(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

Submis	ssion Identification Number (SID)				
Taxpayer	's name	Social securit	y numb	er	
AVIN	ASH GODAVARTHI	829-06-	-9205		
Spouse's	name	Spouse's soc	ial secu	rity number	
AKHI	LA DEVI GARAPATI	358-99	-4324	1	
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	er year you a	re autl	horizing.)	
Enter w	hole dollars only on lines 1 through 5.			<u> </u>	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	167,	537.
2	Total tax		2	13,	879.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	25,	468.
4	Amount you want refunded to you		4		,589.
5	Amount you owe		5	,	
Part I			y of y	our retur	n)
return (c to send for any of Agent to paymen authoriz paymen business taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transfirmly 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 binitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account into the financial institution account into the financial institution account into the financial institution account in the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation received to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the I identification number (PIN) below is my signature for the income tax return (original or amended) I is Funds Withdrawal Consent.	nitter, or electro- jection of the tr J.S. Treasury and dicated in the ta- ion to debit the te the authoriza- quests must be processing of payment. I furt	enic returnished its distance of its distance	urn originatesion, (b) the esignated faration soft or this according to the estronic payers.	or (ERO) e reason inancial ware for unt. This cancel) a r than 2 yment of that the
	ver's PIN: check one box only				
X	I authorize GLOBAL TAXES LLC to enter or generate	my PINI 6	9 2	0 5	as my
	ERO firm name	Ent		ligits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.	doi	ı t enter	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 <b>and</b> your return is filed using the Practitioner PIN met below.				
Your si	gnature ► Date ►				
Spous	e's PIN: check one box only				
X	-	mv PIN 9	4 3	2 4	00 my
	ERO firm name	,		ligits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.			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 <b>and</b> your return is filed using the Practitioner PIN met below.				
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	v			
Part I	Certification and Authentication — Practitioner PIN Method Only				
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 4 9 Don't ente	6 0 er all zer	8 2 7	1
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of	mitting this retu	rn in a	ccordance	
ERO's	signature ▶ Date ▶				

REV 03/07/24 PRO

ERO Must Retain This Form - See Instructions

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



<b>1040</b>		artment of the Treasury-Internal Revenue Servi		urn G	20 <b>2</b>	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this spac	ce.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning		•	, 2023, end	ing			, 20		See se	parate	instructions	
Your first name	and m	iddle initial	Last nar	me							Your so	cial sec	urity numbe	
AVINASH			GODA	VARTHI							829	06	9205	
	pouse's	s first name and middle initial	Last nar										security nur	nber
AKHILA 1	DEVI		GARA	PATI							358	99	4324	
		er and street). If you have a P.O. box, see	instruction	ons.				A	Apt. no.			-	ection Camp	aign
5 DIGITA	AL D	R						2	208				ou, or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below	<i>/</i> .	Sta	te	ZIP c	ode			_	jointly, want nd. Checking	
NASHUA						NH	I	030	62		•		not change	Jа
Foreign countr	y name		F	oreign prov	ince/state/o	count	у	Foreig	ın postal c	ode	your tax	or refu		ouse
Filing Status Check only	_	Single  Married filing jointly (even if only or	ne had ir	ncome)			Head of ho		`	,	200)			
one box.	qu	Married filing separately (MFS) you checked the MFS box, enter the alifying person is a child but not you	ır depen	dent:				l or Q	SS box,	enter	the chi	ld's na	me if the	
Digital Assets	exch	ny time during 2023, did you: (a) reconange, or otherwise dispose of a dig	ital asse	t (or a finar	ncial intere	est in	n a digital asse					□ Ye	es 🗵 No	
Standard Deduction	_	neone can claim:	•				a dependent							
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bline	d <b>Spo</b>	use:	: Uwas bor	n befo	ore Janu	ary 2,	, 1959	ls	s blind	
Dependent	<b>s</b> (see	instructions):		<b>(2)</b> Soc	ial security		(3) Relationsh	ip (4	) Check t	he bo	x if quali	fies for (	see instruction	ons):
If more	(1) F	irst name Last name		nı	umber		to you		Child t	ax cre	edit	Credit fo	or other depend	dents
than four														
dependents, see instruction	s													
and check here	· ] —													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructio	ons)						1a		186,12	4.
	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	structions)							1c			
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) V	V-2 (see ir	nstru	ctions)				1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	from For	m 2441, lir	ne 26 .						1e			
was withheld.	f	Employer-provided adoption bene	fits from	Form 883	9, 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	ions) .					, .			1h			0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions) .			1i							
	z	Add lines 1a through 1h									1z		186,12	
Attach Sch. B	2a	Tax-exempt interest	2a			b Ta	axable interest	i .			2b	4	47	8.
if required.	3a	Qualified dividends	3a			<b>b</b> 0	rdinary divider	nds .			3b	4		
Phonodourd	4a	IRA distributions	4a				axable amount				4b	4		
Standard Deduction for—	5a	Pensions and annuities	5a			b Ta	axable amount	t			5b	1		
Single or	6a	Social security benefits	6a			b Ta	axable amount	t			6b	_		
Married filing separately,	С	If you elect to use the lump-sum e		•		`	,			. [				
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche									7		-3,00	
jointly or	8	Additional income from Schedule	•								8		-16,06	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8.	This is you	r total inc	ome					9		167,53	7.
\$27,700 • Head of	10	Adjustments to income from Sche									10			
household,	11	Subtract line 10 from line 9. This is	-								11		167,53	
\$20,800 If you checked	12	Standard deduction or itemized deductions (from Schedule A)								12		27 <b>,</b> 70	0.	
any box under Standard	13	Qualified business income deducti	ion from	Form 899	5 or Form	899	5-A				13			
Deduction,	14										14		27 <b>,</b> 70	
see instructions.	15	Subtract line 1/1 from line 11. If zer	n or less	ontor O	Thic ic w	Our t	avabla incom				15	1	130 83	7

Form 1040 (2023	3)								Page <b>2</b>	
Tax and	16	Tax (see instructions). Check if any fro	m Form(s):	<b>1</b> 8814	<b>2</b> 4972	3 🗌		16	21,379.	
Credits	17	Amount from Schedule 2, line 3 .						17		
	18	Add lines 16 and 17						18	21,379.	
	19	Child tax credit or credit for other dep	pendents fro	om Schedu	ıle 8812			19		
	20	Amount from Schedule 3, line 8 .						20	7,500.	
	21	Add lines 19 and 20						21	7,500.	
	22	Subtract line 21 from line 18. If zero of	or less, ente	r-0				22	13,879.	
	23	Other taxes, including self-employme						23	0.	
	24	Add lines 22 and 23. This is your total	al tax .					24	13,879.	
Payments	25	Federal income tax withheld from:							·	
•	а	Form(s) W-2				<b>25a</b> 25	,468.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c						25d	25,468.	
If you have a	26	2023 estimated tax payments and an	nount applie	ed from 20	22 return			26		
qualifying child,	27	Earned income credit (EIC)			. No .	27				
attach Sch. EIC.	28	Additional child tax credit from Schedu	ule 8812			28				
	29	American opportunity credit from For	rm 8863, line	e8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line 15 .				31				
	32	Add lines 27, 28, 29, and 31. These a	are your <b>tota</b>	al other pa	yments and refu	ndable credits		32		
	33	Add lines 25d, 26, and 32. These are	your total p	payments				33	25,468.	
Refund	34	If line 33 is more than line 24, subtract	ct line 24 fro	m line 33.	This is the amour	t you <b>overpaid</b>		34	11,589.	
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here							11,589.	
Direct deposit?	b	Routing number 1 0 1 1 0				Checking	Savings			
See instructions.	d	Account number 5 1 8 0 0	7 7 6	6 3 7	6					
	36	Amount of line 34 you want applied t	o your 2024	4 estimate	d tax	36				
Amount You Owe	37	Subtract line 33 from line 24. This is t For details on how to pay, go to www	37							
	38	Estimated tax penalty (see instruction				38				
Third Party Designee		you want to allow another person structions	to discuss	this retur	n with the IRS?		omplete	below.	⊠ No	
200.900	De	signee's		Phone			onal ident		_	
		me		no.			ber (PIN)			
Sign Here		der penalties of perjury, I declare that I have dief, they are true, correct, and complete. Dec			, , ,		,		, ,	
TICIC	Yo	ur signature	Dat	te	Your occupation				nt you an Identity	
						NCINEED		tection P inst.)	IN, enter it here	
Joint return? See instructions.	Sn	ouse's signature. If a joint return, hoth must	sign. Dat	t o	SOFTWARE E				nt vour enquee an	
Keep a copy for your records.	Spouse's signature. If a joint return, <b>both</b> must sign.			le	HOME MAKER		Ider	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Phone no. (913) 265-2835 Email address AVINASH.GODAVARTHI7@GMAIL.COM						OM			
Doid	Pre		's signature			Date	PTIN		Check if:	
Paid	SYA	SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/03/2024						2703	Self-employed	
Preparer	Fir	m's name GLOBAL TAXES LI	Pho	Phone no. (678) 965-9522						
Use Only	Fir	m's address 245 ROONEY CT E	E BRUNS	WICK NO	08816		Firn	ı's EIN		
<u> </u>	75	4040 ( )							- 1040	

# 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

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

AVINASH GODAVARTHI & AKHILA DEVI GARAPATI

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

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

Attachment Sequence No. 01 Your social security number

829-06-9205

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	-16,524.
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				
	MOVING EXPENSES 459.	<b>8z</b> 459.		
9	Total other income. Add lines 8a through 8z		9	459.
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	-16,065.

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d		_	
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e		_	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h		-	
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect tax law violations	04:			
		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:	24z			
25				25	
25 26	Total other adjustments. Add lines 24a through 24z			25	_
20	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> Form 1040, 1040-SR, or 1040-NR, line 10	. ⊏nter	nere and on	26	
					le 1 (Form 1040) 2023
	BAA	KEV 03/0	07/24 PRO	JUNEUU	ie i (Fulli 1040) 2023

# SCHEDULE 3 (Form 1040)

)

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

Additional Credits and Payments

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

OMB No. 1545-0074

2023

Attachment
Sequence No. 03

Your social security number

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.

AVI	NASH GODAVARTHI & AKHILA DEVI GARAPATI		82	29-06-	-92	205
Par	t I Nonrefundable Credits					
1	Foreign tax credit. Attach Form 1116 if required			. 1		
2	Credit for child and dependent care expenses from Form 244 Form 2441	1, lin 	e 11. Atta	ch . 2	<u>.</u>	
3	Education credits from Form 8863, line 19			. з	3	
4	Retirement savings contributions credit. Attach Form 8880			. 4	1	
5a	Residential clean energy credit from Form 5695, line 15			. 5	а	
b	Energy efficient home improvement credit from Form 5695, line 32	2 .		. 51	b	
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 <b>,</b> 50	00.		
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				
I	Amount on Form 8978, line 14. See instructions	6l				
m	Credit for previously owned clean vehicles. Attach Form 8936 .	6m				
Z	Other nonrefundable credits. List type and amount:					
7	Total other nonrefundable credits. Add lines 6a through 6z	6z		. 7	,	7,500.
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 1	040,	1040-SR,	or		7,300.
	1040-NR, line 20			. 8	\$	7,500.

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

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions)		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for repayment of amounts included in income from earlier years	13b		
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c		
d	Deferred amount of net 965 tax liability (see instructions)	13d		
Z	Other payments or refundable credits. List type and amount:	13z		
14	Total other payments or refundable credits. Add lines 13a through	n 13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	

#### **SCHEDULE D** (Form 1040)

#### **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.

OMB No. 1545-0074

Attachment Sequence No. **12** 

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/ScheduleD for instructions and the latest information. Name(s) shown on return Your social security number 829-06-9205 AVINASH GODAVARTHI & AKHILA DEVI GARAPATI

-	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona	_	-			
	rt I Short-Term Capital Gains and Losses—Ge	•			e 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)	<b>(e)</b> Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	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	sis was reported to the IRS and for o adjustments (see instructions). ose to report all these transactions this line blank and go to line 1b.  tions reported on Form(s) 8949 with		50.	-19,626.	
	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					-66.
<u> </u>	Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (le	•			4	
5				rusts from	5	
6	Short-term capital loss carryover. Enter the amount, if an	y, from line 8 of y	our <b>Capital Loss</b>		6	( 15,255.)
7	<b>Net short-term capital gain or (loss).</b> Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-34,947.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets H	leld More Than	One Year	(see i	instructions)
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.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I line 2, colum	from Part II,	(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	
12	Net long-term gain or (loss) from partnerships, S corporat				12	
13	. 9				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	lumn (h). Then, go	to Part III	4-	

Schedule D (Form 1040) 2023 Page 2

#### Part III **Summary** -34,947. 16 Combine lines 7 and 15 and enter the result 16 • 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 amount, if any, from line 7 of that worksheet . . . . . . . . . . . . . . . . . . 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. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 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.) • (\$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.

### 8949

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

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.

Attachment Sequence No. 12A

OMB No. 1545-0074

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

Social security number or taxpayer identification number

829-06-9205

AVINASH GODAVARTHI & AKHILA DEVI GARAPATI

instructions). For long-term transactions, see page 2.

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 Part I

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, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

(B) Short-term transactions (C) Short-term transactions			-	sis <b>wasn't</b> report	ed to the IF	RS	-1
1  (a)  Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a co	any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(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) (g) Code(s) from instructions Amount of adjustment		from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/23	12/31/23	122,466.	145,502.	W	2 <b>,</b> 950.	-20,086.
FIDELITY	01/01/23	12/31/23	5,216.	4,756.			460.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc e is checked), <b>li</b> i	clude on your ne 2 (if Box B	127,682.	150,258.		2,950.	-19,626.

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.

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

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

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

AVINASH GODAVARTHI & AKHILA DEVI GARAPATI

Social security number or taxpayer identification number

829-06-9205

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.

Part I 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, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

-	-			reported on not reported		-	sis <b>wasn't</b> report	ed to the IF	RS	
1	-	(a) ption of pro		(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)
	(Example: 1			(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).
Robin	hood	Crypto	LLC	01/01/23	12/31/23	5,935.	6,001.			-66.
negat Sched	tive amou dule D, <b>li</b> i	unts). Ente	r each tota ox <b>A</b> above	s (d), (e), (g), and al here and ince is checked), <b>lir</b> <b>C</b> above is chec	lude on your ne 2 (if Box B	5,935.	6,001.			-66.

**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.

Department of the Treasury Internal Revenue Service

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

2023	
Attachment Sequence No. <b>13</b>	

OMB No. 1545-0074

Name(s)	s) shown on return							Your s	ocial securit	y number
AVIN	NASH GODAVARTHI & AKHILA DEVI GARA	APATI						829	-06-920	5
Part	Income or Loss From Rental Real Es Note: If you are in the business of renting perso rental income or loss from Form 4835 on page 2	nal property.			<b>C</b> . See	instruc	tions. If you a	ıre an iı	ndividual, re	port farm
Α [	Did you make any payments in 2023 that would red	quire you to	file F	orm(s) 1	099? S	ee ins	tructions .		🗌 Y	'es 🛛 No
B I	If "Yes," did you or will you file required Form(s) 10	099?							🗌 Y	'es 🗌 No
	Physical address of each property (street, city,									
	PASUPULATHI VARI VEEDHI DURGAPUF	<u> </u>			T T T T	2000	1.3			
_ <u>A</u>	PASOPOLATHI VARI VEEDHI DORGAPOF	KAM ANDA	KAP.	KADESI	LIN	32000	)3			
B C										
	Town of Donards   O E		11. 1			_				<u> </u>
1b	Type of Property (from list below) 2 For each rental real esta above, report the numb	ate property er of fair rea	/ IISTE ntal a	ead and			r Rental Days		onal Use Days	QJV
A	gersonal use days. Che				Α		365		0	
B	if you meet the requiren	nents to file	as a	1	B		363			
	qualified joint venture. S	See instruct	ions.		С					
	of Property:				C					
	Single Family Residence 3 Vacation/Short-T	orm Pontal	ı	5 Land		7	Self-Rental			
	Multi-Family Residence 4 Commercial	enn nema	ı	6 Roya				ribo)		
	Wulti-Family Residence 4 Commercial			о поуа	iiies	0	Other (desci	ibe)		
							Properti	es:		
Incom	ne:				Α		В			С
3	Rents received		3		6	00.				
4	Royalties received		4							
Exper	nses:									
5	Advertising		5							
6	Auto and travel (see instructions)		6							
7	Cleaning and maintenance		7		1,8	25.				
8	Commissions		8							
9	Insurance		9							
10	Legal and other professional fees		10							
11	Management fees		11		1,6	00.				
12	Mortgage interest paid to banks, etc. (see instru	ctions)	12							
13	Other interest		13							
14	Repairs		14		3,4	57.				
15	Supplies		15		3,1	24.				
16	Taxes		16							
17	Utilities		17		4,2	56.				
18	Depreciation expense or depletion		18		2,8	62.				
19	Other (list)		19							
20	Total expenses. Add lines 5 through 19		20		17,1	24.				
21	Subtract line 20 from line 3 (rents) and/or 4 (roya	alties). If								
	result is a (loss), see instructions to find out if yo	ou must								
	file <b>Form 6198</b>		21		<b>-</b> 16,5	24.				
22	Deductible rental real estate loss after limitation on Form 8582 (see instructions)		<b>22</b> (	,	16 <b>,</b> 52	4.)(			)(	)
23a	Total of all amounts reported on line 3 for all ren				.,	23a		600		,
b	Total of all amounts reported on line 4 for all roy					23b			_	
C	Total of all amounts reported on line 12 for all pr					23c				
d	Total of all amounts reported on line 18 for all pr	•				23d	2	,862		
e	Total of all amounts reported on line 20 for all pr	•	-			23e		,124		
24	Income. Add positive amounts shown on line 2	•						. 2		
25	Losses. Add royalty losses from line 21 and rental			•		· · · nter tot	al losses her	_		16,524.)
26	Total rental real estate and royalty income o									
20	here. If Parts II, III, and IV, and line 40 on page									
	Schedule 1 (Form 1040), line 5. Otherwise, inclu-							.   <sub>2</sub>	6	-16,524.

Department of the Treasury

Internal Revenue Service

#### **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

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

AVINASH GODAVARTHI

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. 829-06-9205

**Before you begin:** Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required. HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse. Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2023. ☐ Self-only X Family HSA contributions you made for 2023 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2023. Do not include employer contributions, 2 0. If you were under age 55 at the end of 2023 and, on the first day of every month during 2023, you 3 were, or were considered, an eligible individual with the same coverage, enter \$3,850 (\$7,750 for 3 7,750. 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 4 0. 5 7,750. 5 6 Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2023, see the instructions for the amount to enter . . . 6 7,750. If you were age 55 or older at the end of 2023, married, and you or your spouse had family coverage 7 under an HDHP at any time during 2023, enter your additional contribution amount. See instructions. 7 8 8 7,750. Employer contributions made to your HSAs for 2023 . . . . . . . . . 9 10 5,065. 11 11 12 12 2,685. HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13 13 13 Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions. Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse. 124. 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 14b 14c 124. 15 15 124. Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this 16 16 0. If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% b Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form Part III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse. 18 18 19 19 20 **Total income.** Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f 20 Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 21

#### **Clean Vehicle Credits**

OMB No. 1545-2137

Attach to your tax return. Department of the Treasury Internal Revenue Service Attachment Sequence No. **69** Go to www.irs.gov/Form8936 for instructions and the latest information. Name(s) shown on return Identifying number AVINASH GODAVARTHI & AKHILA DEVI GARAPATI 829-06-9205

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 b	elow.			
Part	Modified Adjusted Gross Income Amount				
1a	Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR 1a	167,537.			
b	Enter any income from Puerto Rico you excluded	·			
С	Enter any amount from Form 2555, line 45				
d	Enter any amount from Form 2555, line 50				
е	Enter any amount from Form 4563, line 15				
2	Add lines 1a through 1e		2	167,537.	
3a	Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR   3a	74,982.		•	
b	Enter any income from Puerto Rico you excluded				
С	Enter any amount from Form 2555, line 45				
d	Enter any amount from Form 2555, line 50				
е	Enter any amount from Form 4563, line 15				
4	Add lines 3a through 3e		4	74,982.	
5	Enter the <b>smaller</b> of line 2 or line 4		5	74,982.	
Part				•	
	<b>Note:</b> Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$150,00 qualifying surviving spouse; \$225,000 if head of household).	00 (\$300,000 if r	narried	I filing jointly or a	
6	Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936)		6	0.	
7	New clean vehicle credit from partnerships and S corporations (see instructions)		7		
8	Business/investment use part of credit. Add lines 6 and 7. Partnerships and S corporati	ons, stop here			
	and report this amount on Schedule K. All others, report this amount on Form 3800, Part I	II, line 1y	8	0.	
9	Note: You can't claim the Part III credit if Part I, line 5, is more than \$150,000 qualifying surviving spouse; \$225,000 if head of household).  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 11	21,379.	
11	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)				
12	Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't claim the	e personal use			
	part of the credit		12	21,379.	
13					
В	1040), line 6f. If line 12 is smaller than line 9, see instructions		13	7,500.	
Part	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 qualifying surviving spouse; \$112,500 if head of household).	(\$150,000 if ma	arried	filing jointly or a	
14	Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936)		14		
15	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18		15		
16	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)		16		
17	Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't claim the Part IV credit		17		
18	Enter the <b>smaller</b> of line 14 or line 17 here and on Schedule 3 (Form 1040), line 6nd				
	smaller than line 14, see instructions		18		
	Part V Credit for Qualified Commercial Clean Vehicles				
19	Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936)		19 20		
20	Qualified commercial clean vehicle credit from partnerships and S corporations (see instructions)				
21	Add lines 19 and 20. Partnerships and S corporations, stop here and report this amoun				
	K. All others, report this amount on Form 3800, Part III, line 1aa		21		

# SCHEDULE A (Form 8936)

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

OMB No. 1545-2137

2023

Attachment Sequence No. **69A** 

Department of the Treasury Internal Revenue Service

Attach to your tax return.

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

Name(s	) shown on return	Ident	ifying r	number				
AVINASH GODAVARTHI & AKHILA DEVI GARAPATI		829-06-9205						
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		п.	- 0	1 (	E 0		
3	Enter date vehicle was placed in service (MM/DD/YYYY)				5 8			
3								
4	Was the vehicle used primarily outside the United States? Answer "No" if it was but an exception Yes. Stop here. You can't claim a credit amount for a vehicle used primarily outside the Unix No.	• •						
5	Does the VIN entered on line 2 belong to a <b>new clean vehicle</b> placed in service during the tax year? See instructions for definitions.  Yes. Go to Part II.  No. Go to line 6.							
6	Does the VIN entered on line 2 belong to a <b>previously owned clean vehicle</b> acquired after 2022 and placed in service during the tax year? See instructions for definitions.    Yes. Go to Part IV.  No. Go to line 7.							
7	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.							
Part	II Credit Amount for Business/Investment Use Part of New Clean Vehicle							
8	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you are leasing the vehicle from another person.  ☑ Yes.  ☐ No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to lease to others, or acquired for resale.							
9	Tentative credit amount (see instructions)	9			7,	500.		
10	Business/investment use percentage (see instructions)	10				%		
11	Multiply line 9 by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you entered 100% on line 10, stop here. Otherwise, go to Part III below	11				0.		
Part	Credit Amount for Personal Use Part of New Clean Vehicle							
12	Subtract line 11 from line 9 in Part II. Stop here and include this credit amount on line 9 in Part III of Form 8936	12			7,	500.		

Schedu	le A (Form 8936) 2023		Page 2			
Part						
13a	Is the sales price of the vehicle more than \$25,000?					
	Yes. Stop here. The vehicle doesn't qualify for the Part IV credit.					
	∐ No.					
b	Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehicle	le fron	n another person.			
	<ul><li>☐ Yes.</li><li>☐ No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a</li></ul>	oquir	od for roado			
	The stop here. Tou can't claim a credit amount for a vehicle you didn't acquire for use or a	cquire	eu ioi resale.			
С						
	<ul><li>☐ Yes. Stop here. You can't claim a credit amount if you can be claimed as a dependent.</li><li>☐ No.</li></ul>					
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions.					
	☐ Yes. ☐ No.					
		ı	l			
4.4	Enter the sales price of the vehicle	14				
14	Enter the sales price of the vehicle	14				
15	Multiply line 14 by 30% (0.30)	15				
16	Maximum vehicle credit amount	16	4,000.			
17	Enter the smaller of line 15 or line 16. Stop here and include this credit amount on line					
••	14 in Part IV of Form 8936	17				
Part	V Credit Amount for Qualified Commercial Clean Vehicle	•				
18a	<ul> <li>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.</li> <li>Yes.</li> <li>No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception applies.</li> </ul>					
b	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you are leasing the vehicle from another person.  Yes.  No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to lease to others, or acquired for resale.					
С	ls the vehicle also powered by gas or diesel? See instructions.  ☐ Yes. ☐ No.	1				
19	Enter the cost or other basis of the vehicle. See instructions	19				
20	Section 179 expense deduction (see instructions)	20				
21	Subtract line 20 from line 19	21				
00	M III   II   04   450( /0.45) [000( /0.00) [0]   1   1   40     1   (%)   17					
22	Multiply line 21 by 15% (0.15) [30% (0.30) if the answer on line 18c above is "No"]	22				
23	Enter the incremental cost of the vehicle. See instructions	23				
24	Enter the smaller of line 22 or line 23	24				
25	<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				
26	Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V					

26

Department of the Treasury Internal Revenue Service

#### **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

2023 Attachment Sequence No. 179

OMB No. 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number AVINASH GODAVARTHI & AKHILA DEVI GARAPATI Sch E PASUPULATHI VARI VEEDHI 829-06-9205 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1,160,000. 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2,890,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . . . . . . . . . . . . . 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . . . . . . . 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 . . . . . . . . . . . . 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 . . . . . . . . . . 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 . . . . . . . . . . . . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 . . . . . . . . 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property h Residential rental 27.5 yrs. MM S/L 01/23 82,121. 2,862. 27.5 yrs. S/L property MM 39 yrs. ММ S/L i Nonresidential real S/L property MM Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs. S/L **b** 12-year 30 yrs. ММ S/L c 30-year ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 . 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 2,862. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.