(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

Submission Identification Number (SID)			
Taxpayer's name	Social securi	ty number	
SANDEEP NAYINI	059-91	-6282	
Spouse's name	Spouse's soo	cial security	number
PRIYANKA TEEGALA	786-33	-4222	
Part I Tax Return Information — Tax Year Ending December 31, 2023 (En	ter year you a	re autho	rizing.)
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	306,444.
2 Total tax		2	46,949.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	49,535.
4 Amount you want refunded to you		4	2 , 756.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	d keep a cop	y of you	r return)
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trant to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termin payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or general 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 are if you are entering your own PIN and your return is filed using the Practitioner PIN metable. SandeepNayini Date	rejection of the to U.S. Treasury a indicated in the tution to debit the nate the authorizate equests must be the processing of e payment. I fur I am now author te my PIN The mow authorizate in the ERC I and I are the ERC	ransmission and its design ax prepara expensive expensive expensive from the electron and, in the electron and electron a	m, (b) the reason grated Financiation software from some care than on later than onic payment of wledge that the fapplicable, many care as my series of this box only amplete Part I
Spouse's PIN: check one box only	Γ.	1.1.1.	
▼ I authorize GLOBAL TAXES LLC to enter or general ■ to enter or general ■ Tax State ■ Ta			2 2 as m
ERO firm name signature on the income tax return (original or amended) I am now authorizing.		ter five digit n't enter all	
I will enter my PIN as my signature on the income tax return (original or amended) I are	n now authorizi	na Check	this hoy onl
if you are entering your own PIN and your return is filed using the Practitioner PIN m below.			
Spouse's signature ▶ Date ▶			
Practitioner PIN Method Returns Only—continue belo			
Part III Certification and Authentication — Practitioner PIN Method Only			
		6 6 1	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 2 4 9 Don't ent	6 6 1 er all zeros	9 8 9
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am surrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Pinch P	bmitting this retu	urn in acco	rdance with th
ERO's signature ▶ Date ▶			
ERO Must Retain This Form — See Instructions			
Don't Submit This Form to the IRS Unless Requested T			
			70 (D 01, 000

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

20**23** OMB No. 15/15-007/

<u> </u>	<u> </u>	3. Illulviuuai illuulile Ta	x net	um j			OMB No. 1548	5-0074 IRS	Use Only	/—Do not wi	rite or staple	in this space.
For the year Jan	. 1–Dec	a. 31, 2023, or other tax year beginning			, 2023, end	ing		, 20		See sep	oarate inst	ructions.
Your first name	and mi	iddle initial	Last na	ıme						Your so	cial securit	y number
SANDEEP			NAYI	NI						059	91 6	282
If joint return, s	pouse's	s first name and middle initial	Last na	ıme						l -		curity number
_PRIYANKA			TEEG							786	33 4	222
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ons.				Apt. n		ł		on Campaign
		VALLEY RD						#928	3	1	ere if you, if filing ioin	or your tly, want \$3
		ce. If you have a foreign address, also co	omplete s	paces belov	N.	Stat		ZIP code		1 '		Checking a
					1	ow will not	0					
Foreign country	name			Foreign prov	vince/state/o	count	У	Foreign pos	tal code	your tax	or refund.	Spouse
Filing Status	; [Single					☐ Head of h	ı nousehold (I	HOH)			
Check only		Married filing jointly (even if only o	ne had i	income)								
one box.		Married filing separately (MFS)					Qualifying	g surviving s	pouse	(QSS)		
	l f y	ou checked the MFS box, enter the	name o	of your spo	ouse. If you	ı che	cked the HO	H or QSS b	ox, ente	er the chil	d's name	if the
	qu	alifying person is a child but not you	ur deper	ndent:								
 Digital	At ar	ny time during 2023, did you: (a) rec	eive (as	a reward	award or	navn	nent for prope	erty or servi	ces). or	(b) sell		
Assets		lange, or otherwise dispose of a dig						-			☐ Yes	⊠ No
Standard	Som	eone can claim:	penden	t 🔲 Y	our spouse	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or you	ı were a dı	ual-status	alien	•					
Age/Blindness	You:	: Were born before January 2, 1	959 F	Are blin	d Spc	use:	: Nas bo	rn before Ja	anuary :	2. 1959	☐ Is bl	ind
Dependents	-			Ī	cial security		(3) Relations	(4) 01				instructions):
-		irst name Last name			umber		to you		ild tax c	redit	Credit for oth	her dependents
If more than four									П			$\overline{}$
dependents,												<u> </u>
see instructions and check	5											
here \square												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruction	ons)					. 1a	32	21,360.
Attach Form(s)	b	Household employee wages not re	eported	on Form(s) W-2					. 1b		
W-2 here. Also	С	Tip income not reported on line 1a	a (see in:	structions)						. <u>1c</u>		
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						. 1d				
1099-R if tax	е	Taxable dependent care benefits t								. 1e		
was withheld.	f	Employer-provided adoption bene	efits fron	n Form 883	39, l ine 29					. <u>1f</u>		
If you did not get a Form	g	Wages from Form 8919, line 6.								. <u>1g</u>		
W-2, see	h	Other earned income (see instruct	,				1	. i		. 1h	_	0.
instructions.	i	Nontaxable combat pay election (see insti	ructions)		٠	1	i			- A	21 260
		Add lines 1a through 1h	· ·							. 1z		21 , 360. 714.
Attach Sch. B if required.	2a	· -	2a				axable interes			. 2b	+	
	3a	-	3a				rdinary divide			. 3b	+	
Standard	4a	-	4a				axable amour axable amour			. 4b	+	
Deduction for —	5a		5a 6a				axable amour axable amour			. 5b	+	
Single or Married filing	6а с	If you elect to use the lump-sum e		mothod cl				п		. 65		
separately, \$13,850	7	Capital gain or (loss). Attach Sche							[<u> </u>	1	
Married filing jointly or	8	Additional income from Schedule			•					. 8	+	15,630.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9	_	06,444.
surviving spouse, \$27,700	10	Add lines 12, 25, 35, 45, 35, 65, 7 Adjustments to income from Sche		•						. 10	+	, o , 1 1 1 1 .
Head of	11	Subtract line 10 from line 9. This is								. 10	3(06,444.
household, [\$20,800	12	Standard deduction or itemized	-	-						. 12		27,700.
If you checked any box under	13	Qualified business income deduct		•			5-A .			. 13	+	<u> </u>
Standard Deduction,	14									. 14	1 2	27,700.
see instructions.	15	Subtract line 14 from line 11. If zer				our t	axable incon	ne				78,744.

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 4972	3 🗌		16	53,699.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	53,699.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	7,500.
	21	Add lines 19 and 20						21	7,500.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	46,199.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	750.
	24	Add lines 22 and 23. This is	your total tax					24	46,949.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a 4.9	,535	•	
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c	0		
	d	Add lines 25a through 25c						25d	49,535.
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20	22 return			26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812	·		28			
	29	American opportunity credit	from Form 8863	3, line 8 . .		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, Jin				31	170		
	32	Add lines 27, 28, 29, and 31	32	170.					
	33	Add lines 25d, 26, and 32. T	•	-	-			33	49,705.
Refund	34	If line 33 is more than line 24						34	2,756.
riorana	35a	Amount of line 34 you want	•				. 🗆	35a	2,756.
Direct deposit?	b	Routing number 1 1 1					Savings		
See instructions.	d	Account number 4 8 8							
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24				1 00 1			
You Owe	31	For details on how to pay, go		•				37	
	38	Estimated tax penalty (see in	•	•		38			
Third Party		you want to allow another							
Designee		structions	•			_	omplete	below.	⋉ No
200.900	De	signee's		Phone			onal iden		_
	nar			no.			ber (PIN)		
Sign		der penalties of perjury, I declare the							
Here	bei	lief, they are true, correct, and com	piete. Declaration o	or preparer (otne		ased on all information			
	Yo	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Latinat week wood					SOFTWARE :	CMCTMEED		e inst.)	TIN, enter it here
Joint return? See instructions.	Sp	ouse's signature. If a joint return, t	ooth must sign	Date	Spouse's occupat				nt your spouse an
Keep a copy for	Op	odoo o oignataro. Ir a joint rotarri, k	our mast sign.	Date	opouse s cocupa		Ide	ntity Prot	ection PIN, enter it here
your records.					SOFTWARE :	ENGINEER	(se	e inst.)	
	Ph	one no. (313) 409-442	7	Email address	SANDEEPRAONA	YINI9@GMAIL.C	MC		
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	VENK	KATA SAI PAVAN KUMAR DUDIPALLI	VENKATA SAI	PAVAN KUM	AR DUDIPALLI		P024	70833	Self-employed
Preparer	Fin	m's name GLOBAL TAX	KES LLC				Pho	one no.	(678) 965-9522
Use Only	Fin	m's address 245 ROONE	CT E BRU	NSWICK N	J 08816		Firr	n's EIN	88-2145487
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/21/24 PRO			Form 1040 (2023)

SCHEDULE 1 (Form 1040)

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.

Attachment Sequence No. **01**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

SANDEEP NAYINI & PRIYANKA TEEGALA

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

Your social security number 059-91-6282

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		5	-15 , 630.
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		8c		
d	<u> </u>	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g		8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	, , , , , , , , , , , , , , , , , , ,	8m		
n	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	8n		
0		80		
р		8p		
q		8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
_		8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or	a.		
	a nongovernmental section 457 plan	8t		
u		8u		
Z	Other income. List type and amount:	_		
_		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter	nere and on Form	, ,	_15 620
	1040, 1040-SR, or 1040-NR, line 8		10	- 15,630.

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

Moving expenses for members of the Armed Forces. Attach Form 3903	
Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	
officials. Attach Form 2106	
14 Moving expenses for members of the Armed Forces. Attach Form 3903	
15 Deductible part of self-employment tax. Attach Schedule SE	
16 Self-employed SEP, SIMPLE, and qualified plans	
17 Self-employed health insurance deduction	
18 Penalty on early withdrawal of savings	
19a Alimony paid	
b Recipient's SSN	
c 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	
24 Other adjustments:	
a Jury duty pay (see instructions)	
b Deductible expenses related to income reported on line 8l from the	
rental of personal property engaged in for profit	
c Nontaxable amount of the value of Olympic and Paralympic medals	
and USOC prize money reported on line 8m	
d Reforestation amortization and expenses	
e Repayment of supplemental unemployment benefits under the Trade	
Act of 1974	
f Contributions to section 501(c)(18)(D) pension plans	
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	
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	
Form 1040, 1040-SR, or 1040-NR, line 10	

SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Taxes

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment
Sequence No. 02

	Name(s) shown on Form 1040, 1040-SR, or 1040-NR SANDEEP NAYINI & PRIYANKA TEEGALA 059-93				
	tl Tax		_ 020		
1	Alternative minimum tax. Attach Form 6251		1		
2	Excess advance premium tax credit repayment. Attach Form 8962		2		
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17		3		
Par	t II Other Taxes	•			
4	Self-employment tax. Attach Schedule SE		4		
5	Social security and Medicare tax on unreported tip income. Attach Form 4137				
6	Uncollected social security and Medicare tax on wages. Attach Form 8919				
7	Total additional social security and Medicare tax. Add lines 5 and 6		7		
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if requ	ired.			
	If not required, check here		8		
9	Household employment taxes. Attach Schedule H		9		
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required		10		
11	Additional Medicare Tax. Attach Form 8959		11	750.	
12	Net investment income tax. Attach Form 8960		12		
13	Uncollected social security and Medicare or RRTA tax on tips or group-tern insurance from Form W-2, box 12	I	13		
14	Interest on tax due on installment income from the sale of certain residential and timeshares	l lots	14		
15	Interest on the deferred tax on gain from certain installment sales with a sales over \$150,000		15		
16	Recapture of low-income housing credit. Attach Form 8611	[16		
		(co	ntinue	d on page 2)	

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

Part II Other Taxes (continued)

	,			
17	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount:			
		17a		
b	Recapture of federal mortgage subsidy, if you sold your home			
	see instructions	17b		
С	Additional tax on HSA distributions. Attach Form 8889	17c		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
I	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
Z	Any other taxes. List type and amount:			
		17z		
18	Total additional taxes. Add lines 17a through 17z		18	
19	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your total other tax on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b.		21	750.
				_

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service **Additional Credits and Payments**

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR SANDEEP NAYINI & PRIYANKA TEEGALA

Your social security number 059-91-6282

Par	t I Nonrefundable Credits					
1	Foreign tax credit. Attach Form 1116 if required				1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441				2	
3	Education credits from Form 8863, line 19				3	
4	Retirement savings contributions credit. Attach Form 8880				4	
5a	Residential clean energy credit from Form 5695, line 15				5a	
b	Energy efficient home improvement credit from Form 5695, line 32				5b	
6	Other nonrefundable credits:					
а	General business credit. Attach Form 3800	6a				
b	Credit for prior year minimum tax. Attach Form 8801	6b				
С	Adoption credit. Attach Form 8839	6с				
d	Credit for the elderly or disabled. Attach Schedule R	6d				
е	Reserved for future use	6e				
f	Clean vehicle credit. Attach Form 8936	6f		7,500.		
g	Mortgage interest credit. Attach Form 8396	6g				
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h				
i	Qualified electric vehicle credit. Attach Form 8834	6i				
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j				
k	Credit to holders of tax credit bonds. Attach Form 8912	6k				
I	Amount on Form 8978, line 14. See instructions	6 I				
m	Credit for previously owned clean vehicles. Attach Form 8936 .	6m				
Z	Other nonrefundable credits. List type and amount:					
		6z				
7	Total other nonrefundable credits. Add lines 6a through 6z $$. $$.				7	7,500.
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10	040,	1040	-SR, or		
	1040-NR, line 20				8	7,500.
				(CC	วทบาบ	ued on page 2)

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

Par	Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .	10		
11	Excess social security and tier 1 RRTA tax withheld	11	170.	
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	170.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information. OMB No. 1545-0074 Attachment Sequence No. 13

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

SANDEEP NAYINI & PRIYANKA TEEGALA

Your social security number

059-91-6282

Part	Note: If you a	re in th	From Rental Real Estate ar ne business of renting personal prope s from Form 4835 on page 2, line 40.	rty, use		e C. See	instru	ctions. If you	are an ind	ividual, rep	ort farm
A	Did vou make anv p	avme	nts in 2023 that would require you	to file	Form(s)	1099? S	See in:	structions .		. \(\tag{Y}\)	es 🕅 No
			ou file required Form(s) 1099? .								
1a	•		ich property (street, city, state, ZI								
A	4-1-145 SADA	ASHT	VA HEAVENS KV RANGAREDI	DY TI	ZLANGAI	NT AV	501	505			
В											
<u> </u>											
1b	(from list below) above, report the number of fair rental and Days Days							QJV			
Α	3]	personal use days. Check the Q			Α		365		0	
В			if you meet the requirements to qualified joint venture. See instru			В					
С			quaimed joint venture. See instit	JCtions	5.	С					
Type o	of Property:										
1	Single Family Resid	dence	3 Vacation/Short-Term Rer	ntal	5 Land	d	7	Self-Rental			
2	Multi-Family Resid	ence	4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
								Propert			
Incom	10:					Α		В	103.		С
3				3			00.	В.			
4				4		- 0	00.				
Expen		<u>и</u>		+ -							
5				5							
6	_		tructions)	6							
7	•		nce	7		1,7	90				
8	_			8			<i>5</i> 0.				
9				9							
10			ional face	10							
11			sional fees	11		1,2	20				
12			to banks, etc. (see instructions)	12		1,2	20.				
13		•		13							
				14		4,9	60				
14 15	•			15		4,4					
16				16		4,4	00.				
17				17		3,8	00				
18			or depletion	18		3,0	00.				
19			·	19							
20	Total expenses A	dd lin	es 5 through 19	20		16,2	30				
			ne 3 (rents) and/or 4 (royalties). If	20	-	10,2	J U •				
21	result is a (loss), s	see ins	structions to find out if you must			1 E C	30				
00			state loss after limitation, if any,	21	-	- 15 , 6	JU.				
22	on Form 8582 (se	e inst	ructions)	22	(15,63		()	()
23a			orted on line 3 for all rental prope				23a		600.		
b			orted on line 4 for all royalty prop				23b				
С			orted on line 12 for all properties				23c				
d		-	orted on line 18 for all properties				23d				
е			orted on line 20 for all properties			-	23e	16	5,230.		
24			ımounts shown on line 21. Do no		-				. 24		
25	Losses. Add roval	tv loss	es from line 21 and rental real estat	te losse	es from lir	ne 22. Ei	nter to	tal losses he	re 25	1(15,630.)

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

26

-15,630.

26

Clean Vehicle Credits

Identifying number

059-91-6282

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

SANDEEP NAYINI & PRIYANKA TEEGALA

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

OMB No. 1545-2137

Notes:	Complete a separate Schedule A (Form 8936) for each clean vehicle placed in	_	year.	
	 Individuals completing Parts II, III, or IV, must also complete Part I. See "Note" 	" text below.		
Part				
1a	Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR	1a 306,444.		
b	Enter any income from Puerto Rico you excluded	1b		
С	Enter any amount from Form 2555, line 45	1c		
d	Enter any amount from Form 2555, line 50	1d		
е	Enter any amount from Form 4563, line 15	1e		
2	Add lines 1a through 1e		2	306,444.
3a	Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR	3a 254,624.		
b	Enter any income from Puerto Rico you excluded	3b		
С	Enter any amount from Form 2555, line 45	3c		
d	Enter any amount from Form 2555, line 50	3d		
e	Enter any amount from Form 4563, line 15	3e		054 604
4	Add lines 3a through 3e		4	254,624.
5 Dort	Enter the smaller of line 2 or line 4		5	254,624.
Part	Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than 9	\$150,000 (\$200,000 if ,	marria	d filing idintly or a
	qualifying surviving spouse; \$225,000 if head of household).	\$ 150,000 (\$500,000 II I	патте	a ning jointly or a
6	Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936)		6	
7			7	
8	Business/investment use part of credit. Add lines 6 and 7. Partnerships and S co		-	
•	and report this amount on Schedule K. All others, report this amount on Form 3800		8	
Part I		· · · · · ·		
	Note: You can't claim the Part III credit if Part I, line 5, is more than \$1 qualifying surviving spouse; \$225,000 if head of household).	50,000 (\$300,000 if m	narried	filing jointly or a
9	Enter the total credit amount figured in Part III of Schedule(s) A (Form 8936)		9	7,500.
10	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18		10	53,699.
11			11	
12	Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't cl	aim the personal use		
	part of the credit		12	53 , 699.
13	Personal use part of credit. Enter the smaller of line 9 or line 12 here and of 1040) line of 16 line 40 is smaller than line 0. and instructions			
D	1040), line 6f. If line 12 is smaller than line 9, see instructions		13	7,500.
Part		75 000 /0150 000 if ~~	ام ماسم	filing injustry or o
	Note: You can't claim the Part IV credit if Part I, line 5, is more than \$1 qualifying surviving spouse; \$112,500 if head of household).			ming jointly or a
14	Enter the total credit amount figured in Part IV of Schedule(s) A (Form 8936)		14	
15	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18		15	
16	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)		16	
17 18	Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't claret the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040),		17	
10	smaller than line 14, see instructions		40	
Part			18	
19	Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936)		19	
20	Qualified commercial clean vehicle credit from partnerships and S corporations (see		20	
21	Add lines 19 and 20. Partnerships and S corporations, stop here and report this	•	20	
	K. All others, report this amount on Form 3800, Part III, line 1aa		21	
For Pa	perwork Reduction Act Notice, see separate instructions. BAA	REV 01/21/24 PRO		Form 8936 (2023)

SCHEDULE A (Form 8936)

Clean Vehicle Credit Amount

OMB No. 1545-2137

Attachment Sequence No. 69A

Department of the Treasury Internal Revenue Service Attach to your tax return.

Go to www.irs.gov/Form8936 for instructions and the latest information.

Name(s) shown on return Identifying number SANDEEP NAYINI & PRIYANKA TEEGALA 059-91-6282 Vehicle Details Part I 2023 Make Model TESLA Y 2 Vehicle identification number (VIN) (see instructions) . . . 7 S A Y G D E E 9 P A 1 5 5 6 5 3 3 Enter date vehicle was placed in service (MM/DD/YYYY) 08/10/2023 Was the vehicle used primarily outside the United States? Answer "No" if it was but an exception applies. See instructions. Yes. Stop here. You can't claim a credit amount for a vehicle used primarily outside the United States. X No. Does the VIN entered on line 2 belong to a new clean vehicle placed in service during the tax year? See instructions for X Yes. Go to Part II. ☐ No. Go to line 6. Does the VIN entered on line 2 belong to a previously owned clean vehicle acquired after 2022 and placed in service during the tax year? See instructions for definitions. ☐ Yes. Go to Part IV. No. Go to line 7. Does the VIN entered on line 2 belong to a qualified commercial clean vehicle acquired after 2022 and placed in service during the tax year? See instructions for definitions. ☐ **Yes.** Go to Part V. No. Stop here. You can't use this schedule to figure a credit amount for a vehicle not described on line 5, 6, or 7 Credit Amount for Business/Investment Use Part of New Clean Vehicle Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you are leasing the vehicle from another person. X Yes. No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to lease to others, or acquired for resale. 9 Tentative credit amount (see instructions) 9 7,500. 10 Business/investment use percentage (see instructions) . . . 10 % Multiply line 9 by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you 11 entered 100% on line 10, stop here. Otherwise, go to Part III below. 11 **Credit Amount for Personal Use Part of New Clean Vehicle** Part III 12 Subtract line 11 from line 9 in Part II. Stop here and include this credit amount on line 9 in Part III of Form 8936 . . . __ . . . 12 7,500.

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

REV 01/21/24 PRO

Schedule A (Form 8936) 2023

DO NOT FILE

Schedu	e A (Form 8936) 2023		Page 2
Part	•		
13a	Is the sales price of the vehicle more than \$25,000?		
	☐ Yes. Stop here. The vehicle doesn't qualify for the Part IV credit. ☐ No.		
b	Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehicle	e fron	n another person.
	Yes.		ad for reads
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a	cquire	ed for resale.
С	Can you be claimed as a dependent on another person's tax return, such as your parent's return	n?	
	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.
	Waxinam vondo d'out amount	-10	1,000.
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			
18a	Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exce	ption	for certain tax-exempt
	entities discussed in the instructions applies. Yes.		
	No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception	appli	es.
b	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person.	are le	easing the vehicle from
- 1	☐ Yes.	17	
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to	leas	e to others, or acquired for
	resale.		
c	Is the vehicle also powered by gas or diesel? See instructions.		
·	Yes.		
	□ No.		
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	
	mattiply into 21 by 1070 (0.10) [0070 (0.00) if the allower of line 100 above to 110 [1		
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	

Form **8959**

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions. Attach to Form 1040, 1040-SR, 1040-NR, or 1040-SS.

Go to www.irs.gov/Form8959 for instructions and the latest information.

Attachment Sequence No.

OMB No. 1545-0074

2023

Attachment Sequence No. 71

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

SANDEEP NAYINI & PRIYANKA TEEGALA

Your social security number

SAN.	DEEP NAYINI & PRIYANKA TEEGALA (059-91-	6282
Par	Additional Medicare Tax on Medicare Wages		
1	Medicare wages and tips from Form W-2, box 5. If you have more than one		
	Form W-2, enter the total of the amounts from box 5	325.	
2	Unreported tips from Form 4137, line 6		
3	Wages from Form 8919, line 6		
4	Add lines 1 through 3	325.	
5	Enter the following amount for your filing status:		
	Married filing jointly \$250,000		
	Married filing separately \$125,000		
		000.	
6	Subtract line 5 from line 4. If zero or less, enter -0		83,325.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and g		,
_	Part II		750.
Part	II Additional Medicare Tax on Self-Employment Income		
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you		
•	had a loss, enter -0		
9	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately		
	Single, Head of household, or Qualifying surviving spouse \$200,000 9		
10	Enter the amount from line 4		
11	Subtract line 10 from line 9. If zero or less, enter -0	-	
12	Subtract line 11 from line 8. If zero or less, enter -0	12	,
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here		-
	go to Part III	II.	3
Part	Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensatio	n	
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14	-	
17	(see instructions)		
15	Enter the following amount for your filing status:	-	
	Married filing jointly \$250,000		
	Married filing separately		
	Single, Head of household, or Qualifying surviving spouse \$200,000		
16	Subtract line 15 from line 14. If zero or less, enter -0	16	:
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.		,
17	Enter here and go to Part IV		,
Part			<u>'</u>
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 104	0-88	
10	filers, see instructions), and go to Part V		750.
Part			750.
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form		
13		833.	
20	Enter the amount from line 1		
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax	525.	
4 I		833.	
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Additional Medicare		
22	withholding on Medicare wages		2 0.
99	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2		- 0.
23	14 (see instructions)		,
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount		<u> </u>
24	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-SS t		
	see instructions)		· 0.
	·, · · · · · · · · · · · · · · · · · ·		- 1

Form **8960**

Department of the Treasury

Internal Revenue Service

Net Investment Income Tax— Individuals, Estates, and Trusts

Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.

OMB No. 1545-2227

2023 Attachment Sequence No. 72

				social security number or EIN		
				59-91-6	9-91-6282	
Part						
	Section 6013(h) election (see instructions)					
	Regulations section 1.1411-10(g) election (see in					
1	Taxable interest (see instructions)				714.	
2	Ordinary dividends (see instructions)					
3	Annuities (see instructions)			. 3		
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a -	-15 , 63	0.		
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b	,			
С	Combine lines 4a and 4b			. 4c	-15 , 630.	
5a	Net gain or loss from disposition of property (see instructions)	5a				
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b				
С	Adjustment from disposition of partnership interest or S corporation stock (see	-				
C	instructions)	5c				
d	Combine lines 5a through 5c			. 5d		
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)					
7	Other modifications to investment income (see instructions)					
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7				-14,916.	
Part		cations		. •	11,310.	
9a	Investment interest expenses (see instructions)	9a				
b	State, local, and foreign income tax (see instructions)	9b				
c	Miscellaneous investment expenses (see instructions)	9c				
d	Add lines 9a, 9b, and 9c			. 9d		
10	Additional modifications (see instructions)					
11	Total deductions and modifications. Add lines 9d and 10					
Part				.		
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, c	omnlete lir	nes 13_1	7		
	Estates and trusts, complete lines 18a–21. If zero or less, enter -0				0.	
	Individuals:			. ,	•	
13	Modified adjusted gross income (see instructions)	13	306,44	14		
14	Threshold based on filing status (see instructions)		250 , 00			
15	Subtract line 14 from line 13. If zero or less, enter -0	15	56,44			
16	Enter the smaller of line 12 or line 15			. 16	0.	
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Ent				· ·	
• • •	on your tax return (see instructions)	ei nere ai	ia ilicia	. 17	0.	
	Estates and Trusts:				· ·	
18a	Net investment income (line 12 above)	18a				
b	Deductions for distributions of net investment income and charitable	100				
D	deductions (see instructions)	18b				
С	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0	18c				
19a	Adjusted gross income (see instructions)	19a				
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b				
С	Subtract line 19b from line 19a. If zero or less, enter -0	19c				
20	Enter the smaller of line 18c or line 19c			. 20		
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.0					
	include on your tax return (see instructions)			. 21		