Form <b>8879</b>
(Rev. January 2021)
Department of the Treesury

#### Department of the Treasury Internal Revenue Service

### **IRS e-file Signature Authorization**

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

T.....

Тахрау	ver's name		Social securi	ity numb	per
SAI	SINDHUJA R PANNALA		792-21	-453	1
Spouse	s's name	Spouse's soo	cial secu	urity number	
Par	t I Tax Return Information – Tax Year Ending December 31, 202	23 (Ente	r year you a	are aut	thorizing.)
Enter	whole dollars only on lines 1 through 5.		<u> </u>		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income			1	82,537.
2	Total tax			2	2,916.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	9,530.
4	Amount you want refunded to you			4	6,614.
5	Amount vou owe			5	

#### Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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

1	4	5	3	1	
Ent don	as my				

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.

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 s	ignature D	ate 🕨								
Practitioner PIN Method Returns Only—continue below										
Part III	Certification and Authentication – Practitioner PIN Method Only									
ERO's EFI	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 nter a	 	9	8	9

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 🕨	
ERO Don't Submi		
For Denerwork Reduction Act Nation and your	PEV/ 02/11/24 PPO	Earm 8879 (Pay 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/11/24 PRO

<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Ta</b> >		turn	202	3	OMB No. 1545	-0074	IRS Use Only	∕−Do not w	rite or st	aple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, enc	ling			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number
SAI SINDHUJA R PAN				NALA						792	21	4531
If joint return, spouse's first name and middle initial Last name										Spouse'	s socia	I security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	vpt. no.	Preside	ntial Ele	ection Campaigr
_7410 BEF												/ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co			0	jointly, want \$3 nd. Checking a
MAPLE GF						MN		553		box bel	ow will	not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your tax	_	_
		۹ <b>-</b>										ou Spouse
Filing Status		Single					Head of he	ouseh	old (HOH)			
Check only		Married filing jointly (even if only or Married filing concretely (MES)	ne nac	income)								
one box.	L If s	Married filing separately (MFS) you checked the MFS box, enter the	nomo	ofvouro	nouna lf voi	, oh	, ,		ring spouse	. ,	ld'o po	ma if the
		alifying person is a child but not you									iu s na	
Digital		ny time during 2023, did you: (a) rece	•				• •		,.			
Assets		hange, or otherwise dispose of a digi					-	et)? (Se	e instructio	ns.)	∐ Y	es 🛛 No
Standard	_	eone can claim: You as a de					a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	allen	1					
Age/Blindness	s You	: Were born before January 2, 1	959	Are b	lind <b>Spo</b>	ouse	: 🗌 Was bor	n befo	ore January	2, 1959		s blind
Dependents	<b>s</b> (see	instructions):		(2) \$	Social security	,	(3) Relationsh	ip <b>(4</b>		· · ·		(see instructions):
If more	<b>(1)</b> F	irst name Last name		number		to you		Child tax c	redit	Credit fo	or other dependents	
than four												<u> </u>
dependents, see instructions	s ——											<u> </u>
and check	ı —											
here	1	Total amount from Form(a) W( 2, b)	ov 1 /a		tions)					1		
Income	1a b	Total amount from Form(s) W-2, be Household employee wages not re			,					. 1a . 1b		90,037.
Attach Form(s)	c	Tip income not reported on line 1a			.,					. 1c		
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	•		-					. 1d		
W-2G and	e	Taxable dependent care benefits f			, ,					. 1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene								. 1f		
lf you did not	g	Wages from Form 8919, line 6 .								. 1g		
get a Form W-2, see	h	Other earned income (see instruction					<sub>.</sub> .			. 1h		0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			<b>1</b> i					
	z	Add lines 1a through 1h	• ;		· · ·					. 1z		98,637.
Attach Sch. B	<b>2</b> a	Tax-exempt interest	2a			bΤ	axable interest	t.		. 2b		
if required.	3a		3a				Ordinary divider			. <b>3</b> b		
Standard	4a		4a				axable amount			. 4b		
Deduction for –	5a		5a				axable amoun		· · ·	. 5b		
<ul> <li>Single or Married filing</li> </ul>	6a	, _	6a				axable amoun	t	· · ·	. 6b		
separately, \$13,850	c 7	If you elect to use the lump-sum e				•	,	• •	l			
<ul> <li>Married filing</li> </ul>	7 8	Capital gain or (loss). Attach Schedule						• •	l	7 . 8		-16,100.
jointly or Qualifying	8 9	Additional income from Schedule Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						• •		. 8 . 9		82,537.
surviving spouse, \$27,700	9 10	Add lines 12, 20, 30, 40, 50, 60, 7, Adjustments to income from Sche						• •		· 9		04,557.
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is								. 11		82,537.
\$20,800	12	Standard deduction or itemized	-	-	-					. 12		13,850.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deducti					5-A			. 13	-	,
Standard Deduction,	14									. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	our	taxable incom	ie .		. 15	-	68,687.
												10.10

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

Form **1040** (2023)

						Page 2
Tax and <sup>16</sup>	Tax (see instructions). Check if any from Form	(s): <b>1</b> 🗌 8814	<b>2</b> 4972	3	1	10,416.
Credits 17	Amount from Schedule 2, line 3				1	17
18	Add lines 16 and 17				1	10,416.
19	Child tax credit or credit for other dependen	ts from Schedu	ıle 8812		1	19
20	Amount from Schedule 3, line 8				2	<b>20</b> 7,500.
21	Add lines 19 and 20				2	<b>21</b> 7,500.
22	Subtract line 21 from line 18. If zero or less,	enter -0			2	2,916.
23	Other taxes, including self-employment tax,	from Schedule	2, line 21 .		2	23 0.
24	Add lines 22 and 23. This is your total tax				2	2,916.
Payments 25	Federal income tax withheld from:					
a	Form(s) W-2			<b>25a</b> 9	,530.	
b	Form(s) 1099			25b		
с	Other forms (see instructions)			25c		
d	Add lines 25a through 25c				2	<b>5d</b> 9,530.
If you have a 26	2023 estimated tax payments and amount a	pplied from 20	22 return		2	26
qualifying child, 27	Earned income credit (EIC)			27		
attach Sch. EIC. 28	Additional child tax credit from Schedule 8812	2		28		
29	American opportunity credit from Form 8863	3, line 8		29		
30	Reserved for future use	-		30		
31	Amount from Schedule 3, line 15			31		
32	Add lines 27, 28, 29, and 31. These are your			undable credits	3	32
33	Add lines 25d, 26, and 32. These are your to	-	-			<b>33</b> 9,530.
Refund 34	If line 33 is more than line 24, subtract line 2				-	6,614.
35a	Amount of line 34 you want refunded to you			, ,		<b>5a</b> 6,614.
Direct deposit? <b>b</b>	Routing number 0 5 1 0 0 0 0				Savings	
See instructions. d	Account number 4 3 5 0 3 5 8					
36	Amount of line 34 you want <b>applied to your</b>			36		
Amount 37	Subtract line 33 from line 24. This is the <b>am</b>					
You Owe	For details on how to pay, go to <i>www.irs.go</i>		see instructions .		3	37
38	Estimated tax penalty (see instructions) .			38		
	you want to allow another person to disc					
					mplete belo	ow. 🗙 No
-	signee's	Phone			nal identificat	
nar	ne	no.		numb	er (PIN)	
UIUII	der penalties of perjury, I declare that I have examine					, ,
Here	ef, they are true, correct, and complete. Declaration			ased on all informatio		
You	ir signature	Date	Your occupation			S sent you an Identity
Joint return?			SOFTWARE H	NGINFFR	(see inst.	on PIN, enter it here .)
	puse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat		If the IRS	S sent your spouse an
Keep a copy for		2410	opoulo o occupat			Protection PIN, enter it here
your records.					(see inst.	.)
Pho	one no. (757)773-2479	Email address	SINDHUJAREDDY.	PANNALA@GMAIL.CC	M	
Pre	parer's name Preparer's signat	ure		Date	PTIN	Check if:
Paid Proparar	ATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI	PAVAN KUM	AR DUDIPALLI		P0247083	33 Self-employed
Preparer Use Only	n's name GLOBAL TAXES LLC				Phone no	o. (678)965-9522
	n's address 245 ROONEY CT E BRU	NSWICK N	08816		Firm's El	IN 88-2145487
	1040 for instructions and the latest information.		BAA			Form <b>1040</b> (2023

SCHE	DULE	1
(Form	1040)	

## Additional Income and Adjustments to Income

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

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. <b>01</b>
Name(s) shown on Fo	Your soc	ial security number	
SAI SINDHUJA R	PANNALA	792-21	-4531

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-16,100.
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		
i	Activity not engaged in for profit income	8j	_	
k	Stock options	8k	-	
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	0		
	instructions)	8m 8n	-	
	Section 951(a) inclusion (see instructions)	80	-	
0	Section 461(I) excess business loss adjustment	8p	-	
p q	Taxable distributions from an ABLE account (see instructions)	8g	-	
ч r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
s I	Nontaxable amount of Medicaid waiver payments included on Form		-	
3	1040, line 1a or 1d	8s (		
t	Pension or annuity from a nonqualifed deferred compensation plan or		4	
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z				
-		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	here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-16,100.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedule	e 1 (Form 1040) 2023

Par	Adjustments to Income				
11	Educator expenses			. 11	
12	Certain business expenses of reservists, performing artists, and fee-	basis	aovernmer	nt 🗌	
	officials. Attach Form 2106			. 12	
13	Health savings account deduction. Attach Form 8889				
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				
18	Penalty on early withdrawal of savings				
19a	Alimony paid				1
b	Recipient's SSN				
с	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction				
21	Student loan interest deduction				
22	Reserved for future use				
23	Archer MSA deduction			. 23	
24	Other adjustments:				
a		24a			
	Deductible expenses related to income reported on line 8l from the				
		24b			
с	Nontaxable amount of the value of Olympic and Paralympic medals				
-		24c			
d		24d			
e	Repayment of supplemental unemployment benefits under the Trade				
•		24e			
f		24f			
g		24g		_	
<b>U</b>	Attorney fees and court costs for actions involving certain unlawful	- 3		_	
		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				
		24i			
i		24i			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k			
7	Other adjustments. List type and amount:				
-		24z			
25	Total other adjustments. Add lines 24a through 24z			. 25	1
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .				+
	Form 1040, 1040-SR, or 1040-NR, line 10				
	BAA		11/24 PRO		ule 1 (Form 1040) 202

Department of the Treasury

## **Additional Credits and Payments**

OMB No. 1545-0074 20

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

Department of the Treasury Internal Revenue Service         Go to www.irs.gov/Form1040 for instructions and the latest information.						Attachment Sequence No. <b>03</b>		
	. ,	orm 1040, 1040-SR, or 1040-NR				ecurity number		
Par	SINDHUJA H	fundable Credits		792-2	21-4	531		
1		credit. Attach Form 1116 if required			1			
2	U	child and dependent care expenses from Form 2441		Attach	-			
	Form 2441				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	6j					
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 1						
	1040-NR, lir	ne 20		L	8	7,500.		
				(CO	πτητ	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	-SR, or 1040-NR,	15	
	BAA REV	02/11/24 PRO	Schedu	ule 3 (Form 1040) 2023

(Form	form 1040) (From rental real estate, royalties, partner				ships, S corporations, estates, trusts, REMICs, etc.)					20 <b>7</b> 3			
Department of the Treasury Internal Revenue Service			Go t		ach to Form 1040, gov/ScheduleE fo	-				formation.		Attachm Sequence	nent ce No. 13
	shown on return										Your soci	al security i	
SAI	SINDHUJA R	PANI	NALA									1-4531	
Part	I Income	or Lo	oss Fron	n Rental	Real Estate an	nd Ro	valties						
	Note: If yo	ou are ir	n the busir	ness of renti	ng personal proper on page 2, line 40.			e C. See	e instru	ctions. If you	u are an indi <sup>,</sup>	vidual, repo	ort farm
Α	)id you make ar	ny payr	ments in 2	2023 that w	ould require you	to file	Form(s)	1099? 5	See ins	structions .		. 🗌 Ye	s 🛛 No
Bİ	f "Yes," did you	ı or will	l you file r	required Fo	orm(s) 1099? .							. 🗌 Ye	s 🗌 No
1a	Physical addr	ress of	f each pro	operty (stre	et, city, state, ZII	P cod	e)						
Α	UPPAL DEP	OT HY	YDERABA	AD TELAI	NGANA IN 500	0092							
B													
С													
1b	Type of Prope (from list below				real estate prope e number of fair				Fa	ir Rental Days	Persor	nal Use Ivs	QJV
Α	3	<i>,</i>			ys. Check the Q			Α		365		0	
B					requirements to f			B		505		Ű	
C			qualif	ied joint ve	enture. See instru	uctions	5.	C					
	of Property:	I						-	1				
	Single Family R	lesiden	nce 3	Vacation	/Short-Term Ren	ntal	5 Lanc	ł	7	Self-Renta	al		
	Multi-Family Re			Commer			6 Roya		8	Other (des	scribe)		
	j												
								-		Prope			-
Incom								A _	0.0	E	3		С
3	Rents received					3		5	20.				
	Royalties rece	ived .				4							
Exper						_							
5	-					5							
6	Auto and trave			-		6							
7	Cleaning and r					7		1,3	50.				
8	Commissions					8							
9	Insurance .					9							
10	Legal and othe	•				10			0.0				
11	Management f					11		⊥,⊥	20.				
12	Mortgage inter				,	12							
13	Other interest					13		4 77	0.0				
14	Repairs					14		4,7					
15						15		4,5	70.				
16 17						16 17		1 0	00.				
18	Depreciation e					18		ч,0	00.				
19	Othor (ligt)		•			19							
20	Total expenses					20		16,6	20				
21	•			•	r 4 (royalties). If	20		10,0	20.				
21		s), see	instructio		out if you must	21		-16,1	.00				
22	Deductible rer on <b>Form 8582</b>				mitation, if any,	22	(	16,10	00.)	(	)	(	
23a	Total of all am	ounts i	reported	on line 3 fo	or all rental prope	erties			23a		520.		
b	Total of all am	ounts i	reported	on line 4 fo	or all royalty prop	oerties			23b				
с	Total of all am	ounts i	reported	on line 12	for all properties				23c				
d	Total of all am	ounts i	reported	on line 18	for all properties				23d				
е	Total of all am	ounts i	reported	on line 20 <sup>.</sup>	for all properties				23e	1	6,620.		
24	Income. Add	positiv	e amount	ts shown o	n line 21. <b>Do no</b> t	<b>t</b> inclu	de any lo	sses			. 24		
25	Losses Add ro	valty lo	osses fron	n line 21 an	d rental real estat	e loss	es from lin	e 22 F	nter to	tal losses h	ere <b>25</b>	( -	16.100

Supplemental Income and Loss

25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here
 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 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 .

-16,100.

26

OMB No. 1545-0074

SCHEDULE E

Clean V	/ehicle	<b>Credits</b>
---------	---------	----------------

Form **8936** 

	ent of the Treasury	Attach to your tax return.					2 Attachi	0 <b>23</b>
	evenue Service	Go to www.irs.gov/Form8936 for instructions and the late	est info	ormatio		ifying nun		nce No. 69
. ,	shown on return							
	SINDHUJA R					2-21-4		
iotes:	•	a separate Schedule A (Form 8936) for each clean vehicle placed			•	tax year	•	
Dout		completing Parts II, III, or IV, must also complete Part I. See "Not	te" text	Delo	Ν.			
Part		d Adjusted Gross Income Amount				_		
		unt from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR	1a		82,53	7.		
	•	me from Puerto Rico you excluded	1b					
	•	unt from Form 2555, line 45	1c					
	-	unt from Form 2555, line 50	1d					
	•	unt from Form 4563, line 15	1e			_		
		nrough 1e	· · ·	· ·		. 2	-	82,537
		unt from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR	3a			_		
		me from Puerto Rico you excluded	3b			_		
	•	unt from Form 2555, line 45	3c			_		
	•	unt from Form 2555, line 50	3d			_		
	•	unt from Form 4563, line 15	3e					
		nrough 3e				. 4		
5 Part I	Enter the sma	Iler of line 2 or line 4				. 5		82,537
	Enter the total	surviving spouse; \$225,000 if head of household). credit amount figured in Part II of Schedule(s) A (Form 8936) .				. 6		C
7	New clean yeb							
		icle credit from partnerships and S corporations (see instructions)						
8	Business/inve	stment use part of credit. Add lines 6 and 7. Partnerships and S	corpora	ations	, stop he			
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8	Business/inve and report this Credit for	stment use part of credit. Add lines 6 and 7. Partnerships and S amount on Schedule K. All others, report this amount on Form 380 or Personal Use Part of New Clean Vehicles	corpora 00, Parl	ations t III, lir	, stop he ne 1y .	re . 8		0
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### SCHEDULE A (Form 8936)

## **Clean Vehicle Credit Amount**

Attach to your tax return
---------------------------

(Forn	n 8936)			20 <b>2</b> 3	
Department of the Treasury Internal Revenue Service		Attach to your tax return. Go to <i>www.irs.gov/Form</i> 8936 for instructions and the latest informati	Attachment Sequence No. 694	4	
Name(s) shown on return			Identif	fying number	
SAI	SINDHUJA F		792	-21-4531	
Par	Vehicle	Details			
1a	Year			2023	
b	Make		TES	LA	
с	Model		3		
2	Vehicle identif	cation number (VIN) (see instructions) 5 Y J 3 E 1 E A X	ΥP	F 4 9 3 1 3	7
3	Enter date veh	icle was placed in service (MM/DD/YYYY)	03/	16/2023	
4		e used primarily outside the United States? Answer "No" if it was but an exception <b>here.</b> You can't claim a credit amount for a vehicle used primarily outside the Un			
5	Does the VIN e definitions. X <b>Yes.</b> Go to <b>No.</b> Go to		year? S	See instructions for	
6			2 and	placed in service durin	g
7	during the tax				
		nere. You can't use this schedule to figure a credit amount for a vehicle not descr	ribed o	on line 5, 6, or 7.	
Part	Credit A	Mount for Business/Investment Use Part of New Clean Vehicle			
8	another person	re the vehicle for use or to lease to others, and not for resale? Answer "No" if you n. nere. You can't claim a credit amount for a vehicle you didn't acquire for use or to		-	for
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	Amount 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 9936	12	7,500.	
For Pa		ion Act Notice, see the Form 8936 instructions. BAA REV 02/11/24 R	L L	Schedule A (Form 8936) 2	

Schedu	le A (Form 8936) 2023	Page <b>2</b>				
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.	'n?				
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	<b>16</b> 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	<ul> <li>Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exceentities discussed in the instructions applies.</li> <li>Yes.</li> <li>No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception</li> <li>Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person.</li> <li>Yes.</li> <li>No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to resale.</li> <li>Is the vehicle also powered by gas or diesel? See instructions.</li> <li>Yes.</li> <li>No.</li> </ul>	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

# DEPARTMENT OF REVENUE

## **2023 Form M1, Individual Income Tax** Do not use staples on anything you submit.



	SINDHUJA R	PANNALA Last Name		792214531 Your Social Security Number	04131 Your Date of	995 Birth (MM/DD/YYYY)
If a Joint	Return, Spouse's First Name and Initial	Spouse's Last Name		Spouse's Social Security Number	Spouse's Dat	e of Birth
	) BERKSHIRE WAY N Home Address			Check if Address is:	New	Foreign
	LE GROVE			<u>MN</u> State	<u>55311</u> ZIP Code	
2023	B Federal Filing Status (pla	ce an X in one	box):			
<b>X</b> (1)	) Single (2) Married Filing Jointly	(3) Married Filing Separat Spouse Name Spouse SSN		(4) Head of Household	(5) Qualifying	Surviving Spouse
	E Elections Campaign Fun \$5 to this fund, enter the code for the party of yo		idates for state offices pay c	ampaign expenses. This will not ir	icrease your tax	or reduce your refund
	Political Party Co			irassroots/Legalize Cannabis 14		
Your Cod	le Spouse's Code	Democrat	tic/Farmer-Labor 12 L	ibertarian	General Campa	ign Fund 99
From	n Your Federal Return (see	instructions)				
	98637	0		0	68687	7
A. Wage		ns, and annuities	C. Unemployment	D. Fee	leral taxable inco	
1	Federal adjusted gross income (from lin	ne 11 of federal Form 1	1040 and 1040-SR)		1	82537
2	Additions to income from line 10 of Sch	edule M1M and line 9	of Schedule M1MB (see	e instructions)	2	
3	Add lines 1 and 2				3	82537
4	Itemized deductions (from Schedule M.	1SA) or your <b>standard</b>	deduction (see instruct	tions)	4	13825
5	Exemptions (from Schedule M1DQC)				5	
6	State income tax refund from line 1 of f	ederal Schedule 1			6	
7	Subtractions from line 35 of Schedule N	11M and line 21 of Sch	edule M1MB (see instru	uctions)	7	
8	Total subtractions. Add lines 4 through	7			8	13825
9	Minnesota taxable income. Subtract lir	ne 8 from line 3. If zero	or less, leave blank		9	68712
10	Tax from the table or schedules in the F	orm M1 instructions .			10	4239
11	Alternative minimum tax (enclose Sched	dule M1MT)			11 🔳	
12	Add lines 10 and 11				12	4239
13	Full-year residents: Enter the amount for         Part-year residents and nonresidents: F         line 13, from line 28 on line 13a, and from         13a       0         13b	rom Schedule M1NR, e	nter the amount from l enclose Schedule M1N	ine 32 on	13	4239

2023 M1, page 2



14	Other taxes, such as recapture amounts and the tax on lump-sum distributions (check appropriate boxes)		
	(a) Schedule M1HOME (b) Schedule M1529 (c) Schedule M1LS	14	
15	Tax before credits. Add lines 13 and 14	15 _	4239
16	Amount from line 21 of Schedule M1C, Nonrefundable Credits (enclose Schedule M1C)	16 🔳 _	
17 18	Subtract line 16 from line 15 ( <i>if result is zero or less, leave blank</i> ) Nongame Wildlife Fund contribution ( <i>see instructions</i> )	17 _	4239
	This will reduce your refund or increase the amount you owe	18 🔳 _	
19	Add lines 17 and 18	.19 _	4239
20	Minnesota income tax withheld. Complete and enclose Schedule M1W to report		
	Minnesota withholding from Forms W-2, 1099, and W-2G and Schedules KPI, KS, and KF	20 🔳 _	5186
21	Minnesota estimated tax and extension payments made for 2023	21	
22	Amount from line 11 of Schedule M1REF, Refundable Credits (see instructions; enclose Schedule M1REF)	22 🔳 _	
23	Total payments. Add lines 20 through 22	23 _	5186
24	<b>REFUND</b> . If line 23 is more than line 19, subtract line 19 from line 23 <i>(see instructions)</i> .	24	947
	For direct deposit, complete line 25	24 🗖 _	
25	Direct deposit of your refund (you must use an account not associated with a foreign bank): Checking Savings 051000017 435035876531		
	Routing Number Account Number		
26 27	<b>AMOUNT YOU OWE</b> . If line 19 is more than line 23, subtract line 23 from line 19 ( <i>see instructions</i> ) Penalty amount from Schedule M15 ( <i>see instructions</i> ). Also subtract	26	
27	this amount from line 24 or add it to line 26 (enclose Schedule M15)	27 🗖 _	
28	Penalty and interest (see instructions)	28	
IF Y	DU PAY ESTIMATED TAX and want part of your refund credited to estimated tax, complete lines 29 and 30.		
29	Amount from line 24 you want sent to you	29 🔳 _	
30	Amount from line 24 you want applied to your 2024 estimated tax	30 🔳 _	
Гахра	ever(s): I declare that this return is correct and complete to the best of my knowledge and belief.		

Your Signature	Spouse's Signature (If Filing Jointly) Date (MM/DD/YYYY)					
7577732479	SINDHUJAREDDY.PANNALA@GMAIL.COM					
Daytime Phone	Email Address					
VENKATA SAI PAVAN KUMAR DUDIPALLI		P02470833				
Paid Preparer's Signature	Date (MM/DD/YYYY)	PTIN or VITA/TCE # (required)				
6789659522	syam@qtaxfile.com					
Preparer's Daytime Phone	Preparer's Email Address					
I do not want my paid preparer to file my return electronically.	I authorize the Minnesota Department of Revenue to discuss this tax return with the preparer or the third-party designee indicated on my federal return.					

Include a copy of your 2023 federal return and schedules. Mail to: Minnesota Individual Income Tax, Mail Station 0010, 600 N. Robert St., St. Paul, MN 55146-0010

## DEPARTMENT OF REVENUE



## 2023 Schedule M1W, Minnesota Income Tax Withheld

Complete this schedule to report Minnesota income tax withheld. Include this schedule when you file your return.

SAI SINDHUJA R	PANNALA	792214531
Your First Name and Initial	Last Name	Your Social Security Number
If a Joint Return, Spouse's First Name and Initial	Spouse's Last Name	Spouse's Social Security Number

If you received a federal Form W-2, 1099, W-2G, 1042-S, or Minnesota Schedule KPI, KS, or KF showing Minnesota income tax withheld, complete this schedule to determine line 20 of Form M1. List only the forms that report Minnesota income tax withheld. Round dollar amounts to the nearest whole dollar. You must include this schedule when you file your return. DO NOT send in your Forms W-2, 1099, or W-2G; keep them with your tax records. All instructions are included on this schedule.

1 Minnesota wages and Minnesota tax withheld on Forms W-2, other than from Forms W-2G. If you have more than five Forms W-2, complete line 5 on the back.

Α	B—Box 13	C—Box 15	D—Box 16	E—Box 17
If the Form W-2 is for:	If Retirement Plan	Employer's seven-digit Minnesota	State wages, tips, etc.	Minnesota tax withheld
<ul> <li>you, enter 1</li> </ul>	box is checked,	Tax ID Number	(round to nearest whole dollar)	(round to nearest whole dollar)
• spouse, enter 2	mark an X below.			
<sub>a1</sub> 1	b1	<sub>1 MN</sub> 7672576	d1 98637	e15186
a2	b2	c2 MN	d2	e2
	~			
a3	b3	c3 MN	d3	e3
				e3
a4	b4	c4 MN	d4	e4
u+			u	64
а5	b5	c5 MN	d5	e5
a5			us	es
		// F		
Subtotal for additio	nai Forms W-2 (fror	n line 5 on page 2)		•••
Tabalant				1 5186
lotal Minnesota ta	x withheld on all Fo	orms W-2 (add amounts in line 1, co	lumn E)	15160
Minnesota tax with	held on Forms 1099	), W-2G, and 1042-S. If you have mo	re than four forms, complete line	6 on the back.
А		В	С	D
If the Form 1099, W-20	6, or 1042-S is for:	Payer's seven-digit Minnesota Tax ID	Income amount (see the table on	Minnesota tax withheld
• you, enter 1		Number (if unknown, contact the pay	ver) the back for amounts to include)	(round to nearest whole dollar
• spouse, enter 2				
a1		b1 MN	c1	d1
a2		62 MN	c2	d2
a3		ьз MN	c3	d3
a4		64 MN	c4	d4
u+				u4
Subtatal for additio	nal 1000 W 26 an	d 1042-S (from line 6 on page 2)		
	nai 1099, w-20, an	a 1042-3 (jronn nne o on page 2)		
Total Minnossta ta		100 W 20 and 1042 5 (add amount	ts in line 2 column D	2
iotal winnesota ta	x withheid on all 10	<b>)99, W-2G, and 1042-S</b> (add amoun		<b>4 —</b>
Total Minnacata ta	withhold by partr	orching Scorporations and fiduci	arias	
		erships, S corporations, and fiducia		
				3
		on lines 1, 2, and 3.		
Enter the total here	and on line 20 of F	orm M1		4 5186
		Include this schedule wit	•	
		If required, include Schedu		
REV 02/0	8/24 PRO	103	1	r

<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Ta</b> >		turn	202	3	OMB No. 1545	-0074	IRS Use Only	∕−Do not w	rite or st	aple in this space.	
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, enc	ling			, 20	See se	See separate instructions.		
Your first name	and m	iddle initial	Last r	name						Your so	Your social security number		
SAI SINI	DHUJ	AR PANNALA 7							792	21	4531		
If joint return, s	pouse's	's first name and middle initial Last name Spo							Spouse'	s socia	I security numbe		
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	vpt. no.	Preside	ntial Ele	ection Campaigr	
_7410 BEF												/ou, or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co			0	jointly, want \$3 nd. Checking a	
MAPLE GF						MN		553		box bel	ow will	not change	
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your tax	_	_	
		۹ <b>-</b>										ou Spouse	
Filing Status		Single					Head of he	ouseh	old (HOH)				
Check only		Married filing jointly (even if only or Married filing concretely (MES)	ne nac	income)									
one box.	L If s	Married filing separately (MFS) you checked the MFS box, enter the	nomo	ofvouro	nouna lf voi	, oh	, ,		ring spouse	. ,	ld'o po	ma if the	
		alifying person is a child but not you									iu s na		
Digital		ny time during 2023, did you: (a) rece	•				• •		,.				
Assets		hange, or otherwise dispose of a digi		· _			-	et)? (Se	e instructio	ns.)	∐ Y	es 🛛 No	
Standard	_	eone can claim: You as a de					a dependent						
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	allen	1						
Age/Blindness	s You	: Were born before January 2, 1	959	Are b	lind <b>Spo</b>	ouse	: 🗌 Was bor	n befo	ore January	2, 1959		s blind	
Dependents	<b>s</b> (see	instructions):		(2) \$	Social security	,	(3) Relationsh	ip <b>(4</b>		· · ·		(see instructions):	
If more	<b>(1)</b> F	irst name Last name			number		to you		Child tax c	redit	Credit fo	or other dependents	
than four												<u> </u>	
dependents, see instructions	s ——											<u> </u>	
and check	ı —												
here	1	Total amount from Form(a) W( 2, b)	ov 1 /o		tions)					1			
Income	1a b	Total amount from Form(s) W-2, be Household employee wages not re			,					. 1a . 1b		90,037.	
Attach Form(s)	c	Tip income not reported on line 1a			.,					. 1c			
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	•		-					. 1d			
W-2G and	e	Taxable dependent care benefits f			, ,					. 1e			
1099-R if tax was withheld.	f	Employer-provided adoption bene								. 1f			
lf you did not	g	Wages from Form 8919, line 6 .								. 1g			
get a Form W-2, see	h	Other earned income (see instruction					<sub>.</sub> .			. 1h		0.	
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			<b>1</b> i						
	z	Add lines 1a through 1h	• ;		· · ·					. 1z		98,637.	
Attach Sch. B	<b>2</b> a	Tax-exempt interest	2a			bΤ	axable interest	t.		. 2b			
if required.	3a		3a				Ordinary divider			. <b>3</b> b			
Standard	4a		4a				axable amount			. 4b			
Deduction for –	5a		5a				axable amoun		· · ·	. 5b			
<ul> <li>Single or Married filing</li> </ul>	6a	, _	6a				axable amoun	t	· · ·	. 6b			
separately, \$13,850	c 7	If you elect to use the lump-sum e				•	,	• •	l				
<ul> <li>Married filing</li> </ul>	7 8	Capital gain or (loss). Attach Schedule						• •	l	7 . 8		-16,100.	
jointly or Qualifying	8 9	Additional income from Schedule Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						• •		. 8 . 9		82,537.	
surviving spouse, \$27,700	9 10	Add lines 12, 20, 30, 40, 50, 60, 7, Adjustments to income from Sche						• •		· 9		04,557.	
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is								. 11		82,537.	
\$20,800	12	Standard deduction or itemized	-	-	-					. 12		13,850.	
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deducti					5-A			. 13	-	,	
Standard Deduction,	14									. 14		13,850.	
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	our	taxable incom	ie .		. 15	-	68,687.	
												10.10	

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

Form **1040** (2023)

						Page 2
Tax and <sup>16</sup>	Tax (see instructions). Check if any from Form	(s): <b>1</b> 🗌 8814	<b>2</b> 4972	3	1	10,416.
Credits 17	Amount from Schedule 2, line 3				1	17
18	Add lines 16 and 17				1	10,416.
19	Child tax credit or credit for other dependen	ts from Schedu	ıle 8812		1	19
20	Amount from Schedule 3, line 8				2	<b>20</b> 7,500.
21	Add lines 19 and 20				2	<b>21</b> 7,500.
22	Subtract line 21 from line 18. If zero or less,	enter -0			2	2,916.
23	Other taxes, including self-employment tax,	from Schedule	2, line 21 .		2	23 0.
24	Add lines 22 and 23. This is your total tax				2	2,916.
Payments 25	Federal income tax withheld from:					
a	Form(s) W-2			<b>25a</b> 9	,530.	
b	Form(s) 1099			25b		
с	Other forms (see instructions)			25c		
d	Add lines 25a through 25c				2	<b>5d</b> 9,530.
If you have a 26	2023 estimated tax payments and amount a	pplied from 20	22 return		2	26
qualifying child, 27	Earned income credit (EIC)			27		
attach Sch. EIC. 28	Additional child tax credit from Schedule 8812	2		28		
29	American opportunity credit from Form 8863	3, line 8		29		
30	Reserved for future use	-		30		
31	Amount from Schedule 3, line 15			31		
32	Add lines 27, 28, 29, and 31. These are your			undable credits	3	32
33	Add lines 25d, 26, and 32. These are your to	-	-			<b>33</b> 9,530.
Refund 34	If line 33 is more than line 24, subtract line 2				-	6,614.
35a	Amount of line 34 you want refunded to you			, ,		<b>5a</b> 6,614.
Direct deposit? <b>b</b>	Routing number 0 5 1 0 0 0 0				Savings	
See instructions. d	Account number 4 3 5 0 3 5 8					
36	Amount of line 34 you want <b>applied to your</b>			36		
Amount 37	Subtract line 33 from line 24. This is the <b>am</b>					
You Owe	For details on how to pay, go to <i>www.irs.go</i>		see instructions .		3	37
38	Estimated tax penalty (see instructions) .			38		
	you want to allow another person to disc					
					mplete belo	ow. 🗙 No
-	signee's	Phone			onal identificat	
nar	ne	no.		numb	er (PIN)	
UIUII	der penalties of perjury, I declare that I have examine					, ,
Here	ef, they are true, correct, and complete. Declaration			ased on all informatio		
You	ir signature	Date	Your occupation			S sent you an Identity
Joint return?			SOFTWARE H	NGINFFR	(see inst.	on PIN, enter it here .)
	puse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat		If the IRS	S sent your spouse an
Keep a copy for		2410	opoulo o occupat			Protection PIN, enter it here
your records.					(see inst.	.)
Pho	one no. (757)773-2479	Email address	SINDHUJAREDDY.	PANNALA@GMAIL.CC	M	
Pre	parer's name Preparer's signat	ure		Date	PTIN	Check if:
Paid Proparar	ATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI	PAVAN KUM	AR DUDIPALLI		P0247083	33 Self-employed
Preparer Use Only	n's name GLOBAL TAXES LLC				Phone no	o. (678)965-9522
	n's address 245 ROONEY CT E BRU	NSWICK N	08816		Firm's El	IN 88-2145487
	1040 for instructions and the latest information.		BAA			Form <b>1040</b> (2023

SCHE	DULE	1
(Form	1040)	

## Additional Income and Adjustments to Income

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

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. <b>01</b>
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
SAI SINDHUJA R	PANNALA	792-21	-4531

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-16,100.
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		
i	Activity not engaged in for profit income	8j	_	
k	Stock options	8k	-	
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	0		
	instructions)	8m 8n	-	
	Section 951(a) inclusion (see instructions)	80	-	
0	Section 461(I) excess business loss adjustment	8p	-	
p q	Taxable distributions from an ABLE account (see instructions)	8g	-	
ч r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
s I	Nontaxable amount of Medicaid waiver payments included on Form		-	
3	1040, line 1a or 1d	8s (		
t	Pension or annuity from a nonqualifed deferred compensation plan or		4	
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z				
-		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	here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-16,100.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedule	e 1 (Form 1040) 2023

Par	Adjustments to Income				
11	Educator expenses			. 11	
12	Certain business expenses of reservists, performing artists, and fee-	basis	aovernmer	nt 🗌	
	officials. Attach Form 2106			. 12	
13	Health savings account deduction. Attach Form 8889				
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				
18	Penalty on early withdrawal of savings				
19a	Alimony paid				1
b	Recipient's SSN				
с	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction				
21	Student loan interest deduction				
22	Reserved for future use				
23	Archer MSA deduction			. 23	
24	Other adjustments:				
a		24a			
	Deductible expenses related to income reported on line 8l from the				
		24b			
с	Nontaxable amount of the value of Olympic and Paralympic medals				
-		24c			
d		24d			
e	Repayment of supplemental unemployment benefits under the Trade				
•		24e			
f		24f			
g		24g		_	
<b>U</b>	Attorney fees and court costs for actions involving certain unlawful	- 3		_	
		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				
		24i			
i		24i			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k			
7	Other adjustments. List type and amount:				
-		24z			
25	Total other adjustments. Add lines 24a through 24z			. 25	1
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .				+
	Form 1040, 1040-SR, or 1040-NR, line 10				
	BAA		11/24 PRO		ule 1 (Form 1040) 202

Department of the Treasury

## **Additional Credits and Payments**

OMB No. 1545-0074 20

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

	nent of the Treasury Revenue Service		A	Attachment Sequence No. <b>03</b>		
	. ,	orm 1040, 1040-SR, or 1040-NR				ecurity number
Par	SINDHUJA H	fundable Credits		792-2	21-4	531
1		credit. Attach Form 1116 if required			1	
2	U	child and dependent care expenses from Form 2441		Attach	-	
	Form 2441				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	6j			
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 1				
	1040-NR, lir	ne 20		L	8	7,500.
				(CO	πτητ	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	-SR, or 1040-NR,	15	
	BAA REV	02/11/24 PRO	Schedu	ule 3 (Form 1040) 2023

(Form	1040)	40) (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)							<b>93</b>				
	ent of the Treasury Revenue Service								nent ce No. 13				
	shown on return												
SAI	SINDHUJA R PANNALA 792-21												
Part	I Income	or Lo	oss Fron	n Rental	Real Estate an	nd Ro	valties						
	Note: If yo	ou are ir	n the busir	ness of renti	ng personal proper on page 2, line 40.			e C. See	e instru	ctions. If you	u are an indi <sup>,</sup>	vidual, repo	ort farm
Α	)id you make ar	ny payr	ments in 2	2023 that w	ould require you	to file	Form(s)	1099? 5	See ins	structions .		. 🗌 Ye	s 🛛 No
Bİ	f "Yes," did you	ı or will	l you file r	required Fo	orm(s) 1099? .							. 🗌 Ye	s 🗌 No
1a	Physical addr	ress of	f each pro	operty (stre	et, city, state, ZII	P cod	e)						
Α	UPPAL DEP	OT HY	YDERABA	AD TELAI	NGANA IN 500	0092							
B													
С													
1b	Type of Prope (from list below				real estate prope e number of fair				Fa	ir Rental Days	Persor	nal Use Ivs	QJV
Α	3	<i>,</i>			ys. Check the Q			Α		365		0	
B					requirements to f			B		505		Ű	
C			qualif	ied joint ve	enture. See instru	uctions	5.	C					
	of Property:	I						-	1				
	Single Family R	lesiden	nce 3	Vacation	/Short-Term Ren	ntal	5 Lanc	ł	7	Self-Renta	al		
	Multi-Family Re			Commer			6 Roya		8	Other (des	scribe)		
	j												
								-		Prope			-
Incom								A _	0.0	E	3		С
3	Rents received					3		5	20.				
	Royalties rece	ived .				4							
Exper						_							
5	-					5							
6	Auto and trave			-		6							
7	Cleaning and r					7		1,3	50.				
8	Commissions					8							
9	Insurance .					9							
10	Legal and othe	•				10			0.0				
11	Management f					11		⊥,⊥	20.				
12	Mortgage inter				,	12							
13	Other interest					13		4 77	0.0				
14	Repairs					14		4,7					
15						15		4,5	70.				
16 17						16 17		1 0	00.				
18	Depreciation e					18		ч,0	00.				
19	Othor (ligt)		•			19							
20	Total expenses					20		16,6	20				
21	•			•	r 4 (royalties). If	20		10,0	20.				
21		s), see	instructio		out if you must	21		-16,1	.00				
22	Deductible rer on <b>Form 8582</b>				mitation, if any,	22	(	16,10	00.)	(	)	(	
23a	Total of all am	ounts i	reported	on line 3 fo	or all rental prope	erties			23a		520.		
b	Total of all am	ounts i	reported	on line 4 fo	or all royalty prop	oerties			23b				
с	Total of all am	ounts i	reported	on line 12	for all properties				23c				
d	Total of all am	ounts i	reported	on line 18	for all properties				23d				
е	Total of all am	ounts i	reported	on line 20 <sup>.</sup>	for all properties				23e	1	6,620.		
24	Income. Add	positiv	e amount	ts shown o	n line 21. <b>Do no</b> t	<b>t</b> inclu	de any lo	sses			. 24		
25	Losses Add ro	valty lo	osses fron	n line 21 an	d rental real estat	e loss	es from lin	e 22 F	nter to	tal losses h	ere <b>25</b>	( -	16.100

Supplemental Income and Loss

25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here
 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 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 .

-16,100.

26

OMB No. 1545-0074

SCHEDULE E

Clean V	/ehicle	<b>Credits</b>
---------	---------	----------------

Form **8936** 

	ent of the Treasury	Attach to your tax return.				A	20 <b>23</b>
	evenue Service	Go to www.irs.gov/Form8936 for instructions and the late	est info	rmatic		ing numb	equence No. 69
. ,	shown on return						
	SINDHUJA R					-21-4	531
iotes:	•	a separate Schedule A (Form 8936) for each clean vehicle placed			•	x year.	
Dout		completing Parts II, III, or IV, must also complete Part I. See "Not	te" text	belov	V.		
Part		d Adjusted Gross Income Amount				_	
		unt from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR	1a		82,537	<u>.</u>	
	•	me from Puerto Rico you excluded	1b			_	
	•	unt from Form 2555, line 45	1c			_	
	-	unt from Form 2555, line 50	1d			_	
	•	unt from Form 4563, line 15	1e				
		nrough 1e				2	82,537
		unt from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR	3a			_	
		me from Puerto Rico you excluded	3b			_	
	•	unt from Form 2555, line 45	3c			_	
	•	unt from Form 2555, line 50	3d			_	
	•	unt from Form 4563, line 15	3e			_	
		nrough 3e				4	
5 Part I	Enter the sma	Iler of line 2 or line 4				5	82,537
	Enter the total	surviving spouse; \$225,000 if head of household). credit amount figured in Part II of Schedule(s) A (Form 8936) .				6	C
7	New clean yeb						
		icle credit from partnerships and S corporations (see instructions)				7	
8	Business/inve	stment use part of credit. Add lines 6 and 7. Partnerships and S	corpora	ations,	stop here		
8	Business/inve and report this	stment use part of credit. Add lines 6 and 7. Partnerships and S amount on Schedule K. All others, report this amount on Form 380	corpora	ations,	stop here		
8	Business/inve and report this Credit for	stment use part of credit. Add lines 6 and 7. Partnerships and S amount on Schedule K. All others, report this amount on Form 380 or Personal Use Part of New Clean Vehicles	corpora 00, Part	ations, t III, Iir	stop here e 1y	8	0
8 Part I	Business/inve and report this Credit for Note: Yo qualifying	stment use part of credit. Add lines 6 and 7. Partnerships and S amount on Schedule K. All others, report this amount on Form 380 or Personal Use Part of New Clean Vehicles bu can't claim the Part III credit if Part I, line 5, is more than \$ surviving spouse; \$225,000 if head of household).	corpora 00, Part \$150,00	ations, t III, Iir 00 (\$3	stop here le 1y 00,000 if	8	0
8 Part II 9	Business/inve and report this Credit for Note: You qualifying Enter the total	stment use part of credit. Add lines 6 and 7. Partnerships and S amount on Schedule K. All others, report this amount on Form 380 or Personal Use Part of New Clean Vehicles bu can't claim the Part III credit if Part I, line 5, is more than \$ g surviving spouse; \$225,000 if head of household). credit amount figured in Part III of Schedule(s) A (Form 8936)	corpora 00, Part \$150,00	ations, t III, Iir 00 (\$3	stop here le 1y 00,000 if	8	0 filing jointly or
8 Part II 9 10	Business/inve and report this Credit for Note: You qualifying Enter the total Enter the amou	stment use part of credit. Add lines 6 and 7. Partnerships and S amount on Schedule K. All others, report this amount on Form 380 or Personal Use Part of New Clean Vehicles bu can't claim the Part III credit if Part I, line 5, is more than \$ surviving spouse; \$225,000 if head of household). credit amount figured in Part III of Schedule(s) A (Form 8936) . unt from Form 1040, 1040-SR, or 1040-NR, line 18	corpora 00, Part \$150,00	ations, t III, Iir 00 (\$3 	stop here le 1y 00,000 if 	8 married 9 10	0 filing jointly or 7,500
8 Part II 9 10 11	Business/inve and report this Credit for Note: You qualifying Enter the total Enter the amon Personal credi	stment use part of credit. Add lines 6 and 7. Partnerships and S amount on Schedule K. All others, report this amount on Form 380 or Personal Use Part of New Clean Vehicles bu can't claim the Part III credit if Part I, line 5, is more than \$ surviving spouse; \$225,000 if head of household). credit amount figured in Part III of Schedule(s) A (Form 8936) unt from Form 1040, 1040-SR, or 1040-NR, line 18 ts from Form 1040, 1040-SR, or 1040-NR (see instructions)	corpora 00, Part \$150,00	ations, t III, Iir 00 (\$3 	stop here e 1y 00,000 if	8 married 9 10 11	0 filing jointly or 7,500
8 Part II 9 10 11 12	Business/inve and report this Credit fr Note: Yo qualifying Enter the total Enter the amon Personal credi Subtract line 1	stment use part of credit. Add lines 6 and 7. Partnerships and S amount on Schedule K. All others, report this amount on Form 380 or Personal Use Part of New Clean Vehicles ou can't claim the Part III credit if Part I, line 5, is more than \$ 3 surviving spouse; \$225,000 if head of household). credit amount figured in Part III of Schedule(s) A (Form 8936) . unt from Form 1040, 1040-SR, or 1040-NR, line 18 ts from Form 1040, 1040-SR, or 1040-NR (see instructions) 1 from line 10. If zero or less, enter -0- and stop here. You can't	corpora 00, Part \$150,00	ations, t III, Iir 00 (\$3    	stop here e 1y 00,000 if   rsonal use	8 married 9 10 11	0 filing jointly or 7,500
8 Part I 9 10 11 12	Business/inve and report this Credit for Note: You qualifying Enter the total Enter the amou Personal credi Subtract line 1 part of the credi	stment use part of credit. Add lines 6 and 7. Partnerships and S amount on Schedule K. All others, report this amount on Form 380 or Personal Use Part of New Clean Vehicles bu can't claim the Part III credit if Part I, line 5, is more than \$ g surviving spouse; \$225,000 if head of household). credit amount figured in Part III of Schedule(s) A (Form 8936) unt from Form 1040, 1040-SR, or 1040-NR, line 18 ts from Form 1040, 1040-SR, or 1040-NR (see instructions) 1 from line 10. If zero or less, enter -0- and stop here. You can't dit	corpora 00, Part \$150,00   	ations, t III, Iir 00 (\$3   he pe	stop here e 1y	8 married 9 10 11 12	0 filing jointly or 7,500 10,416
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8 Part II 9 10 11 12 13 Part I Part I	Business/inve and report this Credit for Note: You qualifying Enter the total Enter the amou Personal credi Subtract line 1 part of the credi Personal use 1040), line 6f. I V Credit for Note: You qualifying Enter the total	stment use part of credit. Add lines 6 and 7. Partnerships and S amount on Schedule K. All others, report this amount on Form 380 or Personal Use Part of New Clean Vehicles ou can't claim the Part III credit if Part I, line 5, is more than \$ 9 surviving spouse; \$225,000 if head of household). credit amount figured in Part III of Schedule(s) A (Form 8936) unt from Form 1040, 1040-SR, or 1040-NR, line 18 ts from Form 1040, 1040-SR, or 1040-NR (see instructions) 1 from line 10. If zero or less, enter -0- and stop here. You can't dit	corpora 00, Part \$150,000   claim ti  d on Sc  \$75,00	ations, t III, lin 00 (\$3 	stop here e 1y	8 married 9 10 11 12 13 married	0 filing jointly or 7,500 10,416 10,416 7,500
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### SCHEDULE A (Form 8936)

## **Clean Vehicle Credit Amount**

Attach	to	your	tax	return.

(Forn	n 8936)			20 <b>7</b> 3	
	nent of the Treasury Revenue Service	Attach to your tax return. Go to <i>www.irs.gov/Form</i> 8936 for instructions and the latest informati	ion.	Attachment Sequence No. 694	4
Name(s) shown on return			Identif	fying number	
SAI	SINDHUJA F		792	-21-4531	
Par	Vehicle	Details			
1a	Year			2023	
b	Make		TES	LA	
с	Model		3		
2	Vehicle identif	cation number (VIN) (see instructions) 5 Y J 3 E 1 E A X	X P	F 4 9 3 1 3	7
3	Enter date veh	icle was placed in service (MM/DD/YYYY)	03/	16/2023	
4		e used primarily outside the United States? Answer "No" if it was but an exception <b>here.</b> You can't claim a credit amount for a vehicle used primarily outside the Un			
5	Does the VIN e definitions. X <b>Yes.</b> Go to <b>No.</b> Go to		year? \$	See instructions for	
6			2 and	placed in service durin	g
7	during the tax				
		nere. You can't use this schedule to figure a credit amount for a vehicle not descr	ribed o	on line 5, 6, or 7.	
Part	Credit A	Mount for Business/Investment Use Part of New Clean Vehicle			
8	another person	re the vehicle for use or to lease to others, and not for resale? Answer "No" if you n. nere. You can't claim a credit amount for a vehicle you didn't acquire for use or to			for
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	Amount 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 9836	12	7,500.	
For Pa		ion Act Notice, see the Form 8936 instructions. BAA REV 02/11/24 R	L L	Schedule A (Form 8936) 2	

Schedu	le A (Form 8936) 2023	Page <b>2</b>				
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	<b>16</b> 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	<ul> <li>Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exceentities discussed in the instructions applies.</li> <li>Yes.</li> <li>No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception</li> <li>Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person.</li> <li>Yes.</li> <li>No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to resale.</li> <li>Is the vehicle also powered by gas or diesel? See instructions.</li> <li>Yes.</li> <li>No.</li> </ul>	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