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.

Submission Identification Number (SID)

Taxpaver's name

Taxpay	ver's name	Social security number						
HAR	SHITH REDDY KUMBHAM		712-95-7542					
Spouse	e's name		Spouse's soci	al secu	rity number			
Par	t I Tax Return Information – Tax Year Ending December 31, 2	023 (Enter	year you ar	re aut	horizing.)			
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	69,517.			
2	Total tax			2	7,556.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	10,891.			
4	Amount you want refunded to you			4	3,335.			
5	Amount you owe			5				

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

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	
------------	------	-------	-----	-----	------	--

I authorize GLOBAL TAXES LLC to enter or generate my PIN

5	7	5	4	2	
Ent dor	as				

01/19/2024

my

as mv

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

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

Your signature 🕨

Offeddy

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date 🕨

Enter five digits, but don't enter all zeros

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

ERO firm name

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 ► D	ate							
Practitioner PIN Method Returns Only—continue	bel	ow						
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	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 >			
ERO Must Retain This F Don't Submit This Form to the			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 01/12/24 PRO	Form 8879 (Rev. 01-2021)

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use Onl	ly—Do not w	rite or sta	ple in this space.	
For the year Jan	. 1-Dec	. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See separate instructions.			
Your first name	and mi	iddle initial	Last r	name						Your so	cial sec	urity number	
HARSHITH	I REI	DDY	KUM	BHAM						712	95	7542	
		s first name and middle initial	Last r									security number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	Apt. no.	Preside	ntial Ele	ection Campaign	
3400 RAC	HEL	TERRACE						5	-)			ou, or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP c	ode			jointly, want \$3	
PINE BRC	OK				NJ 07							nd. Checking a not change	
Foreign country	name			Foreign p	rovince/state/	count	ty	Foreig	n postal code			0	
											🗌 Yo	ou 🗌 Spouse	
Filing Status	X] Single					Head of he	ouseh	old (HOH)				
Check only] Married filing jointly (even if only or	ne had	l income)									
one box.		☐ Married filing separately (MFS) □ Qualifying surviving spouse (QSS)											
	lf y	If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the											
	qu	qualifying person is a child but not your dependent:											
Digital	Atar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d award or	navr	ment for prope	rtv or	services): o	r (b) sell			
Assets		ange, or otherwise dispose of a digi						-			🗌 Ye	es 🛛 No	
Standard	Som	eone can claim: You as a de	pende	nt 🗌	Your spous	e as	a dependent	, ,					
Deduction		Spouse itemizes on a separate return			dual-status	alien	, 1						
Age/Blindness	You:	: 🗌 Were born before January 2, 1	959	Are bl	lind Spa	ouse	: 🗌 Was bor	n befo	ore January	2, 1959		s blind	
Dependents		-		(2) 5	Social security		(3) Relationsh	1	-		fies for (see instructions):	
If more		irst name Last name		(=) <	number		to you	۰p	Child tax of	credit	Credit fo	r other dependents	
than four													
dependents,													
see instructions and check	3												
here													
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	ee instruc	ctions) .					. 1a	1	84,685.	
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .					. 1b)		
W-2 here. Also	С	Tip income not reported on line 1a	ı (see i	structions)						. 10	:		
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	uctions)			. 10	I		
1099-R if tax	е	Taxable dependent care benefits f								. 1e	•		
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8839, line 29						. 1f			
lf you did not get a Form	g	Wages from Form 8919, line 6 .	· ·							. 1g	<u> </u>		
W-2, see	h	Other earned income (see instructi					· · · · ·	···		. 1h		0.	
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			1 i					04 605	
	<u>z</u>	Add lines 1a through 1h	· ·		· · ·	 		• •		. 1z	-	84,685.	
Attach Sch. B if required.	2a	'	2a				axable interest		· · ·				
	<u>3a</u>	· · · · · · · · · · · · · · · · · · ·	3a				Ordinary divider				-		
Standard	4a		4a				axable amoun			. 4b			
Deduction for –	5a		5a				axable amoun			. 5b	-		
 Single or Married filing 	6a	, _	6a		abaal: 5 -::		axable amoun	ι		. 6b	·		
separately, \$13,850	c 7	If you elect to use the lump-sum el						• •					
 Married filing 	7 0	Capital gain or (loss). Attach Scher						• •	• • •			-15,168.	
jointly or Qualifying	8	Additional income from Schedule							• • •	. <u>8</u> . 9		<u>-15,168.</u> 69,517.	
surviving spouse, \$27,700	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income										JI/.	
 Head of 	10 11	Subtract line 10 from line 9. This is						• •		· 10	_	69,517.	
household, [\$20,800	12	Standard deduction or itemized	-		-			• •		. 12		13,850.	
If you checked any box under	13	Qualified business income deducti					 15-А	• •	• • •	. 13		10,000.	
Standard	13 14	Add lines 12 and 13						• •		. 14	-	13,850.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer						e .		. 15	_	55,667.	
			5 01 10		5 y								

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 from Form	(s): 1 🗌 881	4 2 4	972	3		16	7,556.
Credits	17	Amount from Schedule 2, line	e3						17	
	18	Add lines 16 and 17							18	7,556.
	19	Child tax credit or credit for o	other dependen [.]	ts from Sched	ule 8812 .				19	
	20	Amount from Schedule 3, line	e8						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18.	If zero or less,	enter -0					22	7,556.
	23	Other taxes, including self-er	mployment tax,	from Schedule	e 2, line 21				23	0.
	24	Add lines 22 and 23. This is	our total tax						24	7,556.
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				.	25a	10,	891.	
	b	Form(s) 1099				. [25b			
	с	Other forms (see instructions				. [25c			
	d	Add lines 25a through 25c							25d	10,891.
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20	22 return .				26	
qualifying child,	27	Earned income credit (EIC)		• •		1	27			
attach Sch. EIC.	28	Additional child tax credit from				F	28			
	29	American opportunity credit	from Form 8863	B, line 8		. [29			
	30	Reserved for future use .				F	30			
	31	Amount from Schedule 3, lin				- F	31			
	32	Add lines 27, 28, 29, and 31.	These are vour	total other pa	avments an	nd refur	ndable	credits	32	
	33	Add lines 25d, 26, and 32. Th	-						33	10,891.
Refund	34	If line 33 is more than line 24							34	3,335.
	35a	Amount of line 34 you want					•	-		3,335.
Direct deposit?	b	Routing number 1 2 1			c Type:		Checki		vings	
See instructions.	d	Account number 3 2 5							Ŭ	
	36	Amount of line 34 you want a				.	36			
Amount	37	Subtract line 33 from line 24.	This is the am	ount vou owe						
You Owe	•.	For details on how to pay, go				tions .			37	
	38	Estimated tax penalty (see in	-	-		1	38			
Third Party	Do	you want to allow another					See			
Designee		structions					. [Yes. Com	nplete below.	× No
J	De	signee's		Phone					al identificatior	l
	nar			no.				number	. ,	
Sign		der penalties of perjury, I declare th ief, they are true, correct, and com								
Here										
	Yo	ur signature		Date	Your occup	ation				ent you an Identity PIN, enter it here
Joint return?		CATODOC	01	/19/2024	SOFTWA	RE EI	NGIN	EER	(see inst.)	,
See instructions.	Sp	ouse's signature. If a joint return, b		Date	Spouse's or	If the IRS se	ent your spouse an			
Keep a copy for your records.			-							tection PIN, enter it here
your records.	(see									
	Ph	one no. (732) 629-3422		Email address	HARSHITH	HRKUMB	HAMQG	MAIL.COM		
Paid		parer's name	Preparer's signat				Date		PTIN	Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TA	LLAM	01/2	0/2024 P	02082703	
Use Only	Firi	m's name GLOBAL TAX	KES LLC						Phone no.	(678)965-9522
	Firi	m's address 245 ROONE	CT E BRU	NSWICK N	J 08816				Firm's EIN	84-3171965
Go to www.irs.go	v/Forn	n1040 for instructions and the lates	st information.		BAA		REV 01/	12/24 PRO		Form 1040 (2023)

SCHEDU	LE 1
(Form 104	0)

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 2023 Attachment Sequence No. **01**

Your social security number

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR

HARS	HITH REDDY KUMBHAM	12-95-	-75	42		
Par	t I Additional Income					
1	Taxable refunds, credits, or offsets of state and local income taxes				1	
2a	Alimony received			. 2	2a	
b	Date of original divorce or separation agreement (see instructions):					
3	Business income or (loss). Attach Schedule C			. :	3	
4	Other gains or (losses). Attach Form 4797		. [4		
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta			5	-15,168.	
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				
ĥ	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	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				0	-15,168.
For Pa	perwork Reduction Act Notice, see your tax return instructions.			Sch	nedule	e 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	s 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	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		-	
e	Repayment of supplemental unemployment benefits under the Trade		-	
Ŭ	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
•	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV ()1/12/24 PRO	Schedule [·]	1 (Form 1040) 2023

	EDULE E 1040)	(Eron		Supplementa ntal real estate, royalties, partners					tructo DEMI	Calleta)	OMB N	o. 1545-0074
•	nent of the Treasury	(FIOI	iie	Attach to Form 1040	•	-			, uusis, n∟ivii	05, 610.)	2() 23
	Revenue Service			Go to www.irs.gov/ScheduleE fo					nformation.		Attachn Sequen	nent ice No. 13
Name(s) shown on return									Your soci	al security	number
-	HITH REDDY	KUMI	3HZ	AM						712-9	5-7542	
Part				From Rental Real Estate ar			•					
	rental inco	ou are ir ome or l	1 th OSS	e business of renting personal prope from Form 4835 on page 2, line 40.	rty, use	e Schedule	e C. See	e instru	ictions. If you a	are an indi	viduai, rep	ort farm
Α [nts in 2023 that would require you		Form(s) 1	099?	See in	structions .		. 🗌 Ye	s 🛛 No
1a	Physical addr	ess of	ea	ch property (street, city, state, Zl	P cod	e)						
Α	RAVINDRA 1	NAGAF	۲.	NACHARAM HYDERABAD TE	LANG	ANA IN	5000	76				
В			,	-				-				
С												
1b	Type of Prope		2	For each rental real estate prope				Fa	air Rental	Persor	al Use	QJV
	(from list below	N)		above, report the number of fair					Days	Days		QUV
<u>A</u>	2			personal use days. Check the Q if you meet the requirements to			Α		215		0	
				qualified joint venture. See instru			B					
C	of Property:						С					
	Single Family R	asidan	<u></u>	3 Vacation/Short-Term Rer	ntal	5 Land	I	7	Self-Rental			
	Multi-Family Re			4 Commercial	nai	6 Roya			Other (desc	ribe)		
	, , , , , , , , , , , , , , , , , , ,		_			1						
Incom							Α		Propert	ies:		С
3		4			3			585.	D			0
4					4							
Exper												
5					5							
6	Auto and trave	l (see	inst	ructions)	6							
7	•			юе	7		1,2	269.				
8					8							
9					9							
10				ional fees	10 11		1 1					
11 12				o banks, etc. (see instructions)	11		1,3	358.				
13					13							
14					14		3,5	514.				
15	•				15			69.				
16					16							
17					17			516.				
18	-	xpens	e o	r depletion	18		4,0)27.				
19					19		1 - 0					
20	•			es 5 through 19	20		15,8	353.				
21				e 3 (rents) and/or 4 (royalties). If tructions to find out if you must								
					21	-	-15,1	68.				
22	Deductible ren	ital rea	le	state loss after limitation, if any,								
				ructions)	22	(15,1	68.)	()	(
23 a			-	orted on line 3 for all rental prope				2 3a		685.		
b			-	orted on line 4 for all royalty prop				23b				
С			-	orted on line 12 for all properties				23c				
d				orted on line 18 for all properties				23d		1,027.		
е 24			•	orted on line 20 for all properties mounts shown on line 21. Do no				23e	15	5,853.		
24 25				es from line 21 and rental real estat		•		nter to			(15,168.
26		• •		and royalty income or (loss).								.,,
								-				

here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 . NPA For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2023

26

-15,168.

-15,168.

4562	4562 Depreciation and Amortization (Including Information on Listed Property)					OMB No. 1545-0172		
						2023		
Attach to your tax return.					at information	Attachment		
Internal Revenue Service Name(s) shown on return							Sequence No. 179 ifying number	
	RSHITH REDDY KUMBHAM Sch E RAVINDRA NAGAR, NACHARAM						712-95-7542	
		rtain Property Unc		-		/		
		ed property, comple			nplete Part I.			
1 Maximum amount (see instructions)							1,160,000.	
2 Total cost of section 179 property placed in service (see instructions)							, ,	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)							2,890,000.	
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0						4		
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0 If married filing								
separately, see instructions						5		
6 (a)	Description of prope	rty	(b) Cost (busi	iness use only)	(c) Elected cost			
7 Listed property E	ntor the amount	from line 29		7				
		property. Add amount			7	8		
		· ·		. ,		9		
 9 Tentative deduction. Enter the smaller of line 5 or line 8						10		
I Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions						11		
 2 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11						12		
13 Carryover of disal					13			
Note: Don't use Part II								
					clude listed property	. See	instructions.)	
14 Special depreciation allowance for qualified property (other than listed property) placed in service								
during the tax year. See instructions						14		
15 Property subject to section 168(f)(1) election						15		
16 Other depreciation (including ACRS) Part III MACRS Depreciation (Don't include listed property. See instructions.)						16		
Part III MACRS D	epreciation (D	on't include listed		e instruction	s.)			
			Section A	L (000)	<u>,</u>	4=		
17 MACRS deduction18 If you are electing						17		
asset accounts, c								
,		ed in Service During	1 2023 Tax Y	ear Using the	General Depreciation	Svst	em	
	Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation (b) Month and year (c) Basis for depreciation (d) Recovery (c) Converting (d) Nother depreciation (d) Recovery							
(a) Classification of propert	y placed in service	(business/investment use only-see instructions)	period	(e) Convention	(f) Method	(g) D	epreciation deduction	
19a 3-year property								
b 5-year property								
c 7-year property								
d 10-year property								
e 15-year property								
f 20-year property								
g 25-year property			25 yrs.		S/L			
h Residential rental	02/23	126,567.	27.5 yrs.	MM	S/L		4,027.	
property			27.5 yrs.	MM	S/L	<u> </u>		
i Nonresidential re	al		39 yrs.	MM	S/L	<u> </u>		
property				MM	S/L		-	
	- Assets Place	ed in Service During	2023 Tax Ye	ar Using the A	Alternative Depreciation	on Sys	stem	
20a Class life			10,		5/L 5/L	<u> </u>		
b 12-year			12 yrs. 30 yrs.	MM	5/L 5/L	 		
c 30-year d 40-year			40 yrs.	MM	5/L 5/L	 		
,	(See instruction	ns)	-10 yrs.	141141	UIL	<u> </u>		
21 Listed property. E	1	/				21		
			lines 10 and	20 in column	(a) and line 21 Enter	<u> </u>		
here and on the a	 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 . 23 For assets shown above and placed in service during the current year, enter the 						4,027.	
	•	ed in service during t section 263A costs .			23			

portion of the basis attributable to section 263A costs . For Paperwork Reduction Act Notice, see separate instructions.