Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

Conicl converts number

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

Submission Identification Number (SID)

T.....

тахрау	er s hanne	Social Secur	ity num	Jei
REV.	ANTH SAI REDDY VENUMBAKA	145-43	8-224	9
Spouse	's name	Spouse's so	cial secu	urity number
Part	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	er year you a	are au	thorizing.)
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	114,892.
2	Total tax		2	17,650.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	27,937.
4	Amount you want refunded to you		4	10,287.
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 perjury, 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

Х	I authorize	GLOBAL TA	AXES I	LLC	to enter or generate my PIN	E
				ERO firm name		

S Ent dor	as my
2	

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	to enter	or	generate	my	PIN
-----------------------------	----------	----	----------	----	-----

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature E	ate 🕨								
Practitioner PIN Method Returns Only—continue below									
Part III 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				0 all zei	 2	7 1	-

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

ERO's signature ► Date ►									
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So									
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 01/27/24 PRO	Form 8879 (Rev. 01-2021)						

1040		artment of the Treasury—Internal Revenue Serv S. Individual Income Ta		turn	202	3	OMB No. 1545-	0074	IRS Use Only	/—Do not w	rite or sta	aple in this space.	
For the year Jan	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate	instructions.	
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number	
REVANTH	SAI	REDDY	VEN	UMBAKA	L					145	43	2249	
		s first name and middle initial	Last r	name						Spouse	s social	security number	
Home address	(numbe	er and street). If you have a P.O. box, see	e instruc	tions.				A	pt. no.			ection Campaigr	
1017 156									.8	Check here if you, or your spouse if filing jointly, want \$3			
City, town, or p	ost offi	omplete	spaces bel	ow.	Sta	ite	ZIP co				nd. Checking a		
BELLEVUE			- ·		WP		980				not change		
Foreign country	/ name			Foreign pr	rovince/state/	count	ty	Foreig	n postal code	your tax	c or refu	_	
] Single											
Filing Status] Single] Married filing jointly (even if only o	no hac	l income)			Head of ho	usen	ый (поп)				
Check only		Married filing separately (MFS)	ne nac	rincome)			Qualifying	eurviv	ina snouse	(088)			
one box.	lf v	you checked the MFS box, enter the	e name	of your sr	oouse. If voi	ı che			•	. ,	ild's na	me if the	
	-	alifying person is a child but not you			secces in yes			0. Q					
<u></u>	<u>.</u>		• /						· 、	(1) 11			
Digital Assets		ny time during 2023, did you: (a) rec nange, or otherwise dispose of a dig										es 🛛 No	
Standard		neone can claim: You as a de					a dependent	.). (00					
Deduction	_	Spouse itemizes on a separate retur	•		•		•						
∆ae/Blindness	• You	: Were born before January 2, 1	959	Are bl	ind Soc	ouse	• 🗌 Was borr	1 hefc	re January	2 1959		s blind	
Dependents					Social security		(3) Relationshi	14				(see instructions):	
If more		irst name Last name		(2)	number		to you		Child tax c	redit	Credit fo	or other dependents	
than four													
dependents,													
see instructions and check	s												
here 🗌													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	tions) .			· ·		. 1a		146,092.	
Attach Form(s)	b	Household employee wages not re	-					· ·		. 1b			
W-2 here. Also	C	Tip income not reported on line 1a			,			• •		. 10			
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	uctions)	• •		. 1d			
1099-R if tax	e	Taxable dependent care benefits t						• •		. <u>1e</u>			
was withheld. If you did not	f	Employer-provided adoption bene						• •	· · ·	. 1f			
get a Form	g h	Wages from Form 8919, line 6 . Other earned income (see instruct						• •		. 1g . 1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (• •	· · · · ·	ì	• • •			•••	
instructions.	z	Add lines 1a through 1h	300 113	siluctions)		• •				. 1z		146,092.	
Attach Sch. B	2a	•	2a		· · · i	ь. • Т	axable interest	•••		. 2b			
if required.	3a	· · –	3a				Ordinary dividen						
	4a	F	4a				axable amount				-		
Standard Deduction for —	5a	Pensions and annuities	5a			bТ	axable amount			. 5b			
Single or	6a	Social security benefits	6a			bТ	axable amount			. 6b			
Married filing separately,	с	If you elect to use the lump-sum e	election	method,	check here	(see	instructions)		[
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche	dule D	if required	d. If not requ	uired	, check here		[7			
jointly or	8	Additional income from Schedule	1, line	10						. 8		-17,749.	
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8	3. This is y	our total inc	come	e			. 9	_	128,343.	
\$27,700 • Head of	10	Adjustments to income from Sche								. 10		13,451.	
household,	11	Subtract line 10 from line 9. This is	-		-					. 11		114,892.	
\$20,800 • If you checked T	12	Standard deduction or itemized								. 12		13,850.	
any box under Standard	13	Qualified business income deduct	ion fro	m Form 89				· ·		. 13	-	10.0=0	
Deduction, see instructions.	14	Add lines 12 and 13								. 14	-	13,850.	
	15	Subtract line 14 from line 11. If zer	ro or le	ess, enter -	-U This is y	our	taxable incom	е.		. 15		101,042.	

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

Form **1040** (2023)

Form 1040 (2023)								Page 2
Tax and	16	Tax (see instructions). Check if any fro	m Form	ı(s): 1 🗌 881	4 2 4972	3		16	17,650.
Credits	17	Amount from Schedule 2, line 3 .					[17	
	18	Add lines 16 and 17						18	17,650.
	19	Child tax credit or credit for other de	penden	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, line 8 .						20	
	21	Add lines 19 and 20					[21	
	22	Subtract line 21 from line 18. If zero of	or less,	enter -0			[22	17,650.
	23	Other taxes, including self-employme	ent tax,	from Schedule	e 2, line 21 .		[23	0.
	24	Add lines 22 and 23. This is your tota	al tax				[24	17,650.
Payments	25	Federal income tax withheld from:							
•	а	Form(s) W-2				25a 27	,937.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c						25d	27,937.
If you have a	26	2023 estimated tax payments and ar	nount a	pplied from 20	22 return .		[26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from Schedu				28			
	29	American opportunity credit from For				29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line 15 .				31			
	32	Add lines 27, 28, 29, and 31. These a	are vour	total other pa	avments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. These are	-				[33	27,937.
Refund	34	If line 33 is more than line 24, subtrac						34	10,287.
	35a	Amount of line 34 you want refunded				•	_	35a	10,287.
Direct deposit?	b	Routing number 0 4 4 0 0					Savings		
See instructions.	d			5 6			Ŭ		
	36	Amount of line 34 you want applied t	to your	2024 estimate	d tax	36			
Amount	37	Subtract line 33 from line 24. This is				-11			
You Owe	•.	For details on how to pay, go to www						37	
	38	Estimated tax penalty (see instruction	-	-		38			
Third Party	Do	you want to allow another person				See			
Designee		tructions					omplete bel	ow.	× No
J	De	signee's		Phone			onal identifica	ation	
	nar			no.			ber (PIN)		
Sign		der penalties of perjury, I declare that I have ef, they are true, correct, and complete. Dec							
Here			Jaration	1	i				
	Yo	ur signature		Date	Your occupation				t you an Identity N, enter it here
Joint return?					SOFTWARE	DEV ENGINEE	(
See instructions.	Sp	ouse's signature. If a joint return, both must	t sign.	Date	Spouse's occupat			S sent	t your spouse an
Keep a copy for			0				-		ction PIN, enter it here
your records.							(see ins	t.)	
	Ph	one no. (909) 470-7152		Email address	REVANTHSAIRE	DDY27@GMAIL.CO	M		
Paid	Pre	parer's name Preparer	r's signat	ure		Date	PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM B	PRIYA	RAM SAGAR	GUPTA TALLAM	1 02/02/2024	P020827	03	Self-employed
Use Only	Firi	n's name GLOBAL TAXES LI					Phone I	no. (678)965-9522
	Firi	n's address 245 ROONEY CT B	E BRU	NSWICK N	J 08816		Firm's E	EIN	84-3171965
Go to www.irs.go	v/Forn	1040 for instructions and the latest informa	ation.		BAA	REV 01/27/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 2023

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
REVANTH SAI RE	DDY VENUMBAKA	145-43	-2249

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	ach Schedule E .	5	-17,749.
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		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	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	8р		
q	Taxable distributions from an ABLE account (see instructions)	8q	_	
r	Scholarship and fellowship grants not reported on Form W-2	8r	_	
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t	-	
u	Wages earned while incarcerated	8u	-	
z	Other income. List type and amount:			
-		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter			_17 7/0
Ear D-	1040, 1040-SR, or 1040-NR, line 8		10	-17,749.
ror Pa	perwork neuronomation and monice, see your lax return instructions.		scneaul	e 1 (Form 1040) 2023

Par	Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis governmen		
	officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN	-	
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)	_	
b	Deductible expenses related to income reported on line 8I from the		
	rental of personal property engaged in for profit	_	
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m	_	
d	Reforestation amortization and expenses	_	
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974	·	
f	Contributions to section 501(c)(18)(D) pension plans	_	
g	Contributions by certain chaplains to section 403(b) plans 24g	-	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)		
		-	
	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		
i	Housing deduction from Form 2555		
J k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	-	
Ň	1041)		
z	Other adjustments. List type and amount:		
_	24z		
25	Total other adjustments. Add lines 24a through 24z	25	13,451.
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and or		·
	Form 1040, 1040-SR, or 1040-NR, line 10	26	13,451.
	BAA REV 01/27/24 PRO	Schedu	le 1 (Form 1040) 2023

SCHEDULE E		Supplemental Income and Loss							OMB No. 1545-0074			
(Form 1040)		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)								2023		
				ttach to Form 1040, 1040-SR, 1040-NR, or 1041. 						Attachment		
				r Instru	uctions an	d the la	test in				ce No. 13	
Name(s) shown on returnYour socREVANTH SAI REDDY VENUMBAKA145-4								3-2249				
Part			s From Rental Real Estate an	d Ro	valties			I	45 4	5 2249		
T UI C	Note: If yo	ou are in th	ne business of renting personal proper			c . See	instru	ctions. If you are	an indi	vidual, rep	ort farm	
			s from Form 4835 on page 2, line 40.									
			nts in 2023 that would require you								_	
			r will you file required Form(s) 1099?									
1a			ach property (street, city, state, ZIF		,							
<u>A</u>	KONDAGUNT.	A,GUDU	R POTTISRIRAMULU, NELLOF	r Ani	DHRA PR	RADESI	H IN	524101				
B												
<u>C</u>			<u> </u>				_					
1b	Type of Prope (from list below							ir Rental F Days	Personal Use Days		QJV	
Α			personal use days. Check the Q				350					
B	2	if you meet the requirements to		file as	a	B						
С			qualified joint venture. See instru	ictions	6.	С						
Туре	of Property:							1				
1	Single Family R	esidence	e 3 Vacation/Short-Term Ren	tal	5 Land			Self-Rental				
2	Multi-Family Re	sidence	4 Commercial		6 Roya	lties	8	Other (describe	e)			
								Properties	:			
Incom	ie:					Α		B			С	
3	Rents received	1		3		9	50.					
4	Royalties rece	ived		4								
Exper	ISES:											
5	-			5 6								
6		Nuto and travel (see instructions)				1 1	47					
7	Cleaning and maintenance					1,1	4/.					
8 9	Commissions											
10		9 10										
11	Legal and other professional fees					1,1	89.					
12	-		to banks, etc. (see instructions)	11 12		,_						
13		•		13								
14	Repairs			14		3 , 5	65.					
15	Supplies					3,7	89.					
16				16								
17				17		2,8						
18 19	Other (list)	•	pr depletion	18 19		6,1	30.					
20	· /		nes 5 through 19	20		18,6	99					
20	•		ne 3 (rents) and/or 4 (royalties). If	20		±0 , 0						
21			structions to find out if you must									
				21	-	-17 , 7	49.					
22	Deductible rer	ntal real e	estate loss after limitation, if any,									
	on Form 8582 (see instructions)				(17,74	249.)((
23a		•	ported on line 3 for all rental prope				23a	(950.			
b		•	ported on line 4 for all royalty prop				23b					
C d							23c	r -	120			
d	Total of all amounts reported on line 18 for all properties .						23d		L30.			
е 24	Total of all amounts reported on line 20 for all properties 18,69 Income. Add positive amounts shown on line 21. Do not include any losses 18,69							24				
24 25								24	(17,749.		
26		• •	e and royalty income or (loss).								_ , , , , , , , , , , , , , , , , , , ,	
			I IV, and line 40 on page 2 do no									
	Schedule 1 (Fo	orm 1040), line 5. Otherwise, include this ar	mount	in the tot	tal on li	ne 41	on page 2 .	26		-17,749.	

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2023

	4562		-	Infor		mortizatio			20 23
Depar Interna	ment of the Treasury al Revenue Service	Go to www.irs.gov/Form4562 for instructions and the latest information.							Attachment Sequence No. 179
Name	(s) shown on return			Busines	ss or activity to w	hich this form relat	tes		ifying number
REV	ANTH SAI REDD	Y VENUMBAK	A	Sch	E KONDAGU	jnta , Gudur		145	-43-2249
Pa		Expense Ce have any liste					nplete Part I.		
1	Maximum amount (see instruction	s)					1	1,160,000.
2	Total cost of section 179 property placed in service (see instructions)						2		
3	Threshold cost of section 179 property before reduction in limitation (see instructions)						3	2,890,000.	
4	Reduction in limitat	duction in limitation. Subtract line 3 from line 2. If zero or less, enter -0						4	
5		limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0 If married filing ately, see instructions						5	
6	(a) De	(a) Description of property (b) Cost (business use only) (c) Elected cost							
	Listed property. Ent						_	-	
-							7	8	
9								9	
10	•			•				10	
11					•	,	line 5. See instructions	11	
	•						<u>11</u> 13	12	
	Carryover of disallo Don't use Part II o						13		
							clude listed property	See	instructions)
	Image: Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service								
	during the tax year. See instructions.								
	5 Property subject to section 168(f)(1) election							15	
	Other depreciation		,					16	
Par	IIII MACRS De	preciation (D	on t include i	istea p		e instruction:	5.)		
17	MACDS deductions	for coasta pla	and in convice i	n tox y	Section A	a boforo 2022	•	17	
	 7 MACRS deductions for assets placed in service in tax years beginning before 2023					17			
10	asset accounts, che					•			
			ed in Service	During	a 2023 Tax Y		General Depreciation	n Svst	em
(a) Classification of property		(b) Month and year placed in service	(c) Basis for depre (business/investme only-see instruc	ciation ent use	(d) Recovery period	(e) Convention	(f) Method		epreciation deduction
19a	3-year property			,					
b									
С	7-year property								
d	10-year property								
	15-year property								
	20-year property								
	25-year property				25 yrs.		S/L		
h	Residential rental	01/23	175,	899.	27.5 yrs.	MM	S/L		6,130.
	property				27.5 yrs.	MM	S/L		
i	Nonresidential real				39 yrs.	MM	S/L		
	property					MM	S/L		-
00		-Assets Place	a in Service D	uring		ar Using the A	Iternative Depreciatio	on Sys	stem
	Class life				12				
	12-year				12 yrs. 30 yrs.	ММ	5/L 5/L		
	30-year				30 yrs. 40 yrs.	MM	5/L 5/L		
	40-year	See instructio	ins)		40 yrs.	IVIIVI	JIL		
	Listed property. Ent		/					21	
					lines 10 and	20 in column	(g), and line 21. Enter		
	here and on the app							22	6,130.

For Paperwork Reduction Act Notice, see separate instructions.

portion of the basis attributable to section 263A costs .

23 For assets shown above and placed in service during the current year, enter the

23