(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

Spouse's norme  SAT. IMASHITH CHADARAM  \$00.000	Submi	ssion Identification Number (SID)		-		
Spouse's scrience   Spou	Taxpaye	er's name	Social securit	y numl	er	
Enter whole dollars only on lines 1 through 5.  Note: Form 1040-SS filter use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1	SAI	HARSHITH CHADARAM	119-95-	-844	7	
Enter whole dollars only on lines 1 through 5.  Note: Form 10:40-SS files use line 4 only, Leave lines 1, 2, 3, and 5 blank.  1	Spouse's	s name	Spouse's soc	ial seci	urity num	ber
Enter whole dollars only on lines 1 through 5.  Note: Form 10:40-SS files use line 4 only, Leave lines 1, 2, 3, and 5 blank.  1	Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	_  er year you a	re au	thorizin	ıg.)
1 1,19,986. 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		- · · · · · · · · · · · · · · · · · · ·				<u> </u>
2 11, 3.73.  3 Federal income tax withhold from Form(s) W-2 and Form(s) 1099 . 3 26, 559.  4 Amount you want refunded to you . 4 15, 186.  5 Amount you want refunded to you . 4 15, 186.  5 Amount you owe . 4 15, 186.  5 Amount you want refunded to you . 4 15, 186.  6 Amount you want refunded to you . 4 15, 186.  6 Amount you want refunded to you . 4 15, 186.  7 Amount you want refunded to you . 4 15, 186.  8 Amount you want refunded to you . 4 15, 186.  8 Amount you want refunded to you . 4 15, 186.  8 Amount you want refunded to you . 4 15, 186.  8 Amount you want refunded to you . 4 15, 186.  9 Amount you want refunded to you refund a copy of the income tax return (original or amended) I am now authorization. To revoke (cancell) a unthorized and part in the lax preparation should be authorized in the lax preparation of the refunded in the lax pre	Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
A Amount you want refunded to you  A 15,186.  Amount you want refunded to you  A 15,186.  Amount you want refunded to you  A 15,186.  Amount you want refunded to you  Bartull  Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)  Loader penalities of perjuny. Ideoter that 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. I consent to allow my intermediate service provider, transmitter, or electronic return original from the income tax return (original or amended). I am now authorizing and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct dobit) entry to the financial institution account indicated in the tax preparation software for or any delay in defeat at uses over do m his return and/or a payment of settimated fund institution in close the entry to this account. This payment of my federal taxes over do m his return and/or a payment of settimated fund institution included in the tax preparation software for taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PiN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.  Taxpayer's PIN: check one box only    I authorize   GLOBAL TAXES LLC   to enter or generate my PIN   Tenter five digits, but don't enter all zeros	1	Adjusted gross income		1	11	L9,986.
Amount you want refunded to you    Amount you want refunded to you   Samuel You owe    Part   Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)   Under penalties of perjuny, 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 whore were and belief, it is true, correct, and complete. I further declare that the amounts for the income tax return (original or amended) I am now authorizing, and to the best of the send in the part of the	2	Total tax		2	1	L1,373.
Amount you owe  Part III Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the IRS (and complete. I further declare that the amounts in Part I above are the amounts from the IRS (and complete. I further declare that the amounts in Part I above are the amounts from the IRS (and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any dealty in processing the return originator (ERD) to send my return to the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any dealty in processing the received and the interplace of the processing the received on the IRS (a) and a state of the payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutions induction to debit the entry to this account. This authorizate that it is not remain in full force and effect until I notify the U.S. Treasury Financial Again to terminate the authorization. To revoke (cancel a payment, I must contact the U.S. Treasury Financial Again to terminate the authorization. To revoke (cancel a payment, I must contact the U.S. Treasury Financial Again to the income tax return force that the personal identification number (PIN) belief to represent properties the full modern terminate the authorization. To revoke (cancel a payment, I must contact the U.S. Treasury Financial Again the Transmission of the Institute of the Institute of the Institute	3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	2	26,559.
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 the your person of the income tax return (original or amended) I am now authorizing. The income tax return (original or amended) I am now authorizing.  Indicate the Income tax return (original or amended) I am now authorizing.  Taxpayer's PIN: check one box only  Spouse's PIN: check one box only  I authorize  ERO firm name  signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must contact the U.S. Teasury Signature on the income tax return (original or amended) I am now authorizing. Certification and Authentication — Practitioner PIN Method Returns Only—Continue below.  Part III Certification and Authentication — Practitioner PIN Method Returns Only—Certification and Authentication — Practitioner PIN Method Only  ERO firm name  signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's PIN: check one box only    authorize   Date   Practitioner PIN Method Returns Only—continue below  Part III   Certification number (PIN below is my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's PIN: check one box only    authorize   Date   Practitioner PIN Method Returns Only—continue below  Part III   Certification and Authentication — Practitioner PIN Method Only  ERO firm name signature on the income tax return (original or amended) I am now authorizing. Check this				4	1	L5,186.
Under penalties of perjun; 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 bellet, 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. Lonsent to allow my intermediate service provider, transmitter, or electronic return originator (EFO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal direct debit; entry to the financial institution account indication as one payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of the payment in the tax preparation software for payment and the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for 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 Practiti				_		
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Taxpayer's PIN: check one box only	to send for any Agent to paymer authoriz paymer busines taxes to persona	If my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the orinitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the force of 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 terminant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resedus prior to the payment (settlement) date. I also authorize the financial institutions involved in the oreceive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) I	ejection of the tr U.S. Treasury andicated in the tation to debit the tion to debit the tite the authorizanguests must be e processing of payment. I furt	ansmised the control of the control	ssion, (b) designate paration s to this ac fo revoke ved no l ectronic sknowled	the reason ed Financial software for count. This e (cancel) a ater than 2 payment of ge that the
I authorize GLOBAL TAXES LLC ERG firm name signature on the income tax return (original or amended) I am now authorizing.  □ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's PIN: check one box only □ I authorize □ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. □ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. □ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. □ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's signature ▶ □ Date ▶ □ Date ▶ □ Date ▶ □ Don't enter all zeros □ Certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual income Tax Returns.  ERO's signature ▶ □ Date ▶ □						¬
ERO firm name signature on the income tax return (original or amended) I am now authorizing.    I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.    Your signature   Date			5	8 4	4   4   7	
isignature on the income tax return (original or amended) I am now authorizing.    I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.    Your signature ▶	X	· ·	ř Ent			ıt ´
From the language of the practitioner PIN method. The ERO must complete Part III below.			doi	1't ente	r all zero	5
Spouse's PIN: check one box only  □ I authorize		if you are entering your own PIN and your return is filed using the Practitioner PIN met				
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I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.    Spouse's signature   Date		· ·	_	er five	digits, bu	
if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's signature ▶ Date ▶  Practitioner PIN Method Returns Only—continue below  Part III Certification and Authentication — Practitioner PIN Method Only  ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2 2 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 ▶		signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zero	S
Practitioner PIN Method Returns Only—continue below  Part III Certification and Authentication — Practitioner PIN Method Only  ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions		if you are entering your own PIN and your return is filed using the Practitioner PIN met				
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ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.  2 2 2 4 9 6 0 8 2 7 1  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature   Date   ERO Must Retain This Form — See Instructions		•	N			
Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions	Part I	Certification and Authentication — Practitioner PIN Method Only				
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authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions			Don't ente	er all ze	eros	
ERO Must Retain This Form — See Instructions	authoriz	zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sub	mitting this retu	rn in a	accordan	ice with the
ERO Must Retain This Form — See Instructions	ERO's	signature ▶ Date ▶				
			Do Co			

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



For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20		See sep	oarate inst	ructions.
Your first name	and m	iddle initial	Last na	ıme				,	Your so	cial securit	ty number
SAI HARS	יידו	H	СНАГ	DARAM					119	95   8	447
		s first name and middle initial	Last na								curity number
										1 1	•
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ons.			Apt. no.		Preside	ntial Election	on Campaign
10828 SI	` 7. 14'	TH ST						- 1	Check here if you, or your		
		ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	te	ZIP code				ntly, want \$3
BELLEVUI			•		W.P	4	98004		to go to this fund. Checking a box below will not change		
Foreign countr				Foreign province/state/o			Foreign postal of			or refund.	
									•	You	Spouse
Filing Status	s X	Single				Head of he	ousehold (HO	—— H)			
_		Married filing jointly (even if only or	ne had i	income)			•	,			
Check only one box.		Married filing separately (MFS)  Qualifying surviving spouse (QSS)									
0.10 2011	If y	you checked the MFS box, enter the	name o	of your spouse. If you	ı che			•	,	ld's name	if the
		ialifying person is a child but not you		adant.							
<u> </u>	^+		-: (								
Digital Assets		ny time during 2023, did you: (a) rece nange, or otherwise dispose of a digi								Yes	⊠ No
Standard		neone can claim: You as a de		_ <u>`</u>			7. (000 1110110	10110110	J.)		
Deduction		Spouse itemizes on a separate return		•		•					
		<u> </u>		_	anon						
Age/Blindnes	s You	: Were born before January 2, 1	959 _	Are blind Spo	use	: U Was bor	n before Janu			Is bli	
Dependent				(2) Social security	,	(3) Relationsh	ib I.,			,	instructions):
If more	(1) F	irst name Last name		number		to you	Child	tax cre	dit	Credit for oth	her dependents
than four											
dependents, see instruction	s										
and check	, —							<u> </u>			
here L	]										
Income	1a	Total amount from Form(s) W-2, bo	•	,					1a		39,306.
Attach Form(s)	b	Household employee wages not re	•	, ,					1b		
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)						1c			
attach Forms W-2G and	d	Medicaid waiver payments not rep		, , , ,	nstru	ıctions)			1d		
1099-R if tax	е	Taxable dependent care benefits f		,					1e		
was withheld.	f	Employer-provided adoption bene							1f		
If you did not get a Form	g	Wages from Form 8919, line 6.							1g		
W-2, see	h	Other earned income (see instructi	,						1h		0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		<u>l 1i</u>				1.	20 206
	Z	<u> </u>							1z		39,306.
Attach Sch. B	2a	'	2a			axable interest			2b		
if required.	<u>3a</u>		3a			ordinary divider			3b		
Standard	4a		4a			axable amoun			4b		
Deduction for—	5a	<del></del>	5a			axable amoun			5b		
Single or Married filing	6a	,	6a			axable amoun	t	٠ ـ	6b	+-	
separately,	С	If you elect to use the lump-sum el		•	`	,					4 000
\$13,850 Married filing	7	Capital gain or (loss). Attach Sched				,		. L	7	+	1,227.
jointly or Qualifying	8	Additional income from Schedule	•						8		20,547.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•					9		19,986.
\$27,700 • Head of	10	Adjustments to income from Sche							10		10005
household, \$20,800	11	Subtract line 10 from line 9. This is	-						11		19,986.
If you checked	12	Standard deduction or itemized		•	,				12		13,850.
any box under Standard	13	Qualified business income deducti		n Form 8995 or Form	899	5-A			13		12 252
Deduction, see instructions.	14	Add lines 12 and 13							14		13,850.
SOU MISH GUILDINS.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our <b>t</b>	taxable incom	ie		15	1 10	06,136.

Form 1040 (2023	3)								Page Z
Tax and	16	Tax (see instructions). Check	if any from Form	ı(s): <b>1</b> 881	4 <b>2</b> 4972	з 🗌		16	18,873.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	18,873.
	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	. If zero or less,	enter -0				22	11,373.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	11,373.
<b>Payments</b>	25	Federal income tax withheld	from:						
	а	Form(s) W-2				<b>25a</b> 26	5,559		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	26,559.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	)22 return			26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27			
allacii Scii. Elc.	28	Additional child tax credit from	m Schedule 8812	2		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	. These are your	total other pa	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	26,559.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amour	nt you <b>overpaid</b>		34	15,186.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	3 is attached, chec	k here	🗆	35a	15,186.
Direct deposit?	b	Routing number 3 2 5			<b>c</b> Type: 🛛	Checking	Savings		
See instructions.	d	Account number 8 9 5	6 6 1 6	6 5					
	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	_	-		38			
Third Party		you want to allow another							
Designee		,	•				omplete	below.	<b>⋈</b> No
J		esignee's		Phone			onal iden	tification	
		me		no.			ber (PIN)		
Sign		ider penalties of perjury, I declare the lief, they are true, correct, and com							, ,
Here		•	protor Bookaration		, , , I				, ,
	YC	our signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE D	EVELOPER		e inst.)	,
See instructions.		ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupation	on			nt your spouse an
Keep a copy for your records.	•							ntity Prote e inst.)	ection PIN, enter it here
	Ph	Phone no. (716)994-7798 Email address HARSHITHCHADARAM@GMAIL.COM							
Paid	Pr	eparer's name	Preparer's signat	ture		Date	PTIN		Check if:
Paid	SYA	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/29/2024	P0208	3 <u>27</u> 03	Self-employed
Preparer	Fir	m's name GLOBAL TA	XES LLC				Pho	one no. (	(678)965-9522
Use Only								n's EIN	84-3171965

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

9

10

#### **Additional Income and Adjustments to Income**

OMB No. 1545-0074 Attachment Sequence No. 01

Your social security number

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.

SAI HARSHITH CHADARAM 119-95-8447 Part Additional Income Taxable refunds, credits, or offsets of state and local income taxes . . . . . . . . . . . . . . . . 1 1 2a Date of original divorce or separation agreement (see instructions): 3 3 4 4 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E -20,547. 5 5 6 6 7 7 8 Other income: 8a а 8b 8c Foreign earned income exclusion from Form 2555 . . . . . . . . 8d 8e 8f Alaska Permanent Fund dividends . . . . . . . . . . . . . . . 8g 8i Activity not engaged in for profit income . . . . . . . . . . . . . . . . 8i 8k Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property . . . 81 m Olympic and Paralympic medals and USOC prize money (see 8m 8n Section 951A(a) inclusion (see instructions) . . . . . . . . . . . . 80 Section 461(I) excess business loss adjustment . . . . . . . . . . . 8p Taxable distributions from an ABLE account (see instructions) . . . 8q Scholarship and fellowship grants not reported on Form W-2 . . . 8r Nontaxable amount of Medicaid waiver payments included on Form 8s Pension or annuity from a nonqualifed deferred compensation plan or 8t Wages earned while incarcerated 8u Other income. List type and amount: 

Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 

-20,547.

9

10

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

Par	t II 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	· <u> </u>			
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	041			
	1041)	24k			
Z	Other adjustments. List type and amount:				
05		24z		0.5	
25 06	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> Form 1040, 1040-SR, or 1040-NR, line 10			06	
				26	
	BAA	REV 02/	16/24 PRO	Scnedu	ile 1 (Form 1040) 2023

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

SAI HARSHITH CHADARAM

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

**Additional Credits and Payments** 

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

	Attachment Sequence No. <b>03</b>
Your soc	ial security number
119-95	5-8447

Par	Nonrefundable Credits				
1	Foreign tax credit. Attach Form 1116 if required			1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441	, lin 	e 11. Attacł	2	
3	Education credits from Form 8863, line 19			3	
4	Retirement savings contributions credit. Attach Form 8880			4	
5a	Residential clean energy credit from Form 5695, line 15	5a			
b	Energy efficient home improvement credit from Form 5695, line 32			5b	
6	Other nonrefundable credits:				
а	General business credit. Attach Form 3800	6a			
b	Credit for prior year minimum tax. Attach Form 8801	6b			
С	Adoption credit. Attach Form 8839	6с			
d	Credit for the elderly or disabled. Attach Schedule R	6d			
е	Reserved for future use	6e			
f	Clean vehicle credit. Attach Form 8936	6f	7,500		
g	Mortgage interest credit. Attach Form 8396	6g			
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h			
i	Qualified electric vehicle credit. Attach Form 8834	6i			
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j			
k	Credit to holders of tax credit bonds. Attach Form 8912	6k			
ı	Amount on Form 8978, line 14. See instructions	6I			
m	Credit for previously owned clean vehicles. Attach Form 8936 .	6m			
z	Other nonrefundable credits. List type and amount:				
		6z			
7	Total other nonrefundable credits. Add lines 6a through 6z			7	7,500.
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10	040,	1040-SR, o	r	
	1040-NR, line 20			8	7,500.
			(	contin	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	-	•	15	

## SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

### **Capital Gains and Losses**

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Go to www.irs.gov/ScheduleD for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. **12** 

	(s) snown on return I HARSHITH CHADARAM			l	<b>sociai se</b> 9-95-	8447
Did y	you dispose of any investment(s) in a qualified opportunity			× No	- 20	<u> </u>
If "Y	es," attach Form 8949 and see its instructions for additiona	al requirements fo	r reporting your ga	ain or loss.		
Pa	rt I Short-Term Capital Gains and Losses—Ge	nerally Assets l	Held One Year	or Less (s	see ins	tructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	<b>(d)</b> Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmento gain or lo Form(s) 8949 line 2, colu	ss from 9, Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked					
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked	25,678.	24,451.			1,227.
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	•		usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	1,227.
Pai	t II Long-Term Capital Gains and Losses – Ger	nerally Assets I	Held More Than	One Yea	r (see	instructions)
lines This	See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  (a)  Proceeds (sales price)  (b)  Adjustments to gain or loss for form (s) 8949, Pa line 2, column					(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824			, ,	11	
	Net long-term gain or (loss) from partnerships, S corporat				12	
13	. 3				13	
	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions				14	(
15	Net long-term capital gain or (loss). Combine lines 8a	through 14 in co	olumn (h). Then, go	to Part III		

Schedule D (Form 1040) 2023 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 1,227. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . . . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

### Form **8949**

#### **Sales and Other Dispositions of Capital Assets**

Schedule D.

Department of the Treasury Internal Revenue Service

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Go to www.irs.gov/Form8949 for instructions and the latest information.

2023
Attachment
Sequence No. 12A

OMB No. 1545-0074

Name(s	s) shown on return	1
SAI	HARSHITH	CHADARAN

Social security number or taxpayer identification number 119-95-8447

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.
 Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was

reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions,

complete a separate Form 8949, for one or more of the boxes, con						ions than will tit	on this page
<ul><li>☐ (A) Short-term transactions</li><li>☒ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>	reported on	Form(s) 1099	9-B showing bas	•			e)
(a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> below	Adjustment, if If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
AMAZON.COM	10/16/23	10/16/23	1,450.	1,450.			0.
Apex Clearing	07/11/23	12/31/23	24,228.	23,001.			1,227.
2 Totals. Add the amounts in column negative amounts). Enter each total Schedule D, line 1b (if Box A above shows is checked) or line 3 (if Box).	al here and inc e is checked), <b>lir</b>	lude on your ne 2 (if Box B	25 678	24 451			1 227

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

#### **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

SAI	HARSHITH CHA	DARAM						119-9	95-8447		
Par		Loss From Rental Real Estate ar									
	Note: If you a	are in the business of renting personal prope or loss from <b>Form 4835</b> on page 2, line 40.	erty, use <b>Sc</b>	hedule C	S. See	instrud	ctions. If you ar	e an inc	dividual, rep	ort farm	
Α		payments in 2023 that would require you		rm(s) 109	992 S	ee ins	tructions		□ Ye	s X N	<u> </u>
		will you file required Form(s) 1099?									
1a		s of each property (street, city, state, ZI			<u> </u>						
				. D.G. 1117		D.7.D.		7 737	F00020		
A B	9208,TOWER-9	9,NANAKRAMGUDA PRESTIGE HI	GH FIEL	LDS HY.	DERA	ABAD	, TELANGAN.	A IN	500032		
C											
1b	Type of Property	2 For each rental real estate prope	orty lieted			Fo	ir Rental	Doroo	nal Use		
110	(from list below)	above, report the number of fair				га	Days		ays	QJV	•
Α	3	personal use days. Check the Q	JV box or		Α		365		0		
В		if you meet the requirements to			В						
С		qualified joint venture. See instru	uctions.		С						
Туре	of Property:	•								•	
1	Single Family Resid	idence 3 Vacation/Short-Term Rer	ntal 5	Land			Self-Rental				
2	Multi-Family Resid	dence 4 Commercial	6	Royalti	es	8	Other (descri	be)			
							Propertie				
Incor	ne:			A	\		В	,01		С	
3			3			50.					
4		d	4								
Ехре	nses:										
5	Advertising		5								
6		see instructions)	6			50.					
7		intenance	7		2,13	34.					
8			8								
9			9								
10		professional fees	10								
11		s	11		1,71	10.					
12		t paid to banks, etc. (see instructions)	12								
13 14			14		5,27	77					
15	•		15		5,5	_					
16			16		3,30	30.					
17			17		5,82	20.					
18		ense or depletion	18								
19	Other (list)	· 	19								
20		Add lines 5 through 19	20	2	1,19	97.					
21	Subtract line 20 fr	from line 3 (rents) and/or 4 (royalties). If									
	, , ,	see instructions to find out if you must									
	file <b>Form 6198</b> .		21	-2	0,54	47.					
22		real estate loss after limitation, if any,				_ ,					
	·	ee instructions)	22 (	20	54		(	650	)(		)
23a		nts reported on line 3 for all rental prope			-	23a		650.	-		
b		nts reported on line 4 for all royalty prop			-	23b					
Q C		nts reported on line 12 for all properties nts reported on line 18 for all properties			-	23c					
d		nts reported on line 18 for all properties nts reported on line 20 for all properties			-	23d 23e	21	,197.			
e 24		nts reported on line 20 for all properties sitive amounts shown on line 21. <b>Do no</b>		any loss		206	<u> </u>	, 197. . <b>24</b>			
2 <del>4</del> 25		Ity losses from line 21 and rental real estat		-		ter to	tal losses here	_		20,547	, )
26	-	estate and royalty income or (loss).							(	20,51	• )
20		II, and IV, and line 40 on page 2 do no									
		n 1040), line 5. Otherwise, include this a						26		-20,54	7.

### 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

SAI HARSHITH CHADARAM

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

119-95-8447

Befo	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, in	f requ	ired.
Par	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	elf-only 🗌 Family
2	HSA contributions you made for 2023 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2023. <b>Do not</b> 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 <b>every</b> month during 2023, you were, or were considered, an eligible individual with the <b>same</b> coverage, enter \$3,850 (\$7,750 for family coverage). <b>All others</b> , 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		3,000.
	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	3,000.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	850.
13	<b>HSA deduction.</b> Enter the <b>smaller</b> of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	0.
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		
Part	a separate Part II for each spouse.	arate I	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	14b	
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	
16	<b>Taxable HSA distributions.</b> 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 <b>Exceptions to the Additional 20% Tax</b> (see instructions), check here		
b	<b>Additional 20% tax</b> (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 instruct 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	<b>Total income.</b> Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f .	20	
21	<b>Additional tax.</b> Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21	

BAA

REV 02/16/24 PRO

### 8936

#### Clean Vehicle Credits

OMB No. 1545-2137 Attachmen

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 SAI HARSHITH CHADARAM 119-95-8447 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 119,986. 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 2 Add lines 1a through 1e . . . . . . 119,986. 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 . . . . . . Зс Enter any amount from Form 2555, line 50 . . . . 3d Enter any amount from Form 4563, line 15 . . . . . . . Add lines 3a through 3e . . . . . . . . . . . . . . . . . 4 Enter the **smaller** of line 2 or line 4 5 119,986. 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 18,873. 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 18,873. 13 Personal use part of credit. Enter the smaller of line 9 or line 12 here and on Schedule 3 (Form 13 7,500. 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 

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#### **SCHEDULE A** (Form 8936)

#### **Clean Vehicle Credit Amount**

OMB No. 1545-2137

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							
SAI	I HARSHITH CHADARAM			119-95-8447						
Part	Vehicle Details									
1a	Year	_	2023							
b	Make	_	FORD							
С	Model	_	MUSTANG MACH-E							
2	Vehicle identification number (VIN) (see instructions) 3 F M T K 3 S S $\sim$	3	P M	A :	1 3	9	8 2			
3	Enter date vehicle was placed in service (MM/DD/YYYY)	_	04/08/2023							
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 United No.									
5	Does the VIN entered on line 2 belong to a <b>new clean vehicle</b> placed in service during the tax definitions.  ✓ <b>Yes.</b> Go to Part II.  ✓ <b>No.</b> Go to line 6.	ує	ear? See	e instr	ructior	ns for				
6	Does the VIN entered on line 2 belong to a <b>previously owned clean vehicle</b> acquired after 202 the tax year? See instructions for definitions.        Yes. Go to Part IV.    No. Go to line 7.	22	and pla	aced i	n serv	rice dı	uring			
7 Part	Does the VIN entered on line 2 belong to a <b>qualified commercial clean vehicle</b> acquired after 2022 and placed in service during the tax year? See instructions for definitions.  Yes. Go to Part V.  No. Stop here. You can't use this schedule to figure a credit amount for a vehicle not described on line 5, 6, or 7.  Credit Amount for Business/Investment Use Part of New Clean Vehicle									
8										
9	Tentative credit amount (see instructions)		9		•	7,50	0.			
10	Business/investment use percentage (see instructions)		10				%			
11 Dow	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	1								
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			7,50	10			

Schedu	e 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 vehic	le fror	n another person.					
	☐ Yes.							
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a	cquire	ed for resale.					
С	Can you be claimed as a dependent on another person's tax return, such as your parent's return	rn?						
	☐ <b>Yes. Stop here.</b> You can't claim a credit amount if you can be claimed as a dependent.							
	□ No.							
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions.							
	☐ Yes.							
	☐ No.							
		[						
14	Enter the sales price of the vehicle	14						
15	Multiply line 14 by 30% (0.30)	15						
16	Maximum vehicle credit amount	16	4,000.					
10	Waximum vehicle credit amount	10	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 exception for certain tax-exempt entities discussed in the instructions applies.  Yes.  No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception applies.							
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	Is the vehicle also powered by gas or diesel? See instructions.  Yes.  No.	ı						
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						
	M III I II OA I 450( (0.45) [000( (0.00) (1) I I I I I I I I I I I I I I I I I I I							
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	<b>Maximum credit.</b> Enter \$7,500 (\$40,000 if the vehicle's gross vehicle weight rating (GVWR) is 14,000 pounds or more)	25						
00	, ,							
26	Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V							

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