50.				
18	Depreciation expense or depletion	18		3,4	58.				
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		16,1	41.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If								
	result is a (loss), see instructions to find out if you must								
	file Form 6198	21	-	-15 , 4	31.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(15 , 43	31.))	()
23a	Total of all amounts reported on line 3 for all rental prope				23a		710.		
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b				
С	· · · · · · · · · · · · · · · · · · ·				23c				
d	Total of all amounts reported on line 18 for all properties				23d		,458.		
е	Total of all amounts reported on line 20 for all properties				23e	16	,141.		
24	Income. Add positive amounts shown on line 21. Do not	t includ	de any lo	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lin	e 22. E	nter to	tal losses here	25	(15,431.)
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 ar	mount	in the tot	tal on li	ne 41	on page 2	26		- 15 ⊿31

Form **8936**

Clean Vehicle Credits

OMB No. 1545-2137

517-59-1647

Department of the Treasury Internal Revenue Service

KALYAN CHAKRAVARTHY PATCHAVA & VINEELA PEMMASANI

Attach to your tax return. Go to www.irs.gov/Form8936 for instructions and the latest information. Name(s) shown on return Identifying number

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.			
Part	Modified Adjusted Gross Income Amount			
1a	Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR 1a 102	,255.		
b	Enter any income from Puerto Rico you excluded			
С	Enter any amount from Form 2555, line 45			
d	Enter any amount from Form 2555, line 50			
е	Enter any amount from Form 4563, line 15			
2	Add lines 1a through 1e		2	102,255.
3a		,770.		
b	Enter any income from Puerto Rico you excluded			
С	Enter any amount from Form 2555, line 45			
d	Enter any amount from Form 2555, line 50			
е	Enter any amount from Form 4563, line 15			
4	Add lines 3a through 3e		4	113,770.
5	Enter the smaller of line 2 or line 4		5	102,255.
Part	Credit for Business/Investment Use Part of New Clean Vehicles			•
	Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$150,000 (\$300	,000 if r	narried	filing jointly or a
	qualifying surviving spouse; \$225,000 if head of household).			
6	Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936)		6	0.
7	New clean vehicle credit from partnerships and S corporations (see instructions)		7	
8	Business/investment use part of credit. Add lines 6 and 7. Partnerships and S corporations, sto	p here		
	and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1y	/	8	0.
Part	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 (\$300,0	000 if m	arried 1	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	8,509.
11	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)		11	•
12	Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't claim the person	al use		
	part of the credit		12	8,509.
13	Personal use part of credit. Enter the smaller of line 9 or line 12 here and on Schedule 3	(Form		,
	1040), line 6f. If line 12 is smaller than line 9, see instructions		13	7,500.
Part	V Credit for Previously Owned Clean Vehicles			·
	Note: You can't claim the Part IV credit if Part I, line 5, is more than \$75,000 (\$150,0	00 if ma	arried f	filing jointly or a
	qualifying surviving spouse; \$112,500 if head of household).			
14	Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936)		14	
15	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18		15	
16	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)		16	
17	Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't claim the Part IV	credit	17	
18	Enter the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040), line 6m. If line			
	smaller than line 14, see instructions		18	
Part				
19	Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936)		19	
20	Qualified commercial clean vehicle credit from partnerships and S corporations (see instructions)		20	
21	Add lines 19 and 20. Partnerships and S corporations, stop here and report this amount on Sch	nedule		
	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**

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

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

Name(s)	shown on return	Identifying number					
KAL	YAN CHAKRAVARTHY PATCHAVA & VINEELA PEMMASANI	5	517-5	9-164	7		
Part	Vehicle Details						
1a	Year	_		2023			
b	Make	T	ESLA				
С	Model	_M	ODEL	Y			
2	Vehicle identification number (VIN) (see instructions) . $$ 7 S A Y G D E E	4	P A	0 9	3	9 8	3
3	Enter date vehicle was placed in service (MM/DD/YYYY)	0	3/30	/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.				struc	ctions	·•
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.	yea	ar? See	instruc	tions	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.	22 a	and pla	ced in s	ervic	ce dur	ing
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 described. 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 t resale.						
9	Tentative credit amount (see instructions)	9	9		7	, 500	•
10	Business/investment use percentage (see instructions)	1	0				%
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	1	1			0) <u>. </u>
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	1	2		7	, 500) <u>. </u>

Schedu	le A (Form 8936) 2023		Page 2
Part	Credit Amount for Previously Owned Clean Vehicle		•
13a	Is the sales price of the vehicle more than \$25,000?		
	Yes. Stop here. The vehicle doesn't qualify for the Part IV credit.		
	□ No.		
b	Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehicle	e 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	cquire	ed for resale.
С	Can you be claimed as a dependent on another person's tax return, such as your parent's return	rn?	
·	☐ Yes. Stop here. You can't claim a credit amount if you can be claimed as a dependent.		
	No.		
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions.		
	☐ Yes. ☐ No.		
14	Enter the sales price of the vehicle	14	
45	M. Himb. Hima 14 ho. 2007 (0.20)	4.5	
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.		
c	Is the vehicle also powered by gas or diesel? See instructions. Yes. No.	1 1	
19	Enter the cost or other basis of the vehicle. See instructions	19	
20	Section 179 expense deduction (see instructions)	20	
20	occition 170 expense deduction (see instructions)	20	
21	Subtract line 20 from line 19	21	
22	Multiply line 21 by 15% (0.15) [30% (0.30) if the answer on line 18c above is "No"]	22	
23	Enter the incremental cost of the vehicle. See instructions	23	
04	Enter the amellor of line 22 or line 22	,,	
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