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)

Taxpay	er's name	Social security number												
SID	DHARTH REDDY LUCKY	688-54-4747												
Spouse	s's name	Spouse's soc	ial secu	irity number										
Par	Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter year you are authorizing.)													
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	85,589.										
2	Total tax		2	11,087.										
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	14,316.										
4	Amount you want refunded to you		4	3,229.										
5			5											

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

Under penalties of periury. 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

				FBO firm name	-	Ē
X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	<u> </u>
			-			14

	4	4	7	4	7							
Enter five digits, but don't enter all zeros												

my

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	mv	PIN
ιO	enter	0I	yenerate	IIIY	

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	Date					 			
Practitioner PIN Method Returns Only—continu	e 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		6 nter a		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 >					
) Must Retain This Form — See Instructions it This Form to the IRS Unless Requested To Do So				
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 Ta >		turn	202	3	OMB No. 1545	-0074	IRS Use Only	–Do not w	vrite 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		
SIDDHARI	'H RI	EDDY	LUC	JUCKY							54	4747		
		s first name and middle initial	Last r									I security number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.	Preside	Presidential Election Campaig			
24404 CH	IIPPI	EWA						ç	3103			/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	spouse if filing jointly, want \$ to go to this fund. Checking a				
FARMING	ON					MI	C	483	35	box bel	ow will	not change		
Foreign country	/ name			Foreign p	rovince/state/o	count	ty	Foreig	n postal code	your tax		_		
											∐ Yo	ou 🔄 Spouse		
Filing Status	; <u>×</u>	Single					Head of he	ouseh	old (HOH)					
Check only		Married filing jointly (even if only or	ne hac	l income)										
one box.		Married filing separately (MFS)							ring spouse	. ,				
		you checked the MFS box, enter the			pouse. If you	u che	ecked the HOF	l or Q	SS box, ente	er the chi	ild's na	me if the		
	qu	alifying person is a child but not you	ir depe	endent:										
Digital	At ar	ny time during 2023, did you: (a) rece	eive (a	s a rewar	d, award, or	payr	ment for prope	rty or	services); or	(b) sell,				
Assets	exch	nange, or otherwise dispose of a digi	ital ass	set (or a fi	nancial intere	est ir	n a digital asse	et)? (Se	e instructio	ns.)	Y	es 🛛 No		
Standard	Som	neone can claim: 🗌 You as a de	pende	ent 🗌	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	1							
Age/Blindness	S You:	: Were born before January 2, 1	959	🗌 Are b	lind Spc	ouse	: 🗌 Was bor	n befo	ore January	2, 1959		s blind		
Dependents	s (see	instructions):		(2)	Social security	,	(3) Relationsh	14			fies for	(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	see instruc	ctions) .					. 1a	I	99,930.		
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	•							. 1c	;			
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	uctions)			. 1d				
1099-R if tax	е	Taxable dependent care benefits f						• •		. <u>1</u> e				
was withheld.	f	Employer-provided adoption bene						• •		. <u>1f</u>				
lf you did not get a Form	g	Wages from Form 8919, line 6 .				• •		• •		. <u>1</u> g		0		
W-2, see	h	Other earned income (see instructi	,	· · ·		• •		· ·		. 1h	1	0.		
instructions.	i	Nontaxable combat pay election (s	see ins	structions)	• •	1 i			- 4-		99,930.		
	z 2a	Add lines 1a through 1h Tax-exempt interest		· · ·	· · · ·	 ьт	axable interest	· ·		. 1z . 2b		<i>JJ</i> , <i>J</i> JU.		
Attach Sch. B if required.	2a 3a		2a 3a				Ordinary divider			. 20 . 3b				
	<u> </u>		3a 4a				axable amoun		• • •	. 30				
Standard	ч а 5а		та 5а				axable amoun							
 Deduction for — Single or 	6a		6a				axable amoun			. 6b				
Married filing	c			method	check here				· · · [
separately, \$13,850	7		If you elect to use the lump-sum election method, check here (see instructions)											
 Married filing jointly or 	8		Additional income from Schedule 1, line 10									-14,341.		
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income										85,589.		
surviving spouse, \$27,700	10	Adjustments to income from Schedule 1, line 26)	·		
 Head of household, 	11	Subtract line 10 from line 9. This is your adjusted gross income										85,589.		
\$20,800	12	Standard deduction or itemized	-							. 12	-	13,850.		
 If you checked any box under 	13		Qualified business income deduction from Form 8995 or Form 8995-A											
Standard Deduction,	14	Add lines 12 and 13										13,850.		
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	our t	taxable incom	ie .		. 15		71 , 739.		

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

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	11,087.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	11,087.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	11,087.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	11,087.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 14	1,316.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	14,316.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20)22 return			26	
qualifying child,	27	Earned income credit (EIC)			No	27			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28			
	29	American opportunity credit	from Form 8863	s, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, line 15 . <th.< th=""> . <th.< th=""> . . <th< th=""><th></th><th></th></th<></th.<></th.<>							
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. These are your total payments							14,316.
Refund	34	If line 33 is more than line 24	l, subtract line 24	4 from line 33.	This is the amou	nt you overpaid		34	3,229.
	35a	Amount of line 34 you want			3 is attached, che	ck here	. 🗆	35a	3,229.
Direct deposit?	b	Routing number 1 1 1				Checking	Savings		
See instructions.	d	Account number 5 8 6	0 3 6 4	798	3 1				
	36	Amount of line 34 you want a	applied to your	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe					
You Owe		For details on how to pay, g	o to <i>www.irs.gov</i>	//Payments or	see instructions			37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee	ins	tructions				🗌 Yes. C	omplete b	elow.	X No
	De nai	signee's		Phone no.			onal identifi ber (PIN)	cation	
0:		der penalties of perjury, I declare tl	at I have examined		accompanying sch		. ,	o host	of my knowledge and
Sign		ief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the	IRS ser	nt you an Identity
				2410			Prote	ction P	N, enter it here
Joint return?					SR SOFTWA	RE ENGINEEF	ر (see ir	nst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an
your records.							(see in	,	ection PIN, enter it here
	Dh	one no. (281) 667-117	2	Email addross		ZYDEDDYACMATI C	,	- /	
		one no. (281) 667-117 parer's name	3 Preparer's signat	Email address	SIDDHAKTH,LUC	KYREDDY@GMAIL.C	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM					P02082	703	Self-employed
Preparer				NAM SAGAK	GUFIA IALLAM				
Use Only		m's name GLOBAL TAX	Y CT E BRU	NOWTOV N	J 08816				678) 965-9522
Co to unit in a				N AJIMAN			Firm's		84-3171965 Form 1040 (2023)
GO LO WWW.Irs.go	JVIFOM	1040 for instructions and the late	st information.		BAA	REV 01/12/24 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.

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

OMB No. 1545-0074 2023

Attachment Sequence No. **01** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SIDDHARTH REDDY LUCKY 688-54-4747

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	-14,341.
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			
		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 (<u>)</u>	
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:			
~	Tatal ather income. Add lines On through On	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	-14,341.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedul	e 1 (Form 1040) 2023

1	Adjustments to Income				. 11	1	
	Educator expenses						
2	Certain business expenses of reservists, performing artists, and fee	-basi	s gov	ernme	nt . 12		
,	officials. Attach Form 2106	• •	• •	• •	. 13		
3	Moving expenses for members of the Armed Forces. Attach Form 3903						
4 5							_
5	Deductible part of self-employment tax. Attach Schedule SE						
6	Self-employed SEP, SIMPLE, and qualified plans						
7	Self-employed health insurance deduction						
8	Penalty on early withdrawal of savings						
9a	Alimony paid					а	
b	Recipient's SSN	•			_		
С	Date of original divorce or separation agreement (see instructions):						
20	IRA deduction						
21	Student loan interest deduction						_
22	Reserved for future use						
23	Archer MSA deduction				. 23	3	
24	Other adjustments:						
а	Jury duty pay (see instructions)	24a					
b	Deductible expenses related to income reported on line 8l from the						
	rental of personal property engaged in for profit	24b					
С	Nontaxable amount of the value of Olympic and Paralympic medals						
	and USOC prize money reported on line 8m	24c					
d	Reforestation amortization and expenses	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					
q	Contributions by certain chaplains to section 403(b) plans	24g					
· ·	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					
i	Housing deduction from Form 2555	24i					
۲ ۲	Excess deductions of section 67(e) expenses from Schedule K-1 (Form						
n		24k					
z	Other adjustments. List type and amount:	2-TR					
2		24z					
25	Total other adjustments. Add lines 24a through 24z				. 25		
25 26						, 	
0	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10						
	Form 1040, 1040-SR, or 1040-NR, line 10	• •	• •	• •	. 26	o dule 1 (Form 1	_

			Supplementa							OMB No	o. 1545-	0074	
(Form	1040)	(From	rental real estate, royalties, partners		-			trusts, REMICs	s, etc.)	2023			
	nent of the Treasury		Attach to Form 1040,		,			formation		Attachn	nent	10	
	Revenue Service		Go to www.irs.gov/ScheduleE for	rinstru	lctions an	a the la	test in		(Sequen			
) shown on return	V TICI	7.77							al security	numbei	r	
Part	HARTH REDD		s From Rental Real Estate an	d Do	voltion				C-880	4-4747			
Par	Note: If yo	ou are in t	the business of renting personal proper ss from Form 4835 on page 2, line 40.	ty, use	Schedule	C . See	instru	ctions. If you are	e an indiv	vidual, rep	ort farr	n	
Α	Did you make an	ny payme	ents in 2023 that would require you	to file	Form(s) 1	099? 5	see ins	structions		. 🗌 Ye	s X	No	
BI	f "Yes," did you	ı or will y	rou file required Form(s) 1099? .							. 🗌 Ye	s 🗌	No	
1a	Physical addr	ress of e	ach property (street, city, state, ZIF	P code	∋)								
Α	1-2-343/B	. SRINI	VAS APT DOMALGUDA, HYDEF	RABAT) TELAN	GANA	ΤN	500029					
B	1 2 3 137 D	/ 01(11(1				0/11//1	111	300023					
C													
1.5	(from list below		above, report the number of fair					Days	Da		Q	JV	
Α	3		personal use days. Check the Q			Α		365		0			
В			if you meet the requirements to f qualified joint venture. See instru			В							
С			quaimed joint venture. See instru	ICTIONS	j.	С					[
Туре	of Property:	•						•					
1	Single Family R	esidenc	e 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental					
2	Multi-Family Re	sidence	4 Commercial		6 Roya	lties	8	Other (describ	oe)				
								Propertie					
Incon	ne:					Α		B			С		
3		d		3			10.				-		
4				4		-							
Exper													
5				5									
6	-		structions)	6									
7		-	ance	7		2,5	40.						
8	•			8		, -							
9				9									
10			sional fees	10									
11	0	•		11		3,1	40.						
12	-		l to banks, etc. (see instructions)	12									
13	Other interest			13									
14	Repairs			14		3,5	10.						
15	Supplies			15		2,7	40.						
16	Taxes			16									
17	Utilities			17		3,0	21.						
18	Depreciation e	expense	or depletion	18									
19	Other (list)			19									
20	Total expenses		nes 5 through 19	20		14,9	51.						
21			ine 3 (rents) and/or 4 (royalties). If										
			nstructions to find out if you must										
	file Form 6198			21	-	-14,3	41.						
22	on Form 8582	(see ins	estate loss after limitation, if any, tructions)	22	(14,34	1.)	()	()	
23 a			ported on line 3 for all rental prope				23 a		610.				
b			ported on line 4 for all royalty prop				23b						
С			ported on line 12 for all properties				23c						
d			ported on line 18 for all properties				23d						
е			ported on line 20 for all properties				23e	14,	951.				
24			amounts shown on line 21. Do not						24	,			
25			ses from line 21 and rental real estat						25	(14,3	41.)	
26			te and royalty income or (loss).										
			d IV, and line 40 on page 2 do no 0), line 5. Otherwise, include this ar						26		-14	341.	
									L C U		I ·	- - •	

-14,341.