(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

	1.01.01.00 00.1.00				
Submi	ssion Identification Number (SID)				
Taxpaye	r's name	Social securi	y numb	per	
AVIN	NASH MUDDULURU	802-60	-371	8	
Spouse's	s name	Spouse's soc	ial secu	urity numbe	r
Part	Tax Return Information — Tax Year Ending December 31, 2023 (En	 ter year you a	re au	thorizina)
	whole dollars only on lines 1 through 5.	ioi youi you u			·/
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1	72	,744.
	Total tax		2		,260.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12	,016.
4	Amount you want refunded to you		4		,756.
5	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	d keep a cop	y of y	our retu	ırn)
return (or to send for any Agent to paymer authoriz paymer business taxes to personal	wiledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I all original or amended) I am now authorizing. I consent to allow my intermediate service provider, translar my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the oinitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account into of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation residus prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended)	smitter, or electrorejection of the treatment of the U.S. Treasury andicated in the trution to debit the authorizate the authorizate the processing of payment. I furle	onic refansmisted its of ax prepartition. The receive of the element of the eleme	turn origina ssion, (b) the designated paration so to this acco To revoke (ved no late ectronic paraken	tor (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the
	nic Funds Withdrawal Consent. yer's PIN: check one box only				
X		te mv PIN	3 5	7 1 8	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	ac,
	I will enter my PIN as my signature on the income tax return (original or amended) I an if you are entering your own PIN and your return is filed using the Practitioner PIN me below.				
Your si	ignature ▶ Date ▶				
Spous	e's PIN: check one box only				
	I authorize to enter or genera	te my PIN			as my
	ERO firm name	_	ter five	digits, but	ao my
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I an if you are entering your own PIN and your return is filed using the Practitioner PIN me below.				
Spouse	e's signature ► Date ►				
	Practitioner PIN Method Returns Only—continue belo	ow .			
Part I	Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 2 4 9 Don't ent	6 0 er all ze	8 2 7	1
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am suments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	e tax return (origi bmitting this retu	nal or ırn in a	amended) accordance	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	o Do So			

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



1040		artment of the Treasury—Internal Revenue Serv S. Individual Income Tax		ırn 2	202	3	OMB No. 1545-	-0074	IRS Use (Only—	Do not w	rite or sta	ple in this	s space.
For the year Ja	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, endi	ng			, 20	;	See sep	oarate i	nstruct	tions.
Your first name	e and m	iddle initial	Last nan	ne						٦,	Your so	cial sec	urity nu	umber
AVINASH			MUDDI	JLURU							802	60	3718	8
If joint return,	spouse's	s first name and middle initial	Last nan							•	Spouse'	s social	security	y numbe
Home address	s (numbe	er and street). If you have a P.O. box, see	instructio	ns.				A	pt. no.	1	Preside	ntial Ele	ction C	ampaig
86 VAN	WAGE:	NEN AVE						2	2		Check h			
City, town, or p	post offi	ce. If you have a foreign address, also co	omplete sp	aces below	v	Sta	te	ZIP c	ode		•	٠,		want \$3 cking a
JERSEY	CITY					NJ	-	073	06		o go to			•
Foreign countr	ry name		F	oreign prov	ince/state/c	ount	у	Foreig	ın postal co	ode	your tax	or refu	_	Spous
Filing Statu	s X	Single	ı				Head of ho	ouseh	old (HOH)				
_		Married filing jointly (even if only o	ne had in	come)						,				
Check only one box.		Married filing separately (MFS)		,			☐ Qualifying	surviv	ing spou	se (C	QSS)			
one box.		you checked the MFS box, enter the	name of	vour spo	use. If vou	che					,	ld's nar	ne if th	ne .
		ialifying person is a child but not you			,			-	, .					
Digital		ny time during 2023, did you: (a) rec										□ v _•		No
Assets		nange, or otherwise dispose of a dig						1) ! (3	e mstruc	LIOIIS	». <i>)</i>	∐ Ye	:5 🔼	ı NO
Standard	_	neone can claim:	•		•		a dependent							
Deduction	ш:	Spouse itemizes on a separate retur	n or you	were a du	ial-status a	alien								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bline	d Spo	use	: Was bor	n befo	re Janua	ry 2,	1959	☐ Is	blind	
Dependent	s (see	instructions):		(2) Soc	cial security		(3) Relationsh	ip (4) Check th	e box	if qualit	ies for (s	see inst	ructions)
If more	•	(1) First name Last name		number to you				Child ta	x cre	dit	Credit fo	r other d	lependent	
than four														
dependents,														
see instruction and check	ıs ——													
here														
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	instructio	ons)						1a		90,	458.
	b	Household employee wages not re	eported c	on Form(s)	W-2						1b			
Attach Form(s) W-2 here. Also	_	Tip income not reported on line 1a	a (see ins	tructions)							1c			
attach Forms	d	Medicaid waiver payments not rep	orted on	Form(s) V	N-2 (see in	stru	ctions)				1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits t	from Forn	n 2441, lir	ne 26 .						1e			
was withheld.	f	Employer-provided adoption bene									1f			
If you did not	g	Wages from Form 8919, line 6.									1g			
get a Form W-2, see	h	Other earned income (see instruct	ions) .								1h			0.
instructions.	i	Nontaxable combat pay election (see instru	uctions) .			1i							
	Z	Add lines 1a through 1h									1z		90,	458.
Attach Sch. B	2a	Tax-exempt interest	2a			b Ta	axable interest				2b			292.
if required.	3a	Qualified dividends	3a			b 0	rdinary divider	nds .			3b			
		IRA distributions	4a			b Ta	axable amount	t			4b			
Standard Deduction for—	5a	Pensions and annuities	5a				axable amount				5b			
Single or	6a	Social security benefits	6a				axable amount				6b			
Married filing separately,	С	If you elect to use the lump-sum e	election m	nethod, ch										
\$13,850	7	Capital gain or (loss). Attach Sche	dule D if	required.	If not requi	ired,	check here				7		-3,	.000
Married filing jointly or	8	Additional income from Schedule	1, line 10								8			006.
Qualifying surviving spouse,	9		6b, 7, and 8. This is your total income							9			744.	
\$27,700	10	Adjustments to income from Sche									10			
Head of household,	11	Subtract line 10 from line 9. This is	s your ad	justed gr	oss incom	ne					11		72,	744.
\$20,800	12	Standard deduction or itemized		-							12			,850.
If you checked any box under	13	Qualified business income deduct					5-A				13			
Standard Deduction,	14										14		13,	850.
see instructions.	15	Subtract line 1/1 from line 11. If zer									15	İ		894

Form 1040 (2023	3)						Page 2	
Tax and	16	Tax (see instructions). Check if any from Form	n(s): 1 881	4 2 4972	3 🗌	1	8,260.	
Credits	17	Amount from Schedule 2, line 3				1	7	
	18	Add lines 16 and 17				1	8,260.	
	19	Child tax credit or credit for other depender	nts from Sched	ule 8812		1	9	
	20	Amount from Schedule 3, line 8				2	20	
	21	Add lines 19 and 20				2	21	
	22	Subtract line 21 from line 18. If zero or less,	enter -0			2	8,260.	
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21		2	0.	
	24	Add lines 22 and 23. This is your total tax				2	8,260.	
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2			25a 12	,016.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c				2	5d 12,016.	
If you have a	26	2023 estimated tax payments and amount a	applied from 20	022 return		2	26	
qualifying child,	27	Earned income credit (EIC)		No .	27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 881	2		28			
	29	American opportunity credit from Form 886	3, line 8		29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15						
	32	Add lines 27, 28, 29, and 31. These are you	3	32				
	33	Add lines 25d, 26, and 32. These are your to	otal payments			3	12,016.	
Refund	34	If line 33 is more than line 24, subtract line 2	24 from line 33.	This is the amou	nt you overpaid	3	3,756.	
	35a	Amount of line 34 you want refunded to yo	u . If Form 8888	3 is attached, che	ck here	. 🗌 🔞	5a 3,756.	
Direct deposit?	b	Routing number 0 2 1 2 0 2 3		c Type: 🛛	Checking S	Savings		
See instructions.	d	Account number 2 0 1 5 3 2 6	9 1					
	36	Amount of line 34 you want applied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the am	ount you owe					
You Owe		For details on how to pay, go to www.irs.go	v/Payments or	see instructions		3	37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to distructions			_	mplete belo	w. 🔀 No	
g	De na	signee's	Phone no.		Perso	nal identificat er (PIN)	ion	
Sign		der penalties of perjury, I declare that I have examine		accompanying sche			est of my knowledge and	
_		ief, they are true, correct, and complete. Declaration						
Here	Yo	ur signature	Date	Your occupation		If the IRS	S sent you an Identity	
							on PIN, enter it here	
Joint return?			Date	SOFTWARE I		(see inst.	<u>, </u>	
See instructions. Keep a copy for your records.	Sp	Spouse's signature. If a joint return, both must sign.		Spouse's occupat		f the IRS sent your spouse an dentity Protection PIN, enter it here see inst.)		
	Ph	one no. (201)985-4995	Email address	avinash.roc	ky19@gmail.co	m .		
Doid	Pre	parer's name Preparer's signa	iture		Date	PTIN	Check if:	
Paid	SYA	M PRIYA RAM SAGAR GUPTA SYAM PRIY	A RAM SAG	GAR GUPTA	04/03/2024	P0208270) 3 Self-employed	
Preparer	Fin	n's name GLOBAL TAXES LLC			<u> </u>	Phone no		
Use Only		n's address 245 ROONEY CT E BRU	JNSWICK N	J 08816		Firm's El	<u> </u>	
Go to www irs a	ov/Forr	21040 for instructions and the latest information		DAA	DEV 02/07/24 DDO		Form 1040 (2023)	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

AVINASH MUDDULURU

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

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

	Sequence No. 01
Your soc	ial security number
802-60	-3718

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule E .	5	-15,006.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-15,006.

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

Par	t II Adjustments to Income				
11	Educator expenses			. 11	
12	Certain business expenses of reservists, performing artists, and fee-				
	officials. Attach Form 2106			. 12	
13	Health savings account deduction. Attach Form 8889			. 13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			. 14	
15	Deductible part of self-employment tax. Attach Schedule SE				
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				
С	Date of original divorce or separation agreement (see instructions):				Į.
20	IRA deduction				
21	Student loan interest deduction				
22	Reserved for future use				
23	Archer MSA deduction			. 23	
24	Other adjustments:				
а	,	24a			
b	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	the state of the s	24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h			
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect				
	-	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:				
		24z			Į.
25	Total other adjustments. Add lines 24a through 24z				
26	Add lines 11 through 23 and 25. These are your adjustments to income . Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	r here and	on 26	
	1 OITH 1070, 1070-011, 01 1070-1111, 11110-10	• •		. 20	

SCHEDULE D (Form 1040)

Department of the Treasury

Capital Gains and Losses

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

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

OMB No. 1545-0074

2023

Attachment Sequence No. **12**

IIILEIIIa	in Nevertue Service	or motraotiono ana	and lateot innormat			
,	s) shown on return INASH MUDDULURU					ecurity number
-	ou dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona	_	-			
Par					e ins	tructions)
lines This 1	nstructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b. Totals for all transactions reported on Form(s) 8949 with					
	Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
	Totals for all transactions reported on Form(s) 8949 with Box C checked					
	Short-term gain from Form 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	B24	4	
	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	•		usts from	5	
	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	(14,069.)
7	7	-14,069.				
Par	term capital gains or losses, go to Part II below. Otherwise Long-Term Capital Gains and Losses—Ger			One Year		
See i lines This t whole	ts from Part II, n (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)				
	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b. Totals for all transactions reported on Form(s) 8949 with					
	Box D checked					
	Totals for all transactions reported on Form(s) 8949 with Box E checked					
	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
	Capital gain distributions. See the instructions				13	
					14	()
15	Net long-term capital gain or (loss). Combine lines 8a	through 14 in co	lumn (h). Then, go	to Part III		

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -14,069. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . . . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 3,000.) • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

AVINASH MUDDULURU								802-6	0-3718		
Part	Income or Loss From I Note: If you are in the busines rental income or loss from For	s of renting personal propert			C. See	instruc	ctions. If you a	re an indiv	ridual, rep	ort farm	
Α	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions										
	If "Yes," did you or will you file required Form(s) 1099?										
1a	Physical address of each prope										
Α	BANJARA HILLS, RD NO: 2 HYDERABAD TELANGANA IN 500045										
В											
C											
1b		above, report the number of fair rent							al Use ys	QJV	
Α		personal use days. Check the QJV bo			Α		365		0		
В		neet the requirements to filed in the requirement to filed i			В						
С	qualified	John Verture. See instruc	Clions	·. [С						
1	,	/acation/Short-Term Rent Commercial	tal	5 Land 6 Roya			Self-Rental Other (descr				
					_		Propertie	es:			
Incon		ļ			<u>A</u>	4.0	В			С	
3 4	Rents received		3		5	42.					
Expe	Royalties received		4								
5	Advertising		5								
6	Auto and travel (see instructions		6								
7	Cleaning and maintenance	·	7		1,4	14					
8	Commissions		8								
9	Insurance		9								
10	Legal and other professional fee	•	10								
11	Management fees		11		1,200.						
12	Mortgage interest paid to banks	•	12			00.					
13	Other interest		13								
14	Repairs	ī	14		3,1	24.					
15	Supplies	t t	15		2,8						
16	Taxes	1	16		, -						
17	Utilities	+	17		3,9	48.					
18	Depreciation expense or depleti-		18		2,9						
19	Other (list)		19								
20	Total expenses. Add lines 5 thro	ough 19	20		15,5	48.					
21	Subtract line 20 from line 3 (rent result is a (loss), see instructions file Form 6198	s to find out if you must	21	-	-15,0	06.					
22	Deductible rental real estate los on Form 8582 (see instructions)		22	(15,00	6.)	()	(
23a	Total of all amounts reported on	line 3 for all rental proper	rties			23a		542.			
b	Total of all amounts reported on	line 4 for all royalty prope	erties			23b					
С	Total of all amounts reported on	line 12 for all properties				23c					
d	Total of all amounts reported on	line 18 for all properties				23d	2	,977.			
е	Total of all amounts reported on	line 20 for all properties				23e	15	,548.			
24	Income. Add positive amounts	shown on line 21. Do not	includ	de any los	sses			. 24			
25	Losses. Add royalty losses from li	ne 21 and rental real estate	e losse	es from lin	e 22. Er	nter to	tal losses here	25	(15,006.	
26	Total rental real estate and ro										
	here. If Parts II, III, and IV, and Schedule 1 (Form 1040), line 5.	· -						n - 26		-15,006.	

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

2023 Attachment Sequence No. 179

OMB No. 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number AVINASH MUDDULURU Sch E BANJARA HILLS, RD NO: 2 802-60-3718 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1,160,000. 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2,890,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property h Residential rental 27.5 yrs. MM S/L 01/23 2,977. 85,421. S/L 27.5 yrs. MM property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. **b** 12-year ММ S/L c 30-year 30 yrs. ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 2,977. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.