Form 8879
(Rev. January 2021)
Department of the Treesury

epartment 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.

Submission Identification Number (SID)

Taxpa	yer's name		Socia	al securit	ty numb	er			
SRA	SRAVANI KUMARI MULUMUDI 806-98-6308								
Spous	e's name	Spouse's social security number							
Par	t I Tax Return Information – Tax Year Ending December 31, 2023	(Enter	year	you a	re aut	horizing.)			
Enter	whole dollars only on lines 1 through 5.								
Note	: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.								
1	Adjusted gross income				1	71,615.			
2	Total tax				2	518.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099				3	12,233.			
4	Amount you want refunded to you				4	11,715.			
5	Amount you owe				5				
Par	Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)								

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL	TAXES		to enter or generate my PIN	
				ERO firm name		

8	6	3	0	8	
Ent don	as my				

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 authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

as mv Enter five digits, but

don't enter all zeros

ERO firm name 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 authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature 🕨	Date 🕨	
Practitioner PIN	lethod Returns Only—continue below	
Part III Certification and Authentication – I	ractitioner PIN Method Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by	rour five-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >	Date 🕨	
	ust Retain This Form — See Instructions his Form to the IRS Unless Requested To Do So	
For Denominant's Deduction Act Nation and vous to		Earm 8879 (Payr 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/04/24 PRO

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta)		turn	202	3	OMB No. 1545	-0074	IRS Use (Only—[Do not wr	ite or sta	ple in this sp	ace.
For the year Jar	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ding			, 20	S	See sep	arate i	nstructior	าร.
Your first name	and m	iddle initial	Last	name									urity numb	
SRAVANI				JUMUDI									6308	
		s first name and middle initial	Last							_			security n	umbei
-	-													
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	Apt. no.	P	resider	tial Ele	ction Cam	paign
6415 ESC	CENA	BLVD						3	3022	c	Check h	ere if y	ou, or you	r
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode				ointly, wai nd. Checki	
IRVING						TΣ	ζ	750	39		0		not change	0
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal co		our tax			
												∐ Yo	u 🗌 Sp	pouse
Filing Status	; 🗵	Single					Head of he	ouseh	old (HOH))				
Check only		Married filing jointly (even if only o	ne hao	d income)			_							
one box.		Married filing separately (MFS)					Qualifying		- .	•	,			
		you checked the MFS box, enter the			pouse. If you	u che	ecked the HOF	l or QS	SS box, e	nter t	the chil	d's na	me if the	
	qu	alifying person is a child but not you	ir aep	endent:										
Digital	At ar	ny time during 2023, did you: (a) rece	eive (a	is a rewar	d, award, or	payr	ment for prope	rty or :	services);	or (b) sell,			
Assets	exch	hange, or otherwise dispose of a dig	tal as	set (or a fi	nancial inter	est ir	n a digital asse	t)? (Se	ee instruc	tions	.)	×Υε	es 🗌 N	0
Standard	Som	leone can claim: 🗌 You as a de	pende	ent 🗌	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	1							
Age/Blindness	s You	: 🗌 Were born before January 2, 1	959	🗌 Are b	lind Spo	ouse	: 🗌 Was bor	n befc	ore Janua	ry 2, [.]	1959	🗌 ls	blind	
Dependent	s (see	instructions):		(2)	Social security	,	(3) Relationsh	ip (4) Check th	e box	if qualif	ies for (see instruc	tions):
If more	(1) First name Last name				number to you				Child tax cred			Credit fo	r other depe	ndents
than four														
dependents, see instructions														
and check	s 													
here														
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	see instruc	ctions) .					• •	1a		87,99	97.
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2							1b					
W-2 here. Also	C	Tip income not reported on line 1a	•		•					• •	1c			
attach Forms W-2G and	d		Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1d					
1099-R if tax	e	Taxable dependent care benefits f						• •		• •	1e			
was withheld. If you did not	f	Employer-provided adoption bene								• •	1f	-		
get a Form	g h	Wages from Form 8919, line 6 . Other earned income (see instruct				• •		• •		• •	1g 1h			0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,			• •	· · · · ·			•••				0.
instructions.	z	Add lines 1a through 1h		50 00000		• •					1z	1	87,99	97.
Attach Sch. B	 2a	Ŭ I	2a		· · · i	ь. • Т	axable interest	· ·			2b			
if required.	3a		3a		13.		Ordinary divider				3b			17.
	4a		4a				axable amount				4b			
Standard Deduction for –	5a	Pensions and annuities	5a			bТ	axable amount	t			5b			
 Single or 	6a	Social security benefits	6a			bΤ	axable amount	t			6b			
Married filing separately,	С	If you elect to use the lump-sum e	lectior	n method,	check here	(see	instructions)							
\$13,850 • Married filing	7	Capital gain or (loss). Attach Sche	dule D	if require	d. If not requ	uired	, check here				7			
jointly or	8	Additional income from Schedule									8		-16,39	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	and 8	3. This is y	our total in d	come	e				9		71,61	15.
\$27,700 • Head of	10	Adjustments to income from Sche									10			
household,	11	Subtract line 10 from line 9. This is	-	-	-					• •	11		71,61	
 \$20,800 If you checked [] 	12	Standard deduction or itemized								• •	12		13,8	50.
any box under Standard	13	Qualified business income deduct	on fro	m Form 8	995 or Form	ı 899	5-A			• •	13			
Deduction, see instructions.	14	Add lines 12 and 13	· ·	• • •	· · ·	• •		• •		• •	14		13,85	
	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-U This is y	our 1	taxable incom	ie .		•••	15		57,70	<u>, 25</u>

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Credits 17 Amount from Schedule 2, line 3 17 18 Add lines 16 and 17 19 20 Anount 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 or less, enter -0. 22 518. 23 Other tasse, including self-endyownent tax, from Schedule 2, line 21 23 0. 24 Add lines 22 and 23. This is your total tax 24 518. Payments 25 Federal lineome tax withheld from: 256 226 a Form(9) 109.2 2023 estimated tax payments and amount applied from 2022 return 266 261 20 Add lines 26 at through 250. 29 30 31 12, 233. 21 Add lines 26, 80, and 31. These are your total other payments and amount applied from 2022 return. 26 30 31 12, 233. 21 Add lines 26, 48, and 32. These are your total other payments and amount for Schedule 812 30 31 12, 233. 32 Add lines 26, 48, and 32. These are your total other payments and amount for Schedule 31, ine 15. 33 12, 2, 233. 33	Form 1040 (2023	3)								Page 2
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Amount You Owe 37 Subtract line 33 from line 24. This is the amount you owe. For details on how to pay, go to www.irs.gov/Payments or see instructions 38 38 Estimated tax penalty (see instructions) 38 Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. X No Designee's name Phone no. Personal identification number (PIN) Yes. Complete below. X No Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature Date Your occupation Sopure score						ed tax	36			
You Owe For details on how to pay, go to www.irs.gov/Payments or see instructions 37 38 Estimated tax penalty (see instructions) 38 Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. No Designee's name Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. No Sign Here Do you want to allow another person to discuss this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature Date Your occupation Your signature. If the IRS sent you an Identity Protection PIN, enter it here (see inst.) Spouse's signature. If a joint return, both must sign. Date Spouse's occupation If the IRS sent you spouse an Identity Protection PIN, enter it here (see inst.) Phone no. (307)247-3887 Email address MSK.SRAVS@GMAIL.COM Preparer's name Preparer's signature Date Pate PTIN Check if: (see inst.) Symu records. SYM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM SAGA GUPTA TALLAM O3/10	Amount									
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Paid Preparer Use Only Firm's name GLOBAL TAXES LLC Phone no. (678)965-9522 Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816		Ph	one no. (307)247-388	7	Email address	MSK.SRAVS	@GMAIL.COM			
Preparer SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/10/2024 P02082/03 Sein-employed Firm's name GLOBAL TAXES LLC Phone no. (678)965-9522 Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN 84-3171965	Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN	Cł	
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Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN 84-31/1965		Fir	m's name GLOBAL TA	XES LLC				Phone n	o. (67	8)965-9522
1010		Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816				
	Go to www.irs.go	ov/Form	n1040 for instructions and the late	st information.		BAA	REV 03/04/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury Internal Revenue Service

Additional Income and Adjustments to Income

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. 01 cial security number

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security n
SRAVANI KUMARI MULUMUDI	806-98-6308
	•

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. Attach Schedule E .	5	-16,399.
6	Farm income or (loss). Attach Schedule F.	6	
7	Unemployment compensation	7	
8	Other income:		
а	Net operating loss)	
b	Gambling		
С	Cancellation of debt	_	
d	Foreign earned income exclusion from Form 2555 . . . 8d)	
е	Income from Form 8853		
f	Income from Form 8889		
g	Alaska Permanent Fund dividends		
h	Jury duty pay		
i	Prizes and awards		
j	Activity not engaged in for profit income		
k	Stock options	_	
I	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)	_	
	Section 951(a) inclusion (see instructions)	_	
0	Section 951A(a) inclusion (see instructions)	_	
р	Section 461(I) excess business loss adjustment	_	
q	Taxable distributions from an ABLE account (see instructions) 8q Oak along his 9	_	
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		
	Pension or annuity from a nonqualifed deferred compensation plan or		
t	a nongovernmental section 457 plan		
	Wages earned while incarcerated Su	-	
u 7		-	
z	Other income. List type and amount: 8z		
9	Total other income. Add lines 8a through 8z	9	
9 10	Combine lines 1 through 7 and 9. This is your additional income . Enter here and on Form	-	
	1040, 1040-SR, or 1040-NR, line 8	10	-16,399.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		le 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	s 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			19a	
b	Recipient's SSN			
c	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:		20	
2-7 a	Jury duty pay (see instructions)			
a b	Deductible expenses related to income reported on line 8I from the			
D	rental of personal property engaged in for profit			
-	Nontaxable amount of the value of Olympic and Paralympic medals			
С	and USOC prize money reported on line 8m			
لم			-	
d			-	
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:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter			
	Form 1040, 1040-SR, or 1040-NR, line 10	<u> </u>	26	
	BAA REVO	03/04/24 PRO	Schedule 1 (F	orm 1040) 202

Additional Credits and Payments

OMB No. 1545-0074 2

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

	Attach to Form 1040, 1040-NR. Attach to Form 1040, 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.					Attachment Sequence No. 03
Name	cial s	security number				
SRA Par	98-6	308				
		fundable Credits				
1	U	credit. Attach Form 1116 if required			1	
2	Form 2441	Allach	2			
3	Education c	redits 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 effic	ient home improvement credit from Form 5695, line 32			5b	
6	Other nonre	fundable credits:				
а	General bus	siness credit. Attach Form 3800	6a			
b	Credit for p	rior year minimum tax. Attach Form 8801	6b			
С	Adoption cr	edit. Attach Form 8839...........	6c			
d	Credit for th	e elderly or disabled. Attach Schedule R	6d			
е	Reserved for	or future use	6e			
f	Clean vehic	le credit. Attach Form 8936	6f	7,500.		
g	Mortgage in	iterest credit. Attach Form 8396	6g			
h	District of C	olumbia first-time homebuyer credit. Attach Form 8859	6h			
i	Qualified ele	ectric vehicle credit. Attach Form 8834	6i			
j	Alternative f	uel vehicle refueling property credit. Attach Form 8911	6ј			
k	Credit to ho	Iders of tax credit bonds. Attach Form 8912	6k			
I	Amount on	Form 8978, line 14. See instructions	61			
m	Credit for p	reviously owned clean vehicles. Attach Form 8936 .	6m		-	
z	Other nonre	fundable credits. List type and amount:				
			6z			
7	Total other	nonrefundable credits. Add lines 6a through 6z			7	7,500.
8		through 4, 5a, 5b, and 7. Enter here and on Form 10		SR, or		
	1040-INR, III	ne 20		· · ·	8	7,500.
C					nun	ued on page 2)

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 3 (Form 1040) 2023

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	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	
	BAA REV	03/04/24 PRO	Schedu	ule 3 (Form 1040) 2023

SCHE					Supplemen							OMB N	o. 1545-0074	
						hips, S corporations, estates, trusts, REMICs, etc.)						2023		
							040-SR, 1040-NR, or 1041.					Attachment Sequence No. 13		
Internal Revenue Service Go to www.irs.gov/ScheduleE for instructions and the latest information. Name(s) shown on return Your social														
SRAVANI KUMARI MULUMUDI 806–98-									-					
	Part I Income or Loss From Rental Real Estate and Royalties													
T GI C	Note: If yo	ou are	in th	e busine	ess of ren	ting personal pro	operty, us		le C. See	e instru	ctions. If you	are an indi	vidual, rep	ort farm
Α														
B	f "Yes," did you	or w	ill yo	ou file re	equired F	⁵ orm(s) 1099?							. 🗌 Ye	es 🗌 No
1a	Physical add	ess c	of ea	ch prop	perty (str	eet, city, state,	, ZIP coo	le)						
Α	Physical address of each property (street, city, state, ZIP code) H.NO:3-15 POTTEPALEM AK NAGAR POST, NELLORE ANDHRA PRADESH IN 524004													
В											-			
С														
1b	Type of Prope	rty	2	For ea	ch renta	real estate pro	operty lis	sted		Fa	ir Rental	Persor	nal Use	QJV
	(from list below	N)		above,	, report t	he number of f	fair renta	l and			Days	Da	ays	QJV
Α	3					ays. Check the requirements			Α		365		0	
В						enture. See in:			В					
					,			-	С					
	of Property:			0	\/		D t t	5 1	-1	7				
	Single Family R Multi-Family Re			-	Comme	n/Short-Term F	Rental	5 Lan		-	Self-Rental			
		sider	ice	4	Comme	rcial		6 Roy	allies	0	Other (desc	(IDe)		
											Proper	ties:	1	
Incom									Α		В			C
3	Rents received						3			510.				
4	Royalties rece	ived					4							
Exper							5							
5 6	Advertising Auto and trave													
7	Cleaning and I								1 7	740.				
8	Commissions						8		- / /	10.				
9	Insurance .													
10	Legal and othe													
11	Management f	ees					11		1,4	160.				
12	Mortgage inter	rest p	baid t	to bank	s, etc. (s	ee instructions	· –							
13	Other interest						13							
14	Repairs									373.				
15	Supplies .								4,5	526.				
16	Taxes								1 0	010				
17 18	Utilities Depreciation e								4,8	310.				
19		-												
20	Other (list)	s Ad	d line	es 5 thr	ouah 19				16,9	909				
21	Subtract line 2				•				_0/2					
	result is a (loss													
	file Form 6198	<i>, , , , , , , , , ,</i>					21		-16,3	399.				
22	Deductible rer													
	on Form 8582							(16,39	-	()	(
23a	Total of all am		-				-			23a		510.		
b	Total of all am						-			23b				
C	Total of all am									23c				
d	Total of all am Total of all am									23d 23e	1	6,909.		
е 24	Income. Add							 Ide anv lø		236	T	. 24		
24 25	Losses. Add ro							-		nter to	ital losses he		(16,399.
26	Total rental re													_ , , , , , , , , , , , , , , , , , , ,
	here. If Parts													

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

Schedule E (Form 1040) 2023

-16,399.

26

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Clean	Vehicle	Credits
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OMB No. 1545-2137

Department of the Treasury	Attach to your tax return.		Attac	
nternal Revenue Service Name(s) shown on return	Go to www.irs.gov/Form8936 for instructions and the		Sequ ing number	ience No. 69
. ,			-98-630	0
SRAVANI KUMARI	a separate Schedule A (Form 8936) for each clean vehicle place			0
			x year.	
	completing Parts II, III, or IV, must also complete Part I. See "N	Note text below.		
	d Adjusted Gross Income Amount			
	unt from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NF		<u>·</u>	
	me from Puerto Rico you excluded		_	
	unt from Form 2555, line 45		_	
•	unt from Form 2555, line 50		_	
-	unt from Form 4563, line 15			
	nrough 1e		2	71,615
	unt from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NF		_	
-	me from Puerto Rico you excluded		_	
	unt from Form 2555, line 45		_	
	unt from Form 2555, line 50		_	
-	unt from Form 4563, line 15	· · ·		
	nrough 3e		4	
5 Enter the sma	ller of line 2 or line 4		5	71,615
	or Business/Investment Use Part of New Clean Vehic			
	lividuals can't claim a credit on line 6 if Part I, line 5, is more th g surviving spouse; \$225,000 if head of household).	nan \$150,000 (\$300,000 i	f married f	iling jointly or
6 Enter the total	credit amount figured in Part II of Schedule(s) A (Form 8936)		6	0
7 New clean veh	icle credit from partnerships and S corporations (see instruction	ns)	7	
	stment use part of credit. Add lines 6 and 7. Partnerships and			
	amount on Schedule K. All others, report this amount on Form	3800, Part III, line 1y	8	0
			U	0
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For Paperwork Reduction Act Notice, see separate instructions. BAA

Form **8936**

SCHEDULE A (Form 8936)

Clean Vehicle Credit Amount

OMB No. 1545-2137

(Forn	n 8936)			ののつろ
		Attach to your tax return.		ZULU
	nent of the Treasury Revenue Service	Go to www.irs.gov/Form8936 for instructions and the latest informat	ion.	Attachment Sequence No. 69A
	s) shown on return		Identif	ying number
SRA	VANI KUMARI	MULUMUDI	806	-98-6308
Par	Vehicle	Details	<u></u>	
1a	Year			2023
b	Make		TES	LA
С	Model		MOD	EL X
2	Vehicle identifi	cation number (VIN) (see instructions) $7 S A X C D E 5 3$	3 P	F409352
3	Enter date veh	icle was placed in service (MM/DD/YYYY)	08/	20/2023
4		e used primarily outside the United States? Answer "No" if it was but an exception here. You can't claim a credit amount for a vehicle used primarily outside the Un		
5	Does the VIN e definitions. X Yes. Go to No. Go to		year? S	See instructions for
6			2 and	placed in service during
7		entered on line 2 belong to a qualified commercial clean vehicle acquired after year? See instructions for definitions. Part V.	2022 a	and placed in service
		ere. You can't use this schedule to figure a credit amount for a vehicle not descr	ribed o	n line 5, 6, or 7.
Part	Credit A	mount for Business/Investment Use Part of New Clean Vehicle		
8	another person	e the vehicle for use or to lease to others, and not for resale? Answer "No" if you n. Here. You can't claim a credit amount for a vehicle you didn't acquire for use or to		
9	Tentative cred	it amount (see instructions)	9	7,500.
10	Business/inve	stment use percentage (see instructions)	10	%
11	entered 100%	by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you on line 10, stop here. Otherwise, go to Part III below	11	0.
Part	III Credit A	mount for Personal Use Part of New Clean Vehicle		
12	Subtract line 1 Part III of Form	1 from line 9 in Part II. Stop here and include this credit amount on line 9 in	12	7,500.
For Pa		ion Act Notice, see the Form 8936 instructions. BAA REV 03/04/24		Schedule A (Form 8936) 2023

Schedu	le A (Form 8936) 2023	Page 2						
Part	V Credit Amount for Previously Owned Clean Vehicle							
13a	Is the sales price of the vehicle more than \$25,000? Yes. Stop here. The vehicle doesn't qualify for the Part IV credit. No.							
b	Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehicle from another person. Yes.							
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a	cquired for resale.						
С	Can you be claimed as a dependent on another person's tax return, such as your parent's return? Yes. Stop here. You can't claim a credit amount if you can be claimed as a dependent. No.							
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions. Yes. No.							
14	Enter the sales price of the vehicle	14						
15	Multiply line 14 by 30% (0.30)	15						
16	Maximum vehicle credit amount	16 4,000.						
17	Enter the smaller of line 15 or line 16. Stop here and include this credit amount on line 14 in Part IV of Form 8936	17						
Part	V Credit Amount for Qualified Commercial Clean Vehicle							
18a b c	 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. Is the vehicle also powered by gas or diesel? See instructions. Yes. No. 	applies. are leasing the vehicle from						
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						
26	Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V of Form 8936	26						

Schedule A (Form 8936) 2023