8879 Form

(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 securit	y number		
NARENDHAR REDDY ETTADI	146-89-	-5341		
Spouse's name	Spouse's soc	Spouse's social security number		
TEJASWI REDDY VYALLA	854-75-	-6424		
Part I Tax Return Information — Tax Year Ending December 31, 2023	(Enter year you a	re authorizi	ing.)	
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			147,904.	
 Total tax		3	14,995.	
4 Amount you want refunded to you		4	27,694.	
5 Amount you owe		5	12,699.	
Part II Taxpayer Declaration and Signature Authorization (Be sure you ge	et and keep a cop		eturn)	
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or a				
for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accepayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 . Payment cancella business days prior to the payment (settlement) date. I also authorize the financial institutions involve taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or amer Electronic Funds Withdrawal Consent.	count indicated in the ta institution to debit the terminate the authoriza- tion requests must be ed in the processing of to the payment. I furt	ax preparation entry to this attion. To revo received no the electroni her acknowle	n software for account. This oke (cancel) a o later than 2 ic payment of edge that the	
Taxpayer's PIN: check one box only ☒ I authorize GLOBAL TAXES LLC to enter or get	9	5 3 4	1	
X I authorize GLOBAL TAXES LLC to enter or ge		er five digits, b		
signature on the income tax return (original or amended) I am now authorizing.	doi	n't enter all zer	us	
I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner PI below.				
Your signature ▶D	ate ▶			
Spouse's PIN: check one box only				
	enerate my PIN 5	6 4 2	4 as my	
ERO firm name	,	er five digits, b		
signature on the income tax return (original or amended) I am now authorizing.	dor	n't enter all zer	os	
I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner PI below.				
Spouse's signature ▶ D	ate ▶			
Practitioner PIN Method Returns Only—continue				
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.		6 0 8 2 er all zeros	2 7 1	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual in authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I a requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providence.	am submitting this retu	rn in accorda	ance with the	

Don't Submit This Form to the IRS Unless Requested To Do So

Date ▶

REV 02/23/24 PRO

Form **8879** (Rev. 01-2021)

ERO's signature ▶

ERO Must Retain This Form — See Instructions

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

20**23** OMB No. 1545-0074

For the year Jan	ı. 1–Dec	. 31, 2023, or other tax year beginning		, 2023, end	ina		, 20	Soo sor	parate instructions.		
			 I				,				
Your first name			Last na						cial security number		
NARENDHA If joint return, si		Sirst name and middle initial	ETTA Last na						89 5341 social security number		
								·	75 6424		
TEJASWI Home address		er and street). If you have a P.O. box, see	VYAI e instruction				Apt. no.		itial Election Campaign		
1019 CLE				00.			7,000	t	ere if you, or your		
		ce. If you have a foreign address, also co	omplete s	paces below.	Sta	ite	ZIP code	spouse i	f filing jointly, want \$3		
MONROE			·		NO		28110		this fund. Checking a www.will not change		
Foreign country	/ name			Foreign province/state/o			Foreign postal code	1	your tax or refund.		
									You Spouse		
Filing Status	, [Single				Head of ho	ousehold (HOH)				
Check only		Married filing jointly (even if only o	ne had i	income)							
one box.		Married filing separately (MFS)				☐ Qualifying	surviving spouse	(QSS)			
	If y	ou checked the MFS box, enter the	e name c	of your spouse. If you	ı che	ecked the HOH	l or QSS box, 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	navr	ment for prope	rty or services): or	(b) sell.			
Assets		ange, or otherwise dispose of a dig	•				•	. ,	☐ Yes 🗵 No		
Standard		eone can claim: You as a de				a dependent		,			
Deduction		Spouse itemizes on a separate retur	•	•		*					
Ago/Blindness	Valu	☐ Were born before January 2, 1	050 [Are blind Spo		. Mag bar	n hoforo January	2 1050	☐ Is blind		
			909 _	Ī	use		n before January		ies for (see instructions):		
Dependents		instructions): irst name Last name		(2) Social security number		(3) Relationsh to you	Child tax c		Credit for other dependents		
If more than four	· · ·	GHA REDDY ETTADI		648-45-589	 7	Daughter	X				
dependents,	211121			010 13 303	,	Daugireer					
see instructions and check	s —										
here											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions)				. 1a	162,345.		
	b	Household employee wages not re	eported	on Form(s) W-2				. 1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions)				. 1c			
attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s) W-2 (see ir	nstru	uctions)		. 1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits	from For	rm 2441, line 26 .				. 1e			
was withheld.	f	Employer-provided adoption bene	efits fron	n Form 8839, line 29				. 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	tions)					. 1h	0.		
instructions.	i	Nontaxable combat pay election (see insti	ructions)		<u>1i</u>					
	<u>z</u> _	Add lines 1a through 1h	. ;					. 1z	162,345.		
Attach Sch. B	2a	' <u>-</u>	2a			axable interest		. 2b	6.		
if required.	<u>3a</u>	· ·	3a			Ordinary divider		. 3b	214.		
Standard	4a	_	4a			axable amount		. 4b			
Deduction for—	5a	_	5a			axable amount		. 5b			
Single or Married filing	6a	,	6a			axable amount	t _.	. 6b			
separately, \$13,850	C -	If you elect to use the lump-sum e			,	•	[╡┞ ,	7.61		
Married filing	7	Capital gain or (loss). Attach Sche							761. -15,422.		
jointly or Qualifying	8 9	Additional income from Schedule						. <u>8</u>	147,904.		
surviving spouse, \$27,700	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						. 10	14/,304.		
Head of	11	Adjustments to income from Sche Subtract line 10 from line 9. This is						. 11	147,904.		
household, [\$20,800	12	Standard deduction or itemized	-					. 12	27,700.		
If you checked any box under	13	Qualified business income deduct				 15-A		. 13	26.		
Standard Deduction,	14	Add lines 12 and 13			553			. 14	27,726.		
see instructions.	15	Subtract line 14 from line 11. If zer	ro or les	s, enter -0 This is v	our 1	taxable incom	e		120,178.		

orm 1040 (2023)								Page
Tax and	16	Tax (see instructions). Check if any from Form	(s): 1 8814	2 4972	з 🗌		. 1	6	16 , 995.
Credits	17	Amount from Schedule 2, line 3					. 1	7	
	18	Add lines 16 and 17					. 1	8	16 , 995.
	19	Child tax credit or credit for other dependent	ts from Schedı	ıle 8812			. 1	9	2,000.
	20	Amount from Schedule 3, line 8					. 2	0	
	21	Add lines 19 and 20					. 2	1	2,000.
	22	Subtract line 21 from line 18. If zero or less,	enter -0				. 2	2	14,995.
	23	Other taxes, including self-employment tax,	from Schedule	2, line 21			. 2	3	0.
	24	Add lines 22 and 23. This is your total tax					. 2	4	14,995.
Payments	25	Federal income tax withheld from:							
•	а	Form(s) W-2			25a	27,69	94.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c					. 25	īd	27 , 694.
you have a	26	2023 estimated tax payments and amount a					. 2	6	
alifying child,	27	Earned income credit (EIC)		. No .	27				
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812	<u>.</u>		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	total other pa	yments and refu	ndable cre	edits .	. 3	2	
	33	Add lines 25d, 26, and 32. These are your to	tal payments				. 3	3	27 , 694.
Refund	34	If line 33 is more than line 24, subtract line 24	4 from line 33.	This is the amour	t you over	paid .	. 3	4	12,699.
	35a	Amount of line 34 you want refunded to you	ی. If Form 8888	is attached, chec	k here .		☐ 35	5a	12 , 699.
irect deposit?	b	Routing number 1 1 1 0 0 0 6	1 4	c Type:	Checking	Savi	ngs		
ee instructions.	d	Account number 8 5 7 0 3 7 0	5 0						
	36	Amount of line 34 you want applied to your	2024 estimate	d tax	36				
Amount	37	Subtract line 33 from line 24. This is the amo	ount vou owe.		-				
ou Owe		For details on how to pay, go to www.irs.gov	•	see instructions.			. 3	7	
	38	Estimated tax penalty (see instructions) .			38				
hird Party	Do	you want to allow another person to disc	cuss this retur	n with the IRS?	See		•		
)esignee	ins	tructions			. 🗌 Y	es. Comp	lete belo	w.	⋉ No
-		signee's	Phone			Personal i		on	
	nar		no.			number (F			
Sign		der penalties of perjury, I declare that I have examined ef, they are true, correct, and complete. Declaration of							
Here					ocu un an III	ا المالمال	•		vou an Identity
		ır signature	Date	Your occupation			It the IDS	cant 1	vou on Idontitu

See instructions. Keep a copy for your records.	opouse s signature. Il a joint return, both must sign.		both must sign.	Date	Spouse's occupat IT EMPLOYE			If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Phone no.	(408) 207-383	7	Email address	NARENDHAR4)50@GMAIL.CO	MC			
Date	Preparer's nan	ne	Preparer's signa	ture		Date	PTIN	Check if:		
Paid	SYAM PRIYA RAM	SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/02/2024	P0208270	3 Self-employed		
Preparer Use Only	Firm's name	GLOBAL TA	XES LLC				Phone no	(678) 965-9522		
Use Only	Firm's address	245 ROONE	Y CT E BRU	JNSWICK N	J 08816		Firm's EIN	84-3171965		
Go to www.irs.go	v/Form1040 for in	structions and the late	st information.		BAA	REV 02/23/24 PRO		Form 1040 (2023)		

APPLICATION DEVELOPER

(see inst.)

Joint return?

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment

Department of the Treasury Internal Revenue Service

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

NARENDHAR REDDY ETTADI & TEJASWI REDDY VYALLA

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

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

Your social security number 146-89-5341

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	-15,422.
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		
1	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. Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-15 , 422.

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-b	basis government		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	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	, , , , , , , , , , , , , , , , , , ,	24a	-	
b	Deductible expenses related to income reported on line 8l from the			
		24b	-	
С	The state of the s			
		24c	-	
d		24d	-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g		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			
	tax law violations	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		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

2023

OMB No. 1545-0074

Attachment Sequence No. **12**

Your social security number

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

146-89-5341 NARENDHAR REDDY ETTADI & TEJASWI REDDY VYALLA Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (a) with column (a) 1a 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 . 1b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (g) (h) Gain or (loss) Adjustments Subtract column (e) (d) (e) lines below Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2, column (a) with column (a) 8a 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 . . 8b Totals for all transactions reported on Form(s) 8949 with 3,031. 2,205. -65. 761. Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 761. 15

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

Part III Summary

16	Combine lines 7 and 15 and enter the result	16	761.
	• 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 line 22.		
	• 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?		
	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.		
	No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:		
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?		
	☐ 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.		

Form 8949 (2023) Attachment Sequence No. **12A** P

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side NARENDHAR REDDY ETTADI & TEJASWI REDDY VYALLA

Social security number or taxpayer identification number $14\,6{-}8\,9{-}5\,3\,4\,1$

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☒ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on	Form(s) 1099)-B showing bas	•		•	e)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, i If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)		and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/23	1,365.	820.	E	-65.	480.
ROBINHOOD SECURITIES LLC	01/01/22	12/31/23	1,666.	1,385.			281.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above	al here and inc	lude on your					

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

3,031.

above is checked), or line 10 (if Box F above is checked) .

BAA REV 02/23/24 PRO Form **8949** (2023)

2,205.

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. Attachment Sequence No. **13** Go to www.irs.gov/ScheduleE for instructions and the latest information.

OMB No. 1545-0074

Your social security number

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

NAR	ENDHAR REDDY ETTADI & TEJASWI REDDY VYAI	LLA					146-8	39-534	11	
Par						•				
	Note: If you are in the business of renting personal proper	rty, use	Schedule	C. See	instru	ctions. If you ar	e an inc	lividual, r	eport far	m
^	rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you	to file	Form(a) 1	0002 0	`oo inc	atructions.			Voc. V	No
	If "Yes," did you or will you file required Form(s) 1099?									No
					• •			· ⊔	163	INO
1a	Physical address of each property (street, city, state, Zlf		•							
Α	1-61 kanampalli KARIMNAGAR TELANGANA	IN 5	505475							
В										
С										
1b	Type of Property 2 For each rental real estate prope				Fa	ir Rental		nal Use	, C	JV
	(from list below) above, report the number of fair personal use days. Check the Q	rental	and			Days	D	ays		
<u>A</u>	ja personal use days. Check the Q			A		365		0		
В	qualified joint venture. See instru			В						
<u>C</u>	<u> </u>			С						
	of Property:		_ l ====		7	Calf Dandal				
	Single Family Residence 3 Vacation/Short-Term Ren	itai	5 Land			Self-Rental	l= =\			
2	Multi-Family Residence 4 Commercial		6 Roya	lities	8	Other (descri	be)			
						Propertie	s:			
Inco	me:			Α		В			С	
3	Rents received	3		9	85.					
4	Royalties received	4								
-	nses:									
5	Advertising	5								
6	Auto and travel (see instructions)	6		1 0						
7	Cleaning and maintenance	7		1,0	57.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10		1 1	2.2					
11	Management fees	11		1,1	23.					
12 13	Mortgage interest paid to banks, etc. (see instructions)	12								
14	Other interest	14		3,9	5.8					
15	Supplies	15		3,7						
16	Taxes	16		- J /	10.					
17	Utilities	17		2,9	41					
18	Depreciation expense or depletion	18		3,5						
19	Otl /(!-1\	19		-,-						
20	Total expenses. Add lines 5 through 19	20		16,4	07.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If									
	result is a (loss), see instructions to find out if you must									
	file Form 6198	21	-	-15 , 4	22.					
22	Deductible rental real estate loss after limitation, if any,									
	on Form 8582 (see instructions)	22	(15 , 42	2.)	()()
23a	Total of all amounts reported on line 3 for all rental prope				23a		985.			
b	Total of all amounts reported on line 4 for all royalty prop				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		583.			
е	Total of all amounts reported on line 20 for all properties				23e	16,	407.			
24	Income. Add positive amounts shown on line 21. Do not		-				24			00.
25	Losses. Add royalty losses from line 21 and rental real estat							(15,4	22.)
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this ar						ີ ₂₆		-15	422.
	2324.0 · (1. 31.11. 1. 31.0), 111.0 0. 34.101.W100, 111.014.00 till 341				TI	pago 2 .	20	1	⊥∪ ,	·

SCHEDULE 8812 (Form 1040)

Department of the Treasury

Internal Revenue Service
Name(s) shown on return

13

Credits for Qualifying Children and Other Dependents

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

Go to www.irs.gov/Schedule8812 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. **47**

Your social security number

NARENDHAR REDDY ETTADI & TEJASWI REDDY VYALLA 146-89-5341 Part I Child Tax Credit and Credit for Other Dependents Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR 1 147,904. Enter income from Puerto Rico that you excluded 2a Enter the amounts from lines 45 and 50 of your Form 2555 . . . 2b Enter the amount from line 15 of your Form 4563 **2c** 2d3 3 147,904. 4 Number of qualifying children under age 17 with the required social security number 5 5 2,000. Number of other dependents, including any qualifying children who are not under age 6 Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4. 7 7 8 8 Add lines 5 and 7 2,000. Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 400,000. 10 Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 10 0. 11 11 0. 2,000. 12 Is the amount on line 8 more than the amount on line 11? 12 No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit.

If the amount on line 12 is more than the amount on line 14, you may be able to take the **additional child tax credit** on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents

Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.

Xes. Subtract line 11 from line 8. Enter the result.

Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.

Enter the amount from Credit Limit Worksheet A

16,995.

2,000.

13

Schedule 8812 (Form 1040) 2023 Page **2**

Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line	27 .	
16a	Subtract line 14 from line 12. If zero, stop here ; you cannot take the additional child tax credit. Skip Parts II-A		
	and II-B. Enter -0- on line 27	16a	0.
b	Number of qualifying children under 17 with the required social security number: x \$1,600.		
	Enter the result. If zero, stop here; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	
	TIP: The number of children you use for this line is the same as the number of children you used for line 4.		
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\dots \dots \dots \dots \dots \dots \dots \dots \dots$	20	
	Next. On line 16b, is the amount \$4,800 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
	Otherwise, go to line 21.		
Part	, ,	s of F	uerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or		
	if you are a bona fide resident of Puerto Rico, see instructions		
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form		
22	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22		
23	Add lines 21 and 22		
24	1040 and		
	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27, and Schedule 3 (Form 1040), line 11.		
25	,	25	
25 26	Subtract line 24 from line 23. If zero or less, enter -0	25	
20	Next, enter the smaller of line 26 on line 27.	20	
Part	II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	
	2 John Mariania was crous. Diese was universe our round to 19 10 10 10 10 10 10 10 10 10 10 10 10 10		

8995

Department of the Treasury Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2023

Attachment
Sequence No. 55

Name(s) shown on return

NARENDHAR REDDY ETTADI & TEJASWI REDDY VYALLA

Your taxpayer identification number
146-89-5341

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

		# N -	Ī ,,	0 110 11
1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number		Qualified business income or (loss)
i				
ii				
iii				
iv				
V				
2	Total qualified business income or (loss). Combine lines 1i through 1v,			
	column (c)	2		
3	Qualified business net (loss) carryforward from the prior year	3 (4	
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4		
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)			
	(see instructions)	6 130.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior	,		
	year	7 (
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero	120		
^	or less, enter -0	8 130.		26.
9 10	REIT and PTP component. Multiply line 8 by 20% (0.20)		10	26.
11	Taxable income before qualified business income deduction (see instructions)	11 120,204.	10	20.
12	Enter your net capital gain, if any, increased by any qualified dividends	11 120,204.		
12	(see instructions)	12 845.		
13	Subtract line 12 from line 11. If zero or less, enter -0-	13 119,359.		
14	Income limitation. Multiply line 13 by 20% (0.20)		14	23,872.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also		· · ·	20,072.
	the applicable line of your return (see instructions)		15	26.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater that		16	(0.
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a			•
	zero, enter -0		17	0.

(Rev. November 2023)

Department of the Treasury Internal Revenue Service

Taxpayer name(s) shown on return

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and
Credit for Other Dependents (DDC)), and Head of Household (HOH) Filing Status

To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074 For tax year 20 23 Attachment Sequence No. 70

NARI	ENDHAR REDDY ETTADI & TEJASWI REDDY VYALLA	146-89-5343	1		
Prepare	r's name	Preparer tax identifica	ition numb	per	
SYAI	M PRIYA RAM SAGAR GUPTA TALLAM	P02082703			
Part					
	e check the appropriate box for the credit(s) and/or HOH filing status claimed on the return benefit(s) claimed (check all that apply).		the rel	I	HOH
1	Did you complete the return based on information for the applicable tax year provided or reasonably obtained by you?		Yes	No	N/A
2	If credits are claimed on the return, did you complete the applicable EIC and/or C worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Sched 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions worksheet(s) that provides the same information, and all related forms and schedules claimed?	ule 8812 (Form s, or your own	X	П	
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you rethe following. • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status. • Review information to determine that the taxpayer is eligible to claim the credit(s) and status and to figure the amount(s) of any credit(s)	's responses to	X		
4	Did any information provided by the taxpayer or a third party for use in preparing information reasonably known to you, appear to be incorrect, incomplete, or inconsist answer questions 4a and 4b. If " No ," go to question 5.)	the return, or tent? (If "Yes,"		×	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent in				
b	Did you contemporaneously document your inquiries? (Documentation should include you asked, whom you asked, when you asked, the information that was provided, and information had on your preparation of the return.)	the impact the			
5	Did you satisfy the record retention requirement? To meet the record retention requirement keep a copy of your documentation referenced in question 4b, a copy of this Form 8867 applicable worksheet(s), a record of how, when, and from whom the information used to 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) processes that you relied on to determine eligibility for the credit(s) and/or HOH filing statement that the amount(s) of the credit(s)	, a copy of any prepare Form provided by the	X		
	List those documents provided by the taxpayer, if any, that you relied on:				
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return is selected for audit?	eturn if his/her	×		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous	year?		×	
	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)	-		_	
а	Did you complete the required recertification Form 8862?				
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a				
	correct Schedule C (Form 1040)?				

orm 8	867 (Rev. 11-2023)			Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	Yes	No	N/A
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?			
Part	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	×		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar			
Part		x an to	 Part \	/\ /\
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qua	alified	Yes	No
В.	tuition and related expenses for the claimed AOTC?		<u> </u>	
Part	- J			
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax and provided more than half of the cost of keeping up a home for the year for a qualifying person?		Yes	No
Part		• •		
	You will have complied with all due diligence requirements for claiming the applicable credit(s) and on the return of the taxpayer identified above if you:	or HO	H filing	status
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's respo in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(status and to figure the amount(s) of the credit(s);	nses or s) and/d	the retor HOH	turn or filing
	 B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checkled credit(s) claimed and HOH filing status, if claimed; 	list for a	ny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 880 Document Retention.	67 instr	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).	's eligib	ility for	the
	A record of how, when, and from whom the information used to prepare this form and the applica obtained.	ble wor	ksheet(s) was
	A record of any additional information you relied upon, including questions you asked and the tax determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount	payer's ınt(s) of	respon the cre	ises, to edit(s).
	If you have not complied with all due diligence requirements, you may have to pay a penalty for eac related to a claim of an applicable credit or HOH filing status (see instructions for more information	h failur).	e to co	mply
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct complete?	-	Yes	No

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.

OMB No. 1545-0172 Attachment Sequence No. **179**

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

Business or activity to which this form relates

Identifying number

NARI	ENDHAR REDDY ETTAD	I & TEJASWI R	REDDY VYALLA Sch	E 1-61 ka	anampalli	•	146	5-89-5341
Pa			rtain Property Und ed property, comple			omplete Part I.	•	
1	Maximum amount (see instructions	s)				1	1,160,000.
2	Total cost of section	n 179 property	placed in service (se	e instructions)		2	, ,
3			•		•	ions)	3	2,890,000.
4			•		•		4	, ,
5	Dollar limitation for	tax year. Sub	otract line 4 from lin	ne 1. If zero	or less, ent	er -0 If married filing	_	
	separately, see inst						5	
6	(a) De	escription of proper	ty	(b) Cost (busi	ness use only)	(c) Elected cost		
			· " 00					
			from line 29					
_			•		•	d7	8	
9							9	
10	•		•				10	
11				•	,	or line 5. See instructions	11	
12	Section 179 expens	se deduction. A	dd lines 9 and 10, bu	ıt don't enter	more than lir	ne <u> 11</u>	12	
13	Carryover of disallo	wed deduction	to 2024. Add lines 9	and 10, less	line 12 .	13		
Note	e: Don't use Part II o	r Part III below	for listed property. Ir	nstead, use P	art V.			
Pai	rt II Special Dep	reciation All	owance and Othe	r Depreciat	ion (Don't i	nclude listed property	. See	instructions.)
14	Special depreciation	n allowance f	or qualified property	(other than	listed prop	erty) placed in service		
							14	
15							15	
							16	
Par	t III MACRS De	preciation (D	on't include listed	property. Se	e instructio	ns.)		
		pr (Section A				
17	MACRS deductions	for assets plac	ced in service in tax v		na before 20:	23	17	
						to one or more general		
	asset accounts, che	•		•	•	~ —		
	Section B					ne General Depreciation	Syst	em
(a)	Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	on (f) Method	(g) D	epreciation deduction
19a	3-year property							
b								
	10-year property							
	15-year property							
	f 20-year property							
	25-year property			25 yrs.		S/L		
	Residential rental	02/22	110 FOC	27.5 yrs.	MM	S/L		2 502
•		02/23	112,596.	27.5 yrs.	MM	5/L		3,583.
	property				MM	5/L		
	i Nonresidential real			39 yrs.				
	property		o . b .	0000 T \	MM	9/L		
		- Assets Place	d in Service During	2023 Tax Ye	ar Using the	Alternative Depreciation	on Sy	stem
	Class life			1.0		S/L		
	12-year			12 yrs.		S/L		
	30-year			30 yrs.	MM	S/L		
	40-year			40 yrs.	MM	S/L		
Par	- ,	See instructio						
21	Listed property. Ent	ter amount fron	n line 28				21	
22			lines 14 through 17, of your return. Partne			n (g), and line 21. Enter	22	3,583.
23		bove and plac	ed in service during t	•	-			3,303.

D-40 < Stap Reti	le All	Pages		our				<u>i</u> na D	Tax Red Departme Ended Return	nt of R		DOR Use Only			
For ca	alenda	r year	2023, c	or fiscal year		1		23	and ending			Are you a ve	eteran?		No X
		AR R emen	ED TINE	ETT <i>I</i>	ADI		TE	EJASV	VI REDDY		ALLA 6895341		se a veteran? anted an automat		No X
MONE) MECKL					Spouse's S	SSN: 85	4756424		income tax retur	n, e.g., Form	
Filing	Status	;	1. Sino	gle ad of Househo	old X		ed Filing fying Wic		☐ 3. Ma	rried Filing	Separately	Year spou		X	
1	•		nt of N.C	C. for the ent	ire year?		Yes X	No		Return fo	or deceased t	•	Date of deat	h:	
				ent for the e			Yes 🛚 🗵				or deceased s	•	Date of deat ution or designate		or all of
your	overpa	yment	to the F	Fund. To ma	ake a contr	ibution,	enclose	Form I	NC-EDU and	l your pay	ment of \$	0.	To designate	-	
$\overline{}$				•	_		_				<i>r information</i> 15. 2024. an		<i>und.)</i> zen or residen	t.	
		-				-			-	-	ersonal Repr				
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NARE	NDH	AR :	RED		ETTA	DI				146	895341		MECKL		
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06			1479	904		16			0		26C		0		
07				0		18	Y		0		26E		0		70201
09				0		20A			5515		EU				5 0 0
10A				1		20B			1534		27		0		2 5
10B				0		21A			0		29		0		
11	S	Y	I	N		21B			0		30		0		
11			255	500		21C			0		31		0		
13			000	000		21D			0		32		0		
14			1224	104		26A			0		34		1235		
15			58	314		26B			0						
TN	4	082	0738	337		PN	6	7896	659522		PP	P02	082703		
			Below		efund D			1235		yment			0		
the best of	and cert of my kno	ity that I I owledge	have exai and belie	mined this return ef, they are true,	n and accomp correct, and c	oanying sch complete.	nedules an	id statem	ents, and to	L Chec	ck here if you a scuss this retur	uthorize the N n and attachn	North Carolina Denents with the pa	epartment of F id preparer be	Revenue elow.
Your Sigr	nature					Date	Spou	use's Sigr	nature (If filing jo	oint return, b	oth must sign.)	Date	408207 Contact Phon	3837 e No. (Include a	area code)
PAID PR		R USE O	NLY If	prepared by a p	erson other ti	han taxpay			, ,,		f which the prepar	rer has any kno	wledge.	,	
SYAM	pp T	. A D	S M S	SAGAR GU	JPT 03	02 2	24	(672) 965-95:	22			P0208	2703	
Paid Pre				JAGAN GC	DEI US	Date			ntact Phone Nun		e area code)			IN, SSN, or PTI	N
	If yo	ou ARE	NOT de		-						R, RALEIGH, N REVENUE, P.O)1 , RALEIGH, NC 2	27640-0640	

	e (First 10 Characters) ETTADI Your Social Securi	ty Number 14	1003	
	D-400 Line-by-Line Information			
6.	Federal Adjusted Gross Income		6.	1479
7.	Additions to Federal Adjusted Gross Income		7.	
8.	Add Lines 6 and 7		8.	1479
9.	Deductions From Federal Adjusted Gross Income		9.	
10.	Child Deduction			
	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit	10	a.	
	b. Enter the amount of the child deduction	10)b.	
11.	N.C. Standard Deduction	1	11.	
11.	N.C. Itemized Deduction		11.	
11.	Deduction amount		11.	255
12.	a. Add Lines 9, 10b, and 11		2a.	255
	b. Subtract Line 12a from Line 8		2b.	1224
13.	Part-year Residents and Nonresidents Taxable Percentage	1	13.	0.00
14.	N.C. Taxable Income		14.	1224
15.	N.C. Income Tax		15.	58
16.	Tax Credits		16.	
17.	Subtract Line 16 from Line 15		17.	58
18.	Consumer Use Tax		18.	00
	You certify that no Consumer Use Tax is due			
19.	Add Lines 17 and 18	1	19.	58
			_	
20a. 20b.	Your tax withheld Spouse's tax withheld		Da. Db.	
20b.				55 15
20b.	Spouse's tax withheld	20		
20b.	Spouse's tax withheld Tax Payments	20	Ob.	
20b. Other 21a.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension	20 21 21	1a. 1b.	
20b. Other 21a. 21b.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership	20 21 21 21	1a. 1b.	
20b. Other 21a. 21b. 21c. 21d.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation	20 21 21 21 21	1a. 1b. 1c. 1d.	
20b. Other 21a. 21b. 21c. 21d. 22.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments	21 21 21 21 21	1a. 1b. 1c. 1d. 22.	15
20b. Other 21a. 21b. 21c. 21d. 22. 23.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22	21 21 21 21 21 22	1a. 1b. 1c. 1d. 22.	15
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds	20 21 21 21 21 22 2	1a. 1b. 1c. 1d. 22. 23.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23	21 21 21 21 2 2 2	1a. 1b. 1c. 1d. 22. 23. 24.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due	20 21 21 21 22 2 2 2 2	1a. 1b. 1c. 1d. 22. 23. 24. 25.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties	20 21 21 21 22 2 2 2 2 26	11a. 11b. 11c. 11d. 222. 23. 24. 25.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest	20 21 21 21 22 2 2 2 26 26	11a. 11b. 11c. 11d. 222. 233. 224. 66a.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d	20 21 21 21 22 2 2 2 26 26 26	11a. 11b. 11c. 11d. 222. 23. 244. 25. 6a. 66c.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax	20 21 21 21 22 2 2 26 26 26 26	1a. 1b. 1c. 1d. 22. 23. 24. 25. 6a. 6b.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax	20 21 21 21 22 2 2 26 26 26 26 26	1a. 1b. 1c. 1d. 22. 23. 24. 25. 6a. 6b. 6c.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount	20 21 21 21 22 2 2 26 26 26 26 26 26	11a. 11b. 11c. 11d. 222. 23. 24. 25. 66. 66. 66.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment	20 21 21 21 22 2 2 26 26 26 26 26 26	1a. 1b. 1c. 1d. 22. 23. 24. 25. 6a. 6b. 6c.	
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount	20 21 21 21 22 2 2 26 26 26 26 26 26	11a. 11b. 11c. 11d. 222. 23. 24. 25. 66. 66. 66.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment	20 21 21 21 22 22 26 26 26 26 26 26 26 26 26 26 26	11a. 11b. 11c. 11d. 222. 23. 24. 25. 66. 66. 66.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to:	20 21 21 21 22 2 2 26 26 26 26 26 26 2	11a. 11b. 11c. 11d. 222. 23. 24. 25. 66c. 66d. EU 66e. 277.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou	Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to:	20 21 21 21 22 22 26 26 26 26 26 26 26 26 26 26 26	11a. 11b. 11c. 11d. 222. 23. 24. 25. 66a. 60d. EU 66e. 277.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou 29. 30. 31.	Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to: Amount of Line 28 to be applied to 2024 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund N.C. Education Endowment Fund	20 21 21 21 22 22 26 26 26 26 26 26 26 26 26 26 26	1a. 1b. 1c. 1d. 22. 23. 24. 25. 6a. 6b. 6c. 6d. EU 27. 28.	70
20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou	Spouse's tax withheld Tax Payments 2023 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to: Amount of Line 28 to be applied to 2024 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund	20 21 21 21 22 22 26 26 26 26 26 26 27 27 28 28 28 28 28 28 28 28 28 28 28 28 28	11a. 11b. 11c. 11d. 222. 233. 224. 255. 66a. 66d. EU 66e. 227. 228.	70