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

	5				
Submis	ssion Identification Number (SID)				
Taxpaye	r's name	Social secur	ity numl	ber	
SATH	HISH KUMAR PARTHASARATHY	512-77	-577	3	
Spouse's	s name	Spouse's so	cial sec	urity number	
Dowl	Tou Detrive Information Tou Very Ending December 21 0000 (Enter			4 h a wii a a	<u> </u>
Part	, ,	year you a	are au	tnorizing.)
	vhole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1 1	1 109	, 783.
	Total tax		2		,394.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,756.
	Amount you want refunded to you		4		,730. ,362.
	Amount you owe		5	3	, 502.
Part		eep a cor	by of y	our retu	rn)
my kno return (o to send for any Agent to paymen authoriz paymen busines taxes to persona Electror	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated for my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate att, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requires days prior to the payment (settlement) date. I also authorize the financial institutions involved in the particle of the payment (PIN) below is my signature for the income tax return (original or amended) I amount of the payment of the payment of the payment.	e are the ameter, or electrication of the table. Treasury a sated in the table the authorizests must be processing cayment. I full	nounts fronic retransmisted and its of tax preperson. The receipt the electron and the receipt the action.	from the inc turn original ssion, (b) the designated paration soff to this accor- To revoke (eved no late lectronic parack)	come tax tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 hyment of that the
Taxpa	yer's PIN: check one box only	7	5 .	7 7 3	
×		າv PIN 🗀		digits, but	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.			er all zeros	
	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 si	gnature ▶ Date ▶				
Snous	e's PIN: check one box only	_			
Opous	I authorize to enter or generate n	ov DINI			as my
	ERO firm name	_	nter five	digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros	
	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.				
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part I	Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9	6 0	8 2 7	1
		Don't en	ter all Ze	5105	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income tax ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Indianated IRS e-file	ting this ret	urn in a	accordance	
ERO's	signature ▶ Date ▶				
10 3	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To D	o So			

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



For the year Jan	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20		See se	parate ins	tructions.	
Your first name	and mi	iddle initial	Last na	ame					Your so	cial securi	ty number	
SATHISH	KUM	AR	PART	THASARATHY					512	77 5	5773	
		s first name and middle initial	Last na								curity number	
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Apt. no.		Preside	ntial Electi	ion Campaign	
976 WEST	MEAI	DE DR							Check here if you, or your			
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Stat	e	ZIP code			pouse if filing jointly, want \$3 o go to this fund. Checking a		
CHESTERE	FIELI	D			MO		63005	CO O O E			t change	
Foreign country	/ name			Foreign province/state/o	county	y	Foreign postal of	code	7			
										You	Spouse	
Filing Status	; X	Single				Head of he	ousehold (HO	H)				
Check only		Married filing jointly (even if only or	ne had	income)								
one box.		Married filing separately (MFS)				☐ Qualifying	surviving spo	use (C	QSS)			
	If y	ou checked the MFS box, enter the	name o	of your spouse. If you	u che	cked the HOH	l or QSS box,	enter	the ch	ild's name	if the	
	qu	alifying person is a child but not you	r deper	ndent:								
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	navm	nent for prope	rty or services	a): or (b) sell.			
Assets		lange, or otherwise dispose of a digi					-			☐ Yes	⊠ No	
Standard	Som	eone can claim: You as a de	penden	t Your spouse	e as a	a dependent						
Deduction		Spouse itemizes on a separate return	•	-		•						
A /DI' l		_						0	4050		P - d	
	•	Were born before January 2, 19	959 [T -	ouse:		n before Janu			∐ Is b		
Dependents				(2) Social security number	'	(3) Relationsh to you	ip (4) Check				e instructions): ther dependents	
If more	(1) [irst name Last name		number		to you	Offilia		, uit	Orealt for ot		
than four dependents,												
see instructions	s				-							
and check here	ı —				-							
-	10	Total amount from Form(s) W 2 h	ov 1 (oc	oo inatruationa)					10	1	<u> </u>	
Income	1a h	Total amount from Form(s) W-2, be	•	,					1a 1b		<u> </u>	
Attach Form(s)		b Household employee wages not reported on Form(s) W-2							10			
W-2 here. Also attach Forms	c d	Medicaid waiver payments not rep	•	•					10			
W-2G and	e	Taxable dependent care benefits f		, , , ,	iistiu	ctions)			1e			
1099-R if tax was withheld.	f	Employer-provided adoption bene		•					1f			
If you did not	g	Wages from Form 8919, line 6.							19			
get a Form	9 h	Other earned income (see instructi							1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	,			1i	i					
instructions.	Z	Add lines to through th				· · <u> </u>			1z	1:	24,967.	
Attach Sch. B		J	2a		b Ta	xable interest	· · ·		2b			
if required.	3a		3a	0.04		rdinary divider			3b		1,828.	
	4a		4a			axable amount			4b	,		
Standard Deduction for—	5a		5a			axable amount			5b	,		
Single or	6a	Social security benefits	ба			axable amount			6b	,		
Married filing separately,	С	If you elect to use the lump-sum el	lection	method, check here	(see i	nstructions)						
\$13,850	7	Capital gain or (loss). Attach Scheo	dule D i	f required. If not requ	ired,	check here		. \square	7			
 Married filing jointly or 	8	Additional income from Schedule							8		17,012.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	come				9		09,783.	
\$27,700	10	Adjustments to income from Schee	dule 1,	line 26					10	<u> </u>		
 Head of household, 	11	Subtract line 10 from line 9. This is	your a	djusted gross incon	ne				11	1	09,783.	
\$20,800 If you checked	12	Standard deduction or itemized	deduct	tions (from Schedule	A)				12		13,850.	
any box under	13	Qualified business income deducti	on fron	n Form 8995 or Form	8995	5-A			13		3.	
Standard Deduction,	14	Add lines 12 and 13							14		13,853.	
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our t a	axable incom	e		15	5	95,930.	

Form 1040 (202	3)								Page 2	
Tax and	16	Tax (see instructions). Check i	f any from Form	(s): 1 881	4 2 4972	3 🗌		16	16,394.	
Credits	17	Amount from Schedule 2, line	3					17		
	18	Add lines 16 and 17						18	16,394.	
	19	Child tax credit or credit for o	ther dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, line	8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18.						22	16,394.	
	23	Other taxes, including self-er	nployment tax,	from Schedule	e 2, line 21 .			23	0.	
	24	Add lines 22 and 23. This is y						24	16,394.	
Payments	25	Federal income tax withheld							,	
,	а	Form(s) W-2				25a 1	9,756			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c .						25d	19,756.	
If you have a	26	2023 estimated tax payments						26	,	
If you have a qualifying child,	27	Earned income credit (EIC) .		• •		27				
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credit f				29				
	30	Reserved for future use		•		30				
	31	Amount from Schedule 3, line				31				
	32	Add lines 27, 28, 29, and 31.					·	32		
	33	Add lines 25d, 26, and 32. Th	,		-			33	19,756.	
Refund	34	If line 33 is more than line 24						34	3,362.	
neiuliu	35a	Amount of line 34 you want r				•		35a	3,362.	
Direct deposit?	b	Routing number 0 2 1					Savings		,	
See instructions.	d	Account number 3 8 1				<u> </u>	,			
	36	Amount of line 34 you want a				36				
Amount	37	Subtract line 33 from line 24.				1 00 1				
You Owe	31	For details on how to pay, go						37		
	38	Estimated tax penalty (see in	_	-		38				
Third Party	Do	you want to allow another				See				
Designee		structions	•				Complete	below.	⋈ No	
•		signee's		Phone			sonal iden	tification		
	naı			no.			nber (PIN)			
Sign		der penalties of perjury, I declare th lief, they are true, correct, and comp								
Here				Date	Your occupation				nt you an Identity	
	10	ur signature		Date	Tour occupation				PIN, enter it here	
Joint return?				SOFTWARE ENGINEER				see inst.)		
See instructions.		ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occupat	ion			nt your spouse an	
Keep a copy for your records.							Identity Protection PIN, enter it here (see inst.)			
	Phone no. (201) 562-7724 Email address P.SATHISH.CS@GMAIL.COM									
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/18/2024	P0208	32703	Self-employed	
Preparer	Fin	m's name GLOBAL TAX	ES LLC			•			(678) 965-9522	
Use Only		m's address 245 ROONEY		NSWICK N	J 08816			n's EIN	84-3171965	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

SATHISH KUMAR PARTHASARATHY

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
512-77	-5773

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. Att		5	-17,012.
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 . Ente	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-17,012.

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-basis g			
	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)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
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)			
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			
J	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
Z	Other adjustments. List type and amount:			
0E	Total other adjustments. Add lines 24s through 24z		OF	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter he Form 1040, 1040-SR, or 1040-NR, line 10	iere and on	26	
	1 01111 1040, 1040-011, 01 1040-1111, 1111 0 10		20	

SCHEDULE B (Form 1040)

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074 Attachment Sequence No. **08**

Your social security number 512-77-5773

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

SATHISH KUMAR PARTHASARATHY

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

Part I	1	List name of payer. If any interest is from a seller-financed mortgage and the		Amo	unt
Interest		buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:			
(See instructions		The foot first. 7 libb, of ow that bayor o obolar oboarty harrison and dadress.			
and the Instructions for					
Form 1040,					
Note: If you					
received a					
Form 1099-INT, Form 1099-OID,			1		
or substitute statement from					
a brokerage firm,					
list the firm's name as the					
payer and enter the total interest					
shown on that					
form.					
	2	Add the amounts on line 1	2		
	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3		
	4	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b	4		
	Note:	If line 4 is over \$1,500, you must complete Part III.		Amo	unt
Part II	5	List name of payer: FIDELITY BROKERAGE SERVICES LLC			1,828.
Ordinary					
Dividends					
(See instructions					
and the Instructions for					
Form 1040, line 3b.)			5		
Note: If you			"		
received a					
Form 1099-DIV or substitute					
statement from a brokerage firm,					
list the firm's					
name as the payer and enter					
the ordinary dividends shown	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6		1,828.
on that form.		If line 6 is over \$1,500, you must complete Part III.			_,
Part III	You n	nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary d	lividen	nds; (b) had	a foreigi
Foreign		nt; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign			· ·
Accounts					Yes No
and Trusts	7a	At any time during 2023, did you have a financial interest in or signature authority	over a	financial	
Caution: If		account (such as a bank account, securities account, or brokerage account) locat			
required, failure to file FinCEN Form	0	country? See instructions			×
114 may result in substantial		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See Find			
penalties.		and its instructions for filing requirements and exceptions to those requirements.			
Additionally, you may be required	b	If you are required to file FinCEN Form 114, list the name(s) of the foreign country(
to file Form 8938,		financial account(s) is (are) located:			
Statement of Specified Foreign	_				
Financial Assets. See instructions.	8	During 2023, did you receive a distribution from, or were you the grantor of, or t foreign trust? If "Yes," you may have to file Form 3520. See instructions			×

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,

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

Name(s) shown on return Your social security number 512-77-5773 SATHISH KUMAR PARTHASARATHY Part I Income or Loss From Rental Real Estate and Royalties **Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . 1a Physical address of each property (street, city, state, ZIP code) GANDHI NAGAR CHENNAI TAMIL NADU IN 600054 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 600. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 1,725. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 1,000. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 3,810. 14 Repairs 3,269. 15 Supplies 15 16 16 Taxes 17 Utilities 17 4,831. 18 2,977. 18 Depreciation expense or depletion Other (list) 19 19 20 17,612. 20 Total expenses. Add lines 5 through 19 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 -17,012. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 17,012.) 600. Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 2,977. 23d Total of all amounts reported on line 18 for all properties 23e 17,612. Total of all amounts reported on line 20 for all properties 24 Income. Add positive amounts shown on line 21. Do not include any losses 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 17,012. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .

-17,012.

Form **8995**

Department of the Treasury

Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2023

Attachment Sequence No. **55**

Name(s) shown on return
SATHISH KUMAR PARTHASARATHY

Your taxpayer identification number 512-77-5773

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number		Qualified business ncome or (loss)
i				
ii			<u> </u>	
iii			₩	
i.,				
iv		+	+	
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v,			
-	column (c)	2		
3	Qualified business net (loss) carryforward from the prior year	3 (,	
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	4	
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)			
	(see instructions)	6 15.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior			
	year	7 (1	
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero			
	or less, enter -0	8 15.		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	3.
10	Qualified business income deduction before the income limitation. Add lines 5 and	1	10	3.
11	Taxable income before qualified business income deduction (see instructions)	11 95,933.	_	
12	Enter your net capital gain, if any, increased by any qualified dividends			
	(see instructions)	12 291.	-	
13	Subtract line 12 from line 11. If zero or less, enter -0	13 95,642.	-	10 100
14	Income limitation. Multiply line 13 by 20% (0.20)		14	19,128.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also		4.5	2
16	the applicable line of your return (see instructions)		15 16 (3.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		10 (0.
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a zero, enter -0		17 (0.
	2010, 011101 0	<u> </u>	1/ (0.

Form **4562**

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.

OMB No. 1545-0172 Attachment Sequence No. 179

Department of the Treasury Internal Revenue Service Name(s) shown on return Business or activity to which this form relates Identifying number SATHISH KUMAR PARTHASARATHY Sch E GANDHI NAGAR 512-77-5773 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. Total cost of section 179 property placed in service (see instructions) 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. SIL g 25-year property h Residential rental 27.5 yrs. MM S/L 01/23 85,421. 2,977. 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 2,977. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.