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

| Subm | ission Identification Number (SID) | | - | | |
|--|--|--|--|--|---|
| Taxpaye | er's name | Social securit | y numb | er | |
| NAG: | ENDER REDDY GOLI | 889-99- | -623 | 6 | |
| Spouse | 's name | Spouse's soc | ial secu | ırity numb | er |
| Part | Tax Return Information — Tax Year Ending December 31, 2023 (Ent | _ ∣ er year you a | re au | thorizing | J.) |
| Enter | whole dollars only on lines 1 through 5. | | | | |
| Note: | Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | | |
| 1 | Adjusted gross income | | 1 | | B , 137. |
| 2 | Total tax | | 2 | (| 6,348. |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 | 1 | 7 , 356. |
| 4 | Amount you want refunded to you | | 4 | 1: | 1,008. |
| 5 | Amount you owe | | 5 | | |
| Part | Taxpayer Declaration and Signature Authorization (Be sure you get and penalties of perjury, I declare that I have examined a copy of the income tax return (original or amende | | | | |
| to send for any Agent in payme authori payme busines taxes to person | (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for revided in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the financial institution account in the financial axes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminated, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resist days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the lad 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 authorizate the authorizate quests must be the processing of payment. I furt | ansmised and its of an and its of an | ssion, (b) the designated paration so this according to the desired from t | the reason of Financial oftware for count. This (cancel) a ter than 2 payment of e that the |
| | onic Funds Withdrawal Consent. | | | | 1 |
| | ayer's PIN: check one box only | 9 | 6 2 | 2 3 6 | |
| × | I authorize GLOBAL TAXES LLC to enter or generate FRO firm name | ř Ent | | digits, but | as my |
| | signature on the income tax return (original or amended) I am now authorizing. | doi | n't ente | r all zeros | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below. | | | | |
| Yours | signature ▶ Date ▶ | | | | |
| Snous | se's PIN: check one box only | | | | |
| Г | I authorize to enter or generat | e my PIN | | | as my |
| | ERO firm name | | er five | digits, but |] ao my |
| | signature on the income tax return (original or amended) I am now authorizing. | do | n't ente | r all zeros | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below. | | | | |
| Spous | se's signature ▶ Date ▶ | | | | |
| | Practitioner PIN Method Returns Only—continue belo | W | | | |
| Part | III Certification and Authentication — Practitioner PIN Method Only | | | | |
| ERO's | s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. | 2 2 4 9 | 6 0 | 8 2 | 7 1 |
| | = IIIV III Elitor your old algit El IIV lollowood by your live algit oon obloctod i IIII | Don't ent | | | |
| authori | y that the above numeric entry is my PIN, which is my signature for the electronic individual income ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subsements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of | mitting this retu | ırn in a | accordanc | I am now e with the |
| ERO's | s signature ▶ Date ▶ | | | | |
| | ERO Must Retain This Form — See Instructions | | | | |
| | Don't Submit This Form to the IRS Unless Requested To | Do So | | | |

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



| 1040 | | artment of the Treasury-Internal Revenue Servi | | urn | 202 | 3 | OMB No. 1545 | -0074 | IRS Use | Only- | -Do not w | rite or sta | aple in this space. | |
|----------------------------------|-------------|--|-------------|------------|---------------------------|-------|--------------------------|-------------|-------------|----------------|-----------|-------------|-------------------------------------|-----|
| For the year Jai | n. 1–Dec | c. 31, 2023, or other tax year beginning | | | , 2023, end | ding | | | , 20 | | See se | oarate i | instructions. | _ |
| Your first name | e and m | iddle initial | Last na | me | | | | | | | Your so | cial sec | curity number | _ |
| NAGENDE | R RE | DDY | GOLI | | | | | | | | 889 | 99 | 6236 | |
| If joint return, s | spouse's | s first name and middle initial | Last na | me | | | | | | | Spouse' | s social | security numb | eı |
| Home address | (numbe | er and street). If you have a P.O. box, see | instruction | ons. | | | | A | Apt. no. | | Preside | ntial Ele | ection Campaig | |
| _7861 MOI | RVEN | PARK | | | | | | | | | | | ou, or your | |
| City, town, or p | oost offi | ice. If you have a foreign address, also co | mplete s | paces bel | ow. | Sta | te | ZIP c | ode | | • | - | jointly, want \$3 nd. Checking a | |
| IRVING | | | | | | TX | ζ | 750 | 63 | | • | | not change | ι |
| Foreign countr | y name | | F | Foreign pr | ovince/state/ | count | ty | Foreiç | ın postal c | ode | your tax | or refu | | se |
| Filing Status | s 🗵 | Single | | | | | Head of h | ouseh | old (HOI | | | | | _ |
| Check only | | Married filing jointly (even if only o | ne had i | ncome) | | | | | | | | | | |
| one box. | | Married filing separately (MFS) | | | | | ☐ Qualifying | surviv | ing spo | use (C | QSS) | | | |
| | If y | you checked the MFS box, enter the | name c | of your sp | oouse. If you | u che | ecked the HOH | or Q | SS box, | enter | the chi | ld's na | me if the | |
| | qu | ıalifying person is a child but not you | ır depen | ndent: | | | | | | | | | | |
| Digital | At a | ny time during 2023, did you: (a) rec | eive (as | a reward | d. award. or | pavn | nent for prope | rtv or | services |): or (| b) sell. | | | _ |
| Assets | | nange, or otherwise dispose of a dig | | | | | | | | | | □ Ye | es 🗵 No | |
| Standard | | neone can claim: You as a de | | | | | a dependent | , , | | | | | | _ |
| Deduction | | Spouse itemizes on a separate retur | • | | - | | • | | | | | | | |
| A ara /Dlindana | | | | | | | | m bafa | va lanu | am / O | 1050 | | s blind | |
| | | : Were born before January 2, 1 | 939 _ | _ Are bli | <u> </u> | ouse | | 11 | | | | | s billio (see instructions | -/- |
| Dependent | | instructions): First name Last name | | (2) S | Social security number | ′ | (3) Relationsh to you | Child tax c | | | | | or other dependen | |
| If more than four | (1) | East name | | | | | , | | | | - | | | _ |
| dependents, | | | | | | | | | | | | | $\overline{}$ | _ |
| see instruction | ıs — | | | | | | | | | | | | | _ |
| and check here \square |] | | | | | | | | | | | | | _ |
| Income | 1a | Total amount from Form(s) W-2, b | ox 1 (se | e instruc | tions) . | | | | | . . | 1a | | 109,084. | |
| | b | Household employee wages not re | eported | on Form | (s) W-2 . | | | | | | 1b | | | |
| Attach Form(s) W-2 here. Also | С | Tip income not reported on line 1a | a (see ins | struction | s) | | | | | | 1c | | | |
| attach Forms | d | Medicaid waiver payments not rep | orted o | n Form(s |) W-2 (see i | nstru | ictions) | | | | 1d | | | |
| W-2G and 1099-R if tax | е | Taxable dependent care benefits f | from For | m 2441, | line 26 | | | | | | 1e | | | |
| was withheld. | f | Employer-provided adoption bene | fits from | n Form 8 | 839, line 29 | | | | | | 1f | | | |
| If you did not | g | Wages from Form 8919, line 6 . | | | | | | | | | 1g | | | |
| get a Form W-2, see | h | Other earned income (see instruct | , | | | | | · · | | | 1h | | 0. | |
| instructions. | i | Nontaxable combat pay election (s | see instr | ructions) | | | <u>1</u> i | | | | | | 100 001 | |
| | <u>z</u> | Add lines 1a through 1h | | | <u>.</u> | | | | | | 1z | | 109,084. | _ |
| Attach Sch. B | 2a | · - | 2a | | | | axable interes | | | | 2b | | | _ |
| if required. | <u>3a</u> _ | | 3a | | | | ordinary divide | | | | 3b | | | _ |
| Standard | 4a | - | 4a | | | | axable amoun | | | | 4b | | | _ |
| Deduction for— | 5a | | 5a | | | | axable amoun | | | | 5b | | | _ |
| Single or Married filing | 6a | , | 6a | moth a d | obook bere | | axable amoun | ι | | ٠. | 6b | | | _ |
| separately, \$13,850 | C 7 | If you elect to use the lump-sum e | | • | | ` | , | | | . - | - | | | |
| Married filing | 8 | Capital gain or (loss). Attach Sche Additional income from Schedule | | | | | | | | . ∟ | 8 | | -10,947. | _ |
| jointly or Qualifying | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7 | | | | | | | | | 9 | | 98,137. | |
| surviving spouse, \$27,700 | 10 | Add lines 12, 20, 30, 40, 50, 60, 7, Adjustments to income from Sche | | | | | | | | | 10 | + | | _ |
| Head of | 11 | Subtract line 10 from line 9. This is | | | | | | | | | 11 | | 98,137. | |
| household, \$20,800 | 12 | Standard deduction or itemized | • | - | - | | | | | | 12 | | 13,850. | |
| If you checked any box under | 13 | Qualified business income deduct | | | | | | | | | 13 | | | - |
| Standard Deduction, | 14 | | | | | | | | | | 14 | | 13,850. | _ |
| see instructions. | 15 | Subtract line 14 from line 11. If zer | | | | | | | = | | 15 | | 8/ 287 | _ |

| Form 1040 (202 | 3) | | | | | | | | Page 2 |
|------------------------------------|---|---------------------------------------|-------------------------|-------------------|------------------------|------------------------|--|-----------------------|-----------------------|
| Tax and | 16 | Tax (see instructions). Check | if any from Form | (s): 1 881 | 4 2 🗌 4972 | 3 🗌 | | 16 | 13,848. |
| Credits | 17 | Amount from Schedule 2, lir | ne 3 | | | | | 17 | |
| | 18 | Add lines 16 and 17 | | | | | | 18 | 13,848. |
| | 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 | 6,348. |
| | 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 total tax | | | | | 24 | 6,348. |
| Payments | 25 | Federal income tax withheld | | | | | | | |
| - | а | Form(s) W-2 | | | | 25a 1 | 7,356. | | |
| | b | Form(s) 1099 | | | | 25b | | | |
| | С | Other forms (see instruction | s) | | | 25c | | | |
| | d | Add lines 25a through 25c | | | | | | 25d | 17,356. |
| 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 | | | |
| attach Sch. ElC. | 28 | Additional child tax credit from | m Schedule 8812 | | | 28 | | | |
| | 29 | American opportunity credit | from Form 8863 | 3, line 8 | | 29 | | | |
| | 30 | Reserved for future use . | | | | 30 | | | |
| | 31 | Amount from Schedule 3, lir | ne 15 | | | 31 | | | |
| | 32 | Add lines 27, 28, 29, and 31 | . These are your | total other pa | ayments and refu | undable credits | | 32 | |
| | 33 | Add lines 25d, 26, and 32. T | hese are your to | tal payments | | | | 33 | 17,356. |
| Refund | 34 | If line 33 is more than line 24 | 4, subtract line 2 | 4 from line 33. | This is the amou | nt you overpaid | | 34 | 11,008. |
| | 35a | Amount of line 34 you want | | | is attached, che | ck here | 🗆 | 35a | 11,008. |
| Direct deposit? | b | Routing number 0 7 4 | | | c Type: | Checking | Savings | | |
| See instructions. | d | Account number 1 0 7 | 9 8 2 0 | 5 7 | | | | | |
| | 36 | Amount of line 34 you want | applied to your | 2024 estimate | ed tax | 36 | | | |
| Amount | 37 | Subtract line 33 from line 24 | | | | | | | |
| You Owe | | For details on how to pay, g | _ | - | | | | 37 | |
| | 38 | Estimated tax penalty (see in | nstructions) . | | | 38 | | | |
| Third Party | | you want to allow another | • | | | | | | |
| Designee | | | | | | | • | | ⊠ No |
| | nai | signee's ne | | Phone no. | | | sonal ident nber (PIN) | ification | |
| Sign | Un | der penalties of perjury, I declare t | hat I have examined | d this return and | accompanying sche | dules and stateme | nts, and to | the best | of my knowledge and |
| Here | bel | ief, they are true, correct, and com | plete. Declaration of | of preparer (othe | r than taxpayer) is ba | ased on all informat | ion of whic | h prepar | er has any knowledge. |
| Here | Yo | ur signature | | Date | Your occupation | | | | nt you an Identity |
| | | | | | | | | tection P e inst.) | PIN, enter it here |
| Joint return? See instructions. | | augaia alamatuwa. If a laint vatuwa l | hath must sime | Date | SOFTWARE I | | | | mt |
| Keep a copy for your records. | Spouse's signature. If a joint return, both must sign. | | | Date | Spouse's occupat | ion | If the IRS sent your spous Identity Protection PIN, et (see inst.) | | |
| | Ph | one no. (219) 386-069 | 0 | Email address | NAGENDER.G | NR@GMAIL.C | OM M | | |
| | Pre | eparer's name | Preparer's signat | ure | • | Date | PTIN | | Check if: |
| Paid | SYAN | PRIYA RAM SAGAR GUPTA TALLAM | SYAM PRIYA | RAM SAGAR | GUPTA TALLAM | 02/02/2024 | P0208 | 2703 | Self-employed |
| Preparer | Fin | m's name GLOBAL TA | XES LLC | | | • | | | (678) 965-9522 |
| Use Only | Fin | | Y CT E BRU | NSWICK N | J 08816 | | Firn | n's EIN | 84-3171965 |

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

NAGENDER REDDY GOLI

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

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

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

| | Sequence No. 01 |
|----------|---------------------|
| Your soc | ial security number |
| 889-99 | -6236 |

| 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. Atta | ach Schedule E . | 5 | -10,947. |
| 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 . Enter | here and on Form | | |
| | 1040, 1040-SR, or 1040-NR, line 8 | | 10 | -10,947. |

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

| Par | t II Adjustments to Income | | | | |
|-----------|---|---------|-------------|-----|--|
| 11 | Educator expenses | | | 11 | |
| 12 | Certain business expenses of reservists, performing artists, and fee- | | | | |
| | 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 8l from the | | | | |
| | | 24b | | | |
| С | Nontaxable amount of the value of Olympic and Paralympic medals | 04 | | | |
| _1 | · | 24c | | _ | |
| d | | 24d | | _ | |
| е | Repayment of supplemental unemployment benefits under the Trade Act of 1974 | 24e | | | |
| f | | 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 | | | | |
| | - | 24i | | | |
| j | | 24j | | | |
| k | Excess deductions of section 67(e) expenses from Schedule K-1 (Form | | | | |
| | | 24k | | | |
| Z | Other adjustments. List type and amount: | 24z | | | |
| 05 | | | | | |
| 25 | Total other adjustments. Add lines 24a through 24z | E | | 25 | |
| 26 | Add lines 11 through 23 and 25. These are your adjustments to income . | . ∟nter | nere and on | | |
| | Form 1040, 1040-SR, or 1040-NR, line 10 | | | 26 | |

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

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.

OMB No. 1545-0074

2023

Attachment
Sequence No. 03

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

Your social security number 889-99-6236

| 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 | , line | e 11. Attac | h 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 | 6c | | | |
| d | Credit for the elderly or disabled. Attach Schedule R | 6d | | | |
| е | Reserved for future use | 6e | | | |
| f | Clean vehicle credit. Attach Form 8936 | 6f | 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 | | | |
| 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 | | | |
| 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, c | | |
| | 1040-NR, line 20 | | | 8 | 7,500. |
| | | | | (continu | ıed 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 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.

OMB No. 1545-0074

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 Your social security number

| NAGI | ENDER REDDY GOLI | | | | | | 889-9 | 9-6236 | |
|-------|--|-----------------|------------|----------|----------------|-------------------|-------------|----------------|-----------|
| Par | Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40. | rtv. use | | C. See | instru | ctions. If you a | are an indi | vidual, rep | oort farm |
| Α | Did you make any payments in 2023 that would require you | | Form(s) 1 | 099? S | See ins | structions . | | . Y | es 🛛 No |
| В | If "Yes," did you or will you file required Form(s) 1099? . | | | | | | | . 🗌 Y | es 🗌 No |
| 1a | Physical address of each property (street, city, state, ZII | | | | | | | | |
| Α | 3-49, SAPTHAGIRI COLONY WADDEPALLY, HAN | | | DANC | ΔТ. Τ. | FLANCANA | TN 50 | 6007 | |
| В | 3-49, SAFINAGIRI COLONI WADDEFALLI, NAI | MAMINO | NDA WA | MANGA | <u>а</u> ш, т. | LLANGANA | IN JU | 0007 | |
| C | | | | | | | | | |
| 1b | Type of Property (from list below) 2 For each rental real estate properation above, report the number of fair | rental a | and | | Fa | ir Rental Days | | nal Use ays | QJV |
| Α | personal use days. Check the Q | | | Α | | 365 | | 0 | |
| В | if you meet the requirements to qualified joint venture. See instru | | | В | | | | | |
| С | quained joint venture. See institu | actions. | • | С | | | | | |
| Туре | of Property: | | | | | | | | |
| 1 | Single Family Residence 3 Vacation/Short-Term Ren | ntal | 5 Land | | | Self-Rental | | | |
| 2 | Multi-Family Residence 4 Commercial | | 6 Roya | lties | 8 | Other (desc | ribe) | | |
| | | | | | | Properti | | | |
| Incor | ne: | ŀ | | Α | | В | | | С |
| 3 | Rents received | 3 | | | 81. | | | | |
| 4 | Royalties received | 4 | | | | | | | |
| Expe | nses: | | | | | | | | |
| 5 | Advertising | 5 | | | | | | | |
| 6 | Auto and travel (see instructions) | 6 | | | | | | | |
| 7 | Cleaning and maintenance | 7 | | 2,4 | 15. | | | | |
| 8 | Commissions | 8 | | | | | | | |
| 9 | Insurance | 9 | | | | | | | |
| 10 | Legal and other professional fees | 10 | | | | | | | |
| 11 | Management fees | 11 | | 1,6 | 50. | | | | |
| 12 | Mortgage interest paid to banks, etc. (see instructions) | 12 | | | | | | | |
| 13 | Other interest | 13 | | | | | | | |
| 14 | Repairs | 14 | | 2,4 | 51. | | | | |
| 15 | Supplies | 15 | | 2,3 | 32. | | | | |
| 16 | Taxes | 16 | | | | | | | |
| 17 | Utilities | 17 | | 2,6 | 80. | | | | |
| 18 | Depreciation expense or depletion | 18 | | | | | | | |
| 19 | Other (list) | 19 | | | | | | | |
| 20 | Total expenses. Add lines 5 through 19 | 20 | | 11,5 | 28. | | | | |
| 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 | - | -10,9 | 47. | | | | |
| 22 | Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) | 22 (| | 10,94 | | (|) | (| |
| 23a | Total of all amounts reported on line 3 for all rental prope | erties | | | 23a | | 581. | | |
| b | Total of all amounts reported on line 4 for all royalty prop | | | | 23b | | | | |
| С | Total of all amounts reported on line 12 for all properties | | | | 23c | | | | |
| d | Total of all amounts reported on line 18 for all properties | | | | 23d | | | | |
| е | Total of all amounts reported on line 20 for all properties | | | | 23e | 11 | ,528. | | |
| 24 | Income. Add positive amounts shown on line 21. Do not | t includ | le any los | sses | | | . 24 | | |
| 25 | Losses. Add royalty losses from line 21 and rental real estat | te losse: | s from lin | e 22. Er | nter to | tal losses her | e 25 | (| 10,947. |
| 26 | Total rental real estate and royalty income or (loss). | Combi | ne lines : | 24 and | 25. E | nter the resu | ult | | |
| | here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this all | ot apply | to you, | also e | nter th | nis amount d | | | -10,947. |

Form **8936**

Clean Vehicle Credits

OMB No. 1545-2137 Attachment Sequence No. **69**

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 NAGENDER REDDY GOLI 889-99-6236

| Notes | • Complete a separate Schedule A (Form 8936) for each clean vehicle placed in | • | year. | |
|-------------|---|---------------------------|----------|---------------------|
| | Individuals completing Parts II, III, or IV, must also complete Part I. See "Note | e" 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 98,137. | | |
| b | Enter any income from Puerto Rico you excluded | 1b | | |
| С | Enter any amount from Form 2555, line 45 | 1c | | |
| d | Enter any amount from Form 2555, line 50 | 1d | | |
| е | Enter any amount from Form 4563, line 15 | 1e | | |
| 2 | Add lines 1a through 1e | | 2 | 98,137. |
| 3a | Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR | 3a | | · |
| b | Enter any income from Puerto Rico you excluded | 3b | | |
| С | Enter any amount from Form 2555, line 45 | 3c | | |
| d | Enter any amount from Form 2555, line 50 | 3d | | |
| е | Enter any amount from Form 4563, line 15 | 3e | | |
| 4 | Add lines 3a through 3e | | 4 | |
| 5 | Enter the smaller of line 2 or line 4 | | 5 | 98,137. |
| Part | | | | , |
| | Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than | \$150,000 (\$300,000 if r | married | 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 | |
| 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 c | orporations, stop here | | |
| | and report this amount on Schedule K. All others, report this amount on Form 380 | 0, Part III, line 1y | 8 | |
| 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 (\$300,000 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 | 13,848. |
| 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 of | claim the personal use | | |
| | part of the credit | | 12 | 13,848. |
| 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 \$ | 375,000 (\$150,000 if m | arried f | iling 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 cl | | 17 | |
| 18 | Enter the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040), | line 6m. If line 17 is | | |
| | 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 (s | | 20 | |
| 21 | Add lines 19 and 20. Partnerships and S corporations, stop here and report this | amount on Schedule | | |
| | K. All others, report this amount on Form 3800, Part III, line 1aa | | 21 | |
| | | | | - |

SCHEDULE A (Form 8936)

Clean Vehicle Credit Amount

OMB No. 1545-2137

Attachment Sequence No. **69A** Identifying number

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

Attach to your tax return. Go to www.irs.gov/Form8936 for instructions and the latest information.

| NAG | ENDER REDDY GOLI | 889-99-6236 |
|-----------|--|---------------------------------|
| Part | Vehicle Details | |
| 1a | Year | 2023 |
| b | Make | TESLA |
| С | Model | MODEL Y |
| 2 | Vehicle identification number (VIN) (see instructions) 7 S A Y G D E E $$ | X P A 0 6 3 3 7 1 |
| 3 | Enter date vehicle was placed in service (MM/DD/YYYY) | 01/13/2023 |
| 4 | Was the vehicle used primarily outside the United States? Answer "No" if it was but an excepti ☐ Yes. Stop here. You can't claim a credit amount for a vehicle used primarily outside the Ur ☒ No. | |
| 5 | Does the VIN entered on line 2 belong to a new clean vehicle placed in service during the tax definitions. ☑ Yes. Go to Part II. ☐ No. Go to line 6. | year? See instructions for |
| 6 | Does the VIN entered on line 2 belong to a previously owned clean vehicle acquired after 202 the tax year? See instructions for definitions. Yes. Go to Part IV. No. Go to line 7. | 22 and placed in service during |
| 7 Part | Does the VIN entered on line 2 belong to a qualified commercial clean vehicle acquired after during the tax year? See instructions for definitions. Yes. Go to Part V. No. Stop here. You can't use this schedule to figure a credit amount for a vehicle not described to the commercial clean vehicle acquired after during the tax year? See instructions for definitions. Credit Amount for Business/Investment Use Part of New Clean Vehicle | NIAI |
| 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 7,500. |
| 10 | Business/investment use percentage (see instructions) | 10 % |
| 11 | Multiply line 9 by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you entered 100% on line 10, stop here. Otherwise, go to Part III below | 11 |
| Part | | |
| 12 | Subtract line 11 from line 9 in Part II. Stop here and include this credit amount on line 9 in Part III of Form 8936 | 12 7,500. |
| For Pa | perwork Reduction Act Notice, see the Form 8936 instructions. BAA REV 01/27/24 | ' |



| Schedu | le A (Form 8936) 2023 | | Page 2 |
|----------|--|--------|--------------------------------|
| Part | V 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 Yes. | e fror | n another person. |
| | No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a | - | ed for resale. |
| С | Can you be claimed as a dependent on another person's tax return, such as your parent's return. Yes. Stop here. You can't claim a credit amount if you can be claimed as a dependent. No. | n? | |
| 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. |
| 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 b | 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 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 | appli | es. easing the vehicle from |
| С | resale. Is the vehicle also powered by gas or diesel? See instructions. Yes. No. | | |
| 19 | Enter the cost or other basis of the vehicle. See instructions | 19 | 60,630. |
| 20 | Section 179 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 | |
| 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 | |

Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V

26

of Form 8936

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