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

IIILEIIIAI F	levertue dei vice					
Submis	ssion Identification Number (SID)					
Taxpaye	r's name	Social secu	rity numl	 oer		
SANJ	EEV KIRAN MAHENDRAKAR	632-9	9-475	9		
Spouse's		Spouse's s			mber	
Part	, , ,	year you	are au	thoriz	ing.)	
	whole dollars only on lines 1 through 5.					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1 .	ı	0.5	016
	Adjusted gross income		1			016.
	Total tax		2			666.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			233.
	Amount you want refunded to you		5		<u> </u>	567.
Part		een a co		OUR r	eturi	n)
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)					
to send for any Agent to payment authoriz payment business taxes to persona	original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmismy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectley in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. in initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indiction of the financial 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 it, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisited days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment confidential information necessary to answer inquiries and resolve issues related to the path of the payment (PIN) below is my signature for the income tax return (original or amended) I are a financial misting or amended) I are a financial misting or amended.	ction of the S. Treasury cated in the n to debit the the authori lests must processing ayment. I fu	transmis and its tax prepare entry zation. To be receing of the elurther ac	ssion, (designation to this To revolved no ectronic sknowless:	(b) the ated Fin softwaccouple (capture) accouple (capture) ater ic payredge t	e reason inancial ware for int. This ancel) a than 2 ment of that the
	nic Funds Withdrawal Consent.					
	yer's PIN: check one box only	511	9 4 '	7 5	9	
X	I authorize GLOBAL TAXES LLC to enter or generate I	Ė	nter five		but	as my
	signature on the income tax return (original or amended) I am now authorizing.	C	lon't ente	r all ze	ros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am neif you are entering your own PIN and your return is filed using the Practitioner PIN methololow.					
Your si	gnature ▶ Date ▶					
Snous	e's PIN: check one box only					
Opous	I authorize to enter or generate	my DINI				as my
Ш	ERO firm name		inter five	digits.		as my
	signature on the income tax return (original or amended) I am now authorizing.		lon't ente	•		
	I will enter my PIN as my signature on the income tax return (original or amended) I am neif you are entering your own PIN and your return is filed using the Practitioner PIN metholow.		_			_
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part I	II Certification and Authentication — Practitioner PIN Method Only					
FRO'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	2 7	1
			nter all ze			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taked to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submenents of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Incompanies.	itting this re	turn in a	accorda	anće v	
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To D	o So				

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



£1040		artment of the Treasury—Internal Revenue Serv S. Individual Income Ta		turn	202	3	OMB No. 1545	-0074	IRS Use Only	∕—Do not v	vrite or sta	aple in this space.
For the year Jar	ı. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last n	name						Your so	ocial sec	curity number
SANJEEV	KIR	AN	MAH	ENDRA	KAR					632	99	4759
If joint return, s	pouse's	s first name and middle initial	Last n	ame						Spouse	's social	I security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				А	pt. no.	Preside	ential Ele	ection Campaigr
_10001 G	RADUZ	ATE LN						E		1		ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	elow.	Sta	ite	ZIP co	ode			jointly, want \$3 nd. Checking a
_CHARLOT'	ΓE					NC	7	282	62			not change
Foreign country	/ name			Foreign p	rovince/state/o	count	ty	Foreig	n postal code	your ta	x or refu	
Filing Status	; X	Single					Head of ho	ouseho	old (HOH)			
Check only		Married filing jointly (even if only o	ne had	l income)								
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name	of your s	spouse. If you	u che	ecked the HOH	l or QS	SS box, ente	er the ch	ild's na	me if the
	qu	alifying person is a child but not you	ır depe	endent:								
Digital		ny time during 2023, did you: (a) rec			d, award, or	payr	ment for prope	rty or s	services); or	(b) sell,		
Assets		nange, or otherwise dispose of a dig						t)? (Se	e instructio	ns.)	Y€	es 🗵 No
Standard Deduction		neone can claim:	•		•		a dependent					
Age/Blindnes	You	: Were born before January 2, 1	959	Are b	lind Spc	ouse	: Was bor	n befo	re January 2	2, 1959	☐ Is	s blind
Dependent	s (see	instructions):		(2)	Social security	,	(3) Relationsh	ip (4)	Check the b	ox if qual	ifies for ((see instructions)
If more		irst name Last name			number		to you		Child tax c	redit	Credit fo	or other dependents
than four												
dependents, see instruction												
and check	· 											
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instrud	ctions)					. 1a	3	113,344.
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2					. 1k)	
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							. 10	;		
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 10	i		
1099-R if tax	е	Taxable dependent care benefits t	rom Fo	orm 2441	, line 26					. 16	•	
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8	3839, line 29					. 11		
If you did not	g	Wages from Form 8919, line 6 .								. 10	3	
get a Form W-2, see	h	Other earned income (see instruct	,					, .		. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see ins	tructions))		<u>li</u>					
	z	Add lines 1a through 1h			· · · ·					. 12	_	113,344.
Attach Sch. B	2a	•	2a				axable interest			. 2t	_	
if required.	<u>3a</u>		3a				ordinary divider				_	
Standard	4a	-	4a				axable amount				_	
Deduction for—	5a	-	5a				axable amount				_	
 Single or Married filing 	6a	,	6a				axable amount	i		. 6t)	
separately,	C	If you elect to use the lump-sum e		•		•	,		L	╡ ├_		
\$13,850 • Married filing	7	Capital gain or (loss). Attach Sche		•	•		-			- 7 - 2	_	10 202
jointly or Qualifying	8	Additional income from Schedule								. 8		-18,328.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9		95,016.
\$27,700 • Head of	10	Adjustments to income from Sche								. 10		05 016
household, \$20,800	11	Subtract line 10 from line 9. This is	-	-	-					. 11	_	95,016.
If you checked	12	Standard deduction or itemized								. 12	_	13,850.
any box under Standard	13	Qualified business income deduct								. 13		12 050
Deduction, see instructions.	14									. 14		13,850.
	15	Subtract line 14 from line 11. If zer	o or le	ss, enter	-u ≀nis is y	our 1	laxable incom	е.		. 15)	81,166.

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	13,166.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	13,166.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne 8					20	7,500.
	21	Add lines 19 and 20						21	7,500.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	5,666.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	5,666.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a 1	7,233.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	17,233.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return			26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from	m 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, lir	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	17,233.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	11,567.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, che	ck here	🗆	35a	11,567.
Direct deposit?	b	Routing number 0 2 1			c Type: 🛛	Checking	Savings		
See instructions.	d	Account number 4 8 3	0 6 0 7	2 8 1 6	5 9				
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe					
You Owe		For details on how to pay, g	o to www.irs.gov	//Payments or	see instructions			37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party		you want to allow another	person to disc	cuss this retu	rn with the IRS?	_			
Designee	ins	structions				 Yes. C	omplete	below.	⋉ No
		signee's me		Phone no.			sonal ident ber (PIN)	ification	
Cian		ider penalties of perjury, I declare t	hat I have examined		accompanying sche			the hest	of my knowledge and
Sign		lief, they are true, correct, and com							, ,
Here	Yo	ur signature		Date	Your occupation		If th	e IRS se	nt you an Identity
		J							IN, enter it here
Joint return?					SOFTWARE 1		(see	inst.)	
See instructions. Keep a copy for your records.	Sp	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupat	ion	Ider		nt your spouse an ection PIN, enter it here
,		/215\505 505		F		2212001277		,	
		one no. (315)527-707		Email address	MSANJEEVKI	RAN@GMAIL.C			Chock if:
Paid		eparer's name	Preparer's signat		OHDER TRAFF	Date	PTIN	0700	Check if:
Preparer		M PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	02/29/2024	P0208		Self-employed
Use Only		m's name GLOBAL TA			T 00016		-		(678)965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816						Firm	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

SANJEEV KIRAN MAHENDRAKAR

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
632-99	-4759

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	ich Schedule E .	5	-18,328.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-18,328.

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

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN	· <u> </u>			
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h			
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect				
	tax law violations	24i		_	
j	Housing deduction from Form 2555	24j		-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	041			
	1041)	24k			
Z	Other adjustments. List type and amount:				
05		24z		0.5	
25 06	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10			06	
				26	
	BAA	REV 02/	16/24 PRO	Scnedu	ile 1 (Form 1040) 2023

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

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

2023

Attachment
Sequence No. 03

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

Your social security number 632-99-4759

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

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

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

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Your social security number

OMB No. 1545-0074

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

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

Attachment Sequence No. 13

SANG	JEEV KIRAN MAHENDRAKAR						632-9	9-4759	
Par									_
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use	Schedule	e C. See	instru	ctions. If you ar	e an indi	vidual, rep	ort farm
ΑΙ	Did you make any payments in 2023 that would require you	to file	Form(s)	1099? 5	See ins	structions		. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	es 🛛 No
	f "Yes," did you or will you file required Form(s) 1099?								
1a	Physical address of each property (street, city, state, ZII								
Α	FLAT NO 101, LAHARISATYAVIR NALLAKUNTA			ואַרעה	P A R A	D TELANCAI	NIA TINI	50004	2
B	FUAT NO 101, DAHAKIBATTAVIK NADDAKONTA	MAKI	KEI KD	11111111	KADA	D, IELIANGAI	INA III	30004	
C									
1b	Type of Property 2 For each rental real estate prope	erty list	ted		Fa	ir Rental	Persor	nal Use	
	(from list below) above, report the number of fair	rental	and			Days		ays	QJV
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to qualified joint venture. See instru			В					
С		JOLIOTIC	·	С					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren	ıtal	5 Land	-		Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (descri	be)		
						Propertie	s:		
Incon	ne:			Α		В			С
3	Rents received	3		6	80.				
4	Royalties received	4							
Expe		_							
5	Advertising	5		1 0	.				
6	Auto and travel (see instructions)	7		1,8	60.				
7 8	Cleaning and maintenance	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,5	30.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		4,9	60.				
15	Supplies	15		5,3	28.				
16	Taxes	16							
17	Utilities	17		5,5	72.				
18	Depreciation expense or depletion	18							
19 20	Other (list) Total expenses. Add lines 5 through 19	19		10 2	ΕΛ				
		20		19,2	50.				
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		-18,5	70.				
22	Deductible rental real estate loss after limitation, if any,			•					
	on Form 8582 (see instructions)	22	(18,32	28.)	()	()
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		680.		
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	19,	,250.		
24	Income. Add positive amounts shown on line 21. Do not		-				24	,	10 :
25	Losses. Add royalty losses from line 21 and rental real estat							(18,328.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this at						26		-18.328

8936

Clean Vehicle Credits

OMB No. 1545-2137 Attachmen

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Identifying number SANJEEV KIRAN MAHENDRAKAR 632-99-4759 Notes: • Complete a separate Schedule A (Form 8936) for each clean vehicle placed in service during the tax year. • Individuals completing Parts II, III, or IV, must also complete Part I. See "Note" text below. **Modified Adjusted Gross Income Amount** Part I 1a Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR 95,016. Enter any income from Puerto Rico you excluded 1b c Enter any amount from Form 2555, line 45 1c Enter any amount from Form 2555, line 50 1d Enter any amount from Form 4563, line 15 1e е 2 2 Add lines 1a through 1e 95,016. За Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR 3a Enter any income from Puerto Rico you excluded 3b Enter any amount from Form 2555, line 45 3с Enter any amount from Form 2555, line 50 3d Enter any amount from Form 4563, line 15 4 Enter the **smaller** of line 2 or line 4 5 95,016. Credit for Business/Investment Use Part of New Clean Vehicles Part II Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$150,000 (\$300,000 if married filing jointly or a qualifying surviving spouse; \$225,000 if head of household). Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936) . . . 6 6 0. 7 New clean vehicle credit from partnerships and S corporations (see instructions) 7 Business/investment use part of credit. Add lines 6 and 7. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1y . . . 8 0. Part III **Credit for Personal Use Part of New Clean Vehicles** Note: You can't claim the Part III credit if Part I, line 5, is more than \$150,000 (\$300,000 if married filing jointly or a qualifying surviving spouse; \$225,000 if head of household). 9 Enter the total credit amount figured in Part III of Schedule(s) A (Form 8936) . 9 7,500. 10 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18 . . . 10 13,166. Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions) 11 11 12 Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't claim the personal use 12 13,166. 13 Personal use part of credit. Enter the smaller of line 9 or line 12 here and on Schedule 3 (Form 13 7,500. Part IV Credit for Previously Owned Clean Vehicles Note: You can't claim the Part IV credit if Part I, line 5, is more than \$75,000 (\$150,000 if married filing jointly or a qualifying surviving spouse; \$112,500 if head of household). Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936) 14 14 15 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18 . . . 15 16 Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions) 16 Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't claim the Part IV credit 17 17 Enter the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040), line 6m. If line 17 is 18 18 **Credit for Qualified Commercial Clean Vehicles** Part V Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936) 19 19 20 Qualified commercial clean vehicle credit from partnerships and S corporations (see instructions) . 20 21 Add lines 19 and 20. Partnerships and S corporations, stop here and report this amount on Schedule

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SCHEDULE A (Form 8936)

Clean Vehicle Credit Amount

OMB No. 1545-2137

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.

SAN	JEEV KIRAN MAHENDRAKAR	632	-99-4759					
Part	Vehicle Details	'						
1a	Year		2023					
b	Make	TES	LA					
С	Model	MOD	EL Y					
2	Vehicle identification number (VIN) (see instructions) 7 S A Y G D E E 8	B P	F 7 0 9 1 3 7					
3	Enter date vehicle was placed in service (MM/DD/YYYY)	03/	06/2023					
4	Was the vehicle used primarily outside the United States? Answer "No" if it was but an exception applies. See instructions. ☐ Yes. Stop here. You can't claim a credit amount for a vehicle used primarily outside the United States. ☒ No.							
5	Does the VIN entered on line 2 belong to a new clean vehicle placed in service during the tax definitions. ☑ Yes. Go to Part II. ☐ No. Go to line 6.	year?	See instructions for					
6	Does the VIN entered on line 2 belong to a previously owned clean vehicle acquired after 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 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.		·					
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 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	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	e A (Form 8936) 2023		Page 2
Part			
13a	Is the sales price of the vehicle more than \$25,000?		
	Yes. Stop here. The vehicle doesn't qualify for the Part IV credit.		
	∐ No.		
b	Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehic	le fror	n another person.
	☐ Yes.		
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a	cquire	ed for resale.
С	Can you be claimed as a dependent on another person's tax return, such as your parent's return	rn?	
	☐ Yes. Stop here. You can't claim a credit amount if you can be claimed as a dependent.		
	□ No.		
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions.		
	☐ Yes.		
	☐ No.		
		[
14	Enter the sales price of the vehicle	14	
15	Multiply line 14 by 30% (0.30)	15	
16	Maximum vehicle credit amount	16	4,000.
10	Waximum vehicle credit amount	10	4,000.
17	Enter the smaller of line 15 or line 16. Stop here and include this credit amount on line		
	14 in Part IV of Form 8936	17	
Part	V Credit Amount for Qualified Commercial Clean Vehicle		
18a	Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exceentities discussed in the instructions applies. Yes. No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception		
b	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person. Yes. No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to resale.		_
С	Is the vehicle also powered by gas or diesel? See instructions. Yes. No.	ı	
19	Enter the cost or other basis of the vehicle. See instructions	19	
20	Section 179 expense deduction (see instructions)	20	
21	Subtract line 20 from line 19	21	
	M III I II OA I 450((0.45) [000((0.00) (1) I I I I I I I I I I I I I I I I I I I		
22	Multiply line 21 by 15% (0.15) [30% (0.30) if the answer on line 18c above is "No"]	22	
23	Enter the incremental cost of the vehicle. See instructions	23	
24	Enter the smaller of line 22 or line 23	24	
25	Maximum credit. Enter \$7,500 (\$40,000 if the vehicle's gross vehicle weight rating (GVWR) is 14,000 pounds or more)	25	
00	, ,		
26	Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V		

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Passive Activity Loss Limitations

See separate instructions.

Attach to Form 1040, 1040-SR, or 1041.

Attachment Sequence No. **858**

OMB No. 1545-1008

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8582 for instructions and the latest information

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Name(s)) shown on return				Ide	ntifying n	umber		
SANJ	JEEV KIRAN MAHENDRAKAR				63	32-99-	4759		
Par	t 2023 Passive Activity Los	SS			I				
	Caution: Complete Parts IV a		eting Part I.						
Donto	I Real Estate Activities With Active F			ivo porticipation a	oo Cnooi ol				
	ance for Rental Real Estate Activitie	• '		ive participation, s	ее эресіаі				
			,	1 1					
1a	Activities with net income (enter the	amount from Part I\	V, column (a)) .		0.				
b	Activities with net loss (enter the amo	ount from Part IV, c	olumn (b))	1b (18,570.)			
С	Prior years' unallowed losses (enter t	the amount from Pa	art IV, column (c))	1c ()			
d	Combine lines 1a, 1b, and 1c					1d	-18,570.		
All Otl	her Passive Activities								
2a	Activities with net income (enter the	amount from Part V	', column (a)) .	2a					
	Activities with net loss (enter the amo)			
С	Prior years' unallowed losses (enter t		,)			
d						2d			
3	Combine lines 1d and 2d and subtra				thic line in				
3									
	zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules								
	normally used	3	-18,570.						
	If line 3 is a loss and: • Line 1d is a						10,370.		
		loss (and line 1d is	zero or more) ski	in Part II and go to	line 10				
Cauti	on: If your filing status is married filing	•	•			o voor	do not complete		
	. Instead, go to line 10.	g separately and yo	od lived with your	spouse at any time	e during ti	ie yeai,	do not complete		
	t II Special Allowance for Re	ntal Real Estate	Activities With	Active Particina	ation				
ı aı	Note: Enter all numbers in Pa			-					
4	Enter the smaller of the loss on line			dono for all examp		4	18,570.		
5	Enter \$150,000. If married filing sepa			5 1	50,000.	-	10,570.		
6	Enter modified adjusted gross incom				13,344.	-			
U	Note: If line 6 is greater than or equa				13,344.				
	on line 9. Otherwise, go to line 7.	ai to line 5, skip line	is r and o and em	er -0-					
7	Subtract line 6 from line 5			7	26 656				
7					36,656.	\perp	10 200		
8	Multiply line 7 by 50% (0.50). Do not 6						18,328.		
9	Enter the smaller of line 4 or line 8. I	Tilne 3 includes any	y CRD, see instruc	tions		9	18,328.		
Part		10 1 1 11				10			
10	Add the income, if any, on lines 1a a					10	0.		
11	Total losses allowed from all passi						40		
	out how to report the losses on your					11	18,328.		
Part	Complete This Part Before	re Part I, Lines 1	a, 1b, and 1c. S	ee instructions.					
		Currer	nt year	Prior years	Ov	erall ga	in or loss		
	Name of activity	(a) Not income	(h) Not logs	(a) I la alla vua al					
		(a) Net income	(b) Net loss	(c) Unallowed	(d) Ga	in	(e) Loss		

N	Currer	nt year	Prior years	Overall gain or loss		
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss	
FLAT NO 101, LAHARISATYAVIR	0.	18,570.			18,570.	
Total. Enter on Part I, lines 1a, 1b, and 1c	0.	18,570.				
For Device and Device Process And Market Services					- OFOO ()	

Form 8582 (2023) Page **2**

										. 490 =	
Part V	Complete This Part Before	e P	art I, Lines 2	a, 2b,	and 2c. S	See instruc	tions.			•	
Name of activity			Currer		Prior years		Overall gain or loss				
		(a) Net income (line 2a)		(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss	
Total. Enter	on Part I, lines 2a, 2b, and 2c										
Part VI	Use This Part if an Amou	nt Is	s Shown on F	Part II,	Line 9. S	ee instruc	tions.				
	Name of activity	Form or schedule and line number to be reported on (see instructions)		(a) Loss		(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).	
FLAT NO	FLAT NO 101,LAHARISATYAVIR		E Ln 22		18,570.	1.00000000		18,328.		242.	
Total		18,570.		1.00		18,328.		242.			
Part VII	Allocation of Unallowed I	oss			S.						
	Name of activity		Form or sche and line nur to be reporte (see instruct	nber ed on	(a) Loss		(b) Ratio (c		(c)) Unallowed loss	
FLAT NO	LAT NO 101,LAHARISATYAVIR		E Ln 22		24		1.0000000			242.	
Total .						242.		1.00		242.	
Part VIII	Allowed Losses. See instr	ucti									
	Name of activity		Form or sche and line num to be reported (see instruction		(a) Loss		(b) Unallowed loss		((c) Allowed loss	
FLAT NO 101,LAHARISATYAVIR			E Ln 22		18,570.		242.			18,328.	
Total .						18,570.		242.		18,328.	