Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

Submission Identification Number (SID)			
Taxpayer's name	Social security	y number	
PARDHASARADHI REDDY VALLAPAREDDY	365-55-	-2586	
Spouse's name	Spouse's soci	ial security numbe	er
AKHITHA GADDAM	841-95-		
	year you ar	re authorizing	<u>.) </u>
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.		l . l	
1 Adjusted gross income			797.
 Total tax			,643.
4 Amount you want refunded to you		4	7,139.
5 Amount you owe			
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k		- 1	<u>,, 08 / . </u>
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejet for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indic payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requ business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment cereive confidential information necessary to answer inquiries and resolve issues related to the payersonal identification number (PIN) below is my signature for the income tax return (original or amended) I am Electronic Funds Withdrawal Consent.	e are the amounter, or electron of the trans. Treasury are to the trans at the trans to debit the the authorizatests must be processing of ayment. I furtile	ounts from the incomic return original ansmission, (b) to dissipated as preparation so entry to this accuration. To revoke a received no lat the electronic pher acknowledge.	acome tax ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the
Taxpayer's PIN: check one box only			
I authorize GLOBAL TAXES LLC to enter or generate no signature on the income tax return (original or amended) I am now authorizing.	· Ent	2 5 8 6 er five digits, but n't enter all zeros	as my
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.			
Your signature ► Date ► 02/	08/2024		
Spouse's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate not 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 if you are entering your own PIN and your return is filed using the Practitioner PIN method below.	Ent dor ow authorizir		
Spouse's signature ▶ Date ▶ 02/	08/2024		
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		6 0 8 2 rer all zeros	7 1
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Indicated IRS <i>e-file</i> Providers of IRS <i>e-file</i> Providers of Indicated IRS <i>e-file</i> Providers of IRS <i>e</i>	tting this retu	rn in accordance	I am now e with the
ERO's signature ▶ Date ▶			
ERO Must Retain This Form — See Instructions			

Don't Submit This Form to the IRS Unless Requested To Do So

Form 1040-V (2022) 2023 Page **2**

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V 2023**

▼ Detach Here and Mail With Your Payment and Return **▼**

Department of the Treasury Internal Revenue Service

2023

Form 1040-V Payment Voucher

► Use this voucher when making a payment with Form 1040.

► Do not staple this voucher or your payment to Form 1040.

Make your check or money order payable to the 'United States Treasury.'

► Write your social security number (SSN) on your check or money order.

Enter the amount of your payment

15,087.

REV 01/27/24 PRO

1555

PARDHASARADHI REDDY VALLAPAREDDY AKHITHA GADDAM 4101 S CUSTER RD 729 MCKINNEY TX 75070

INTERNAL REVENUE SERVICE P.O. BOX 1214 CHARLOTTE, NC 28201-1214

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

2023

OMB No. 1545-007

IRS Use Only-Do not write or staple in this space

For the year Jan	. 1-Dec	2. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20		See se	parate instr	uctions.
Your first name	and mi	iddle initial	Last na	ame					Your so	cial security	/ number
PARDHAS <i>A</i>	RADI	HI REDDY	 VALI	LAPAREDDY					365	55 25	586
		s first name and middle initial	Last na	ame						's social sec	
AKHITHA			GADI	DAM					841	95 65	539
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Apt. no.			ntial Electio	
4101 S C	CUSTE	ER RD					729		Check ł	here if you, o	or your
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	ite	ZIP code			if filing joint	•
MCKINNEY	7				T	ζ	75070			this fund. C ow will not o	
Foreign country	name			Foreign province/state/o	count	ty	Foreign postal	code		x or refund.	
										You	Spouse
Filing Status											
Check only	X	Married filing jointly (even if only or	ne had	income)							
one box.		Married filing separately (MFS)				☐ Qualifying	surviving spo	use	(QSS)		
	I f y	ou checked the MFS box, enter the	name o	of your spouse. If you	u che	ecked the HOH	l or QSS box,	ente	r the chi	ild's name i	f the
	qu	alifying person is a child but not you	ır deper	ndent:							
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	pavr	ment for prope	rtv or services	s): or	(b) sell.		
Assets		lange, or otherwise dispose of a digi	•				•			☐ Yes	⊠ No
Standard	Som	eone can claim:	penden	it	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or you	u were a dual-status a	alien	1					
A ac /Blindness		: Were born before January 2, 1	050 F	Are blind Spo	ouse	. D Was bor	n before Janu	10m/	1050	☐ Is blir	
			939 <u>[</u>				(4) Observe			ifies for (see i	
Dependents	•	instructions): irst name Last name		(2) Social security number	′	(3) Relationsh to you	ip (+) Officer		· · ·	i '	er dependents
If more than four	(1)	Last name		Harrison		10 you	0			Г	
dependents,								 			┪
see instructions	3										┪
and check here								$\frac{\square}{\square}$			╣
-	1a	Total amount from Form(s) W-2, be	ox 1 (se	 e instructions)				<u> </u>	. 1a	24	<u> </u>
Income	b	• • • • • • • • • • • • • • • • • • • •	•	•				•	. 1b		<u> </u>
Attach Form(s)	c	Household employee wages not reported on Form(s) W-2									
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	•	•				•	. 1d	_	
W-2G and	e	Taxable dependent care benefits f		, , , ,					. 1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene		•					. 1f		
If you did not	g	Wages from Form 8919, line 6.							. 1g		
get a Form	h	Other earned income (see instructi							. 1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	•			1i					
	z	Add lines to the seconds the							. 1z	24	5,797.
Attach Sch. B	2a	1	2a		b T	axable interest			. 2b		
if required.	За	Qualified dividends	3a		b C	Ordinary divider	nds		. 3b	,	
$\overline{}$	4a	IRA distributions	4a			axable amoun			. 4b	,	
Standard Deduction for—	5a	Pensions and annuities	5a		b T	axable amoun	t		. 5b	,	
Single or	6a	Social security benefits	6a		b T	axable amoun	t		. 6b		
Married filing separately,	С	If you elect to use the lump-sum e	lection	method, check here ((see	instructions)		. [
\$13,850	7	Capital gain or (loss). Attach Schee	dule D i	f required. If not requ	uired	, check here		. [7		
Married filing jointly or	8	Additional income from Schedule	1, l ine 1	0					. 8		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8.	This is your total inc	come	e			. 9	24	5 , 797.
\$27,700	10	Adjustments to income from Sche-	dule 1,	line 26					. 10	,	
Head of household,	11	Subtract line 10 from line 9. This is	your a	djusted gross incon	ne				. 11	24	5 , 797.
\$20,800 If you checked _T	12	Standard deduction or itemized	deduct	t ions (from Schedule	A)				. 12	: 2	7,700.
any box under	13	Qualified business income deducti	ion fron	n Form 8995 or Form	899	95-A			. 13	, [
Standard Deduction,	14	Add lines 12 and 13							. 14	. 2	7,700.
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our t	taxable incom	е		. 15	$ 2\overline{1}$	8,097.

Form 1040 (2020	3)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	39,143.
Credits	17	Amount from Schedule 2, lin	e3						17	
	18	Add lines 16 and 17							18	39,143.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812				19	
	20	Amount from Schedule 3, lin	e8						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	31,643.
	23	Other taxes, including self-e							23	0.
	24	Add lines 22 and 23. This is	your total tax						24	31,643.
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25a	17,	139.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c							25d	17 , 139.
If you have a	26	2023 estimated tax paymen	s and amount a	pplied from 20	022 return				26	
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28				
	29	American opportunity credit	from Form 8863	8, line 8 . .		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	e 15			31				
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits							32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	17,139.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amou	nt you ove	rpaid		34	
	35a	Amount of line 34 you want			3 is attached, che	ck here .		. \square	35a	
Direct deposit?	b									
See instructions.	d	Account number X X X X X X X X X								
	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	15 , 087.
	38	Estimated tax penalty (see in				38		583.		
Third Party		you want to allow another	•				4 0		i	₩.
Designee						Ш	Yes. Cor			⊠ No
		signee's me		Phone no.			numbe	al identifi r (PIN)	cation	
Sign	Un	der penalties of perjury, I declare t	nat I have examined	d this return and	accompanying sche	dules and s	atements,	and to th	e best	of my knowledge and
Here	be	lief, they are true, correct, and com	plete. Declaration of	of preparer (othe	r than taxpayer) is b	ased on all in	nformation	of which	prepare	er has any knowledge.
TICIC	Yo	Your signature		Date Your occupation				If the IRS sent you an Identity		
					T			Prote (see ii		IN, enter it here
Joint return? See instructions.		ouse's signature. If a joint return, I	acth must sign	Date	IT	ion				nt your spouse an
Keep a copy for		ouse's signature. If a joint return, i	otn must sign.	Date	Spouse's occupat	ION				ection PIN, enter it here
your records.				IT			(see in	nst.)		
	Ph	one no. (341) 336-450	8	Email address	VPSR07@GM	AIL.COM	11			
Paid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:
Preparer Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/05/	2024 E	02082	703	Self-employed
Use Only	Fir	m's name GLOBAL TA	XES LLC					Phone	e no. (678)965-9522
————	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816			Firm's	s EIN	84-3171965
										4040

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

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 Attachment Sequence No. **03**

Your social security number

365-55-2586

Department of the Treasury Internal Revenue Service

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

REDDY VALLAPAREDDY & AKHITHA GADDAM

Par	Nonrefundable Credits				
1	Foreign tax credit. Attach Form 1116 if required			1	
2	Credit for child and dependent care expenses from Form 244Form 2441		e 11. Attach	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	<u> </u>		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			
I	Amount on Form 8978, line 14. See instructions	6 I			
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 1 1040-NR, line 20	040, 	1040-SR, or	8	7,500.

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

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

Clean Vehicle Credits

OMB No. 1545-2137

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form8936 for instructions and the latest information. Attachment Sequence No. **69**

Name(s)	shown on return		dentifying i	numbe	er
PARI	HASARADHI REDDY VALLAPAREDDY & AKHITHA GADDAM		365-55	- 25	86
Notes	• Complete a separate Schedule A (Form 8936) for each clean vehicle placed i	n service during	the tax ye	ear.	
	• 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 245	,797.		
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			
e	Enter any amount from Form 4563, line 15	1e			
2	Add lines 1a through 1e			2	245,797.
- За	Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR	3a	· ·		213/13/1
b	Enter any income from Puerto Rico you excluded	3b			
c	Enter any amount from Form 2555, line 45	3c			
d	Enter any amount from Form 2555, line 50	3d			
e	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	245,797.
Part		<u> </u>		<u> </u>	Z4J, 191.
rait	Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than		000 if m	rrioc	l filing jointly or a
	qualifying surviving spouse; \$225,000 if head of household).	Ψ130,000 (Ψ300	,000 11 1116	arriec	i filling jointly of a
	Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936)			6	
6	New clean vehicle credit from partnerships and S corporations (see instructions)		_	7	
7 8	Business/investment use part of credit. Add lines 6 and 7. Partnerships and S corporations			<u>'</u>	
0	and report this amount on Schedule K. All others, report this amount on Form 380			8	
Part		o, raitiii, iiiic ry	• •	8	
Part	Note: You can't claim the Part III credit if Part I, line 5, is more than \$	150 000 (\$200 0	OO if mar	riod	filing inintly or o
	qualifying surviving spouse; \$225,000 if head of household).	150,000 (\$500,0	oo ii iiiai	ried	illing jointly or a
_					F 500
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	39,143.
11				11	
12	Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't of the gradit	ciaim the person			
40	part of the credit			12	39,143.
13	Personal use part of credit. Enter the smaller of line 9 or line 12 here and				F 500
Dord	1040), line 6f. If line 12 is smaller than line 9, see instructions			13	7,500.
Part		175 000 (#150 0)	00 :6	المحاد	Cilina inimali, and
	Note: You can't claim the Part IV credit if Part I, line 5, is more than \$	\$75,000 (\$150,00	oo it mar	riea	filing jointly or a
	qualifying surviving spouse; \$112,500 if head of household).				
14	Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936)			14	
15	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18		_	15	
16	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)			16	
17	Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't c			17	
18	Enter the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040),				
	smaller than line 14, see instructions			18	
Part					
19	Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936)		<u> </u>	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	s amount on Sch	nedule		

K. All others, report this amount on Form 3800, Part III, line 1aa

21

SCHEDULE A (Form 8936)

Clean Vehicle Credit Amount

OMB No. 1545-2137

2023

Attachment Sequence No. **69A**

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.

	DHASARADHI REDDY VALLAPAREDDY & AKHITHA GADDAM	365	-55-2586
Part	Vehicle Details		
1a	Year	_	2023
b	Make	TES	LA
С	Model	Mod	lel Y
2	Vehicle identification number (VIN) (see instructions) 7 S A Y G D E E 7	P	A 1 5 7 2 7 2
3	Enter date vehicle was placed in service (MM/DD/YYYY)	08/	21/2023
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 new clean vehicle placed in service during the tax y 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.	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	A	
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 to 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	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.
			

For Paperwork Reduction Act Notice, see the Form 8936 instructions. $\;\;$ BAA

REV 01/27/24 PRO

Schedule A (Form 8936) 2023

DO NOT FILE

chedu	le A (Form 8936) 2023		Page
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 Yes. No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a	_	
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.	- "	ed for resale.
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions. Yes. No.	ī	
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 resale.	appli	es. easing the vehicle from
С	Is 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	
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 of Form 8936

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