Form **8879**

(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

			_		
Submis	sion Identification Number (SID)				
Taxpayer'	s name	Social securi	ty numb	 ber	
	PRASAD REDDY KUNDURU	191-35	-		
Spouse's		Spouse's soo			
NAGA	LAKSHMI GADE	735-18	-494	2	
Part I	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re aut	thorizing.)	
Enter w	hole dollars only on lines 1 through 5.				
Note: F	orm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1 /	Adjusted gross income		1		816.
	Total tax		2		768.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		959.
	Amount you want refunded to you		4	4,	191.
	Amount you owe		5		
Part II	Taxpayer Declaration and Signature Authorization (Be sure you get and kenalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)				
to send if for any of Agent to payment authorized payment business taxes to personal	riginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transminy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejetely in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Uninitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indiction from the financial institution account indicated taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation required days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the pridentification number (PIN) below is my signature for the income tax return (original or amended) I are a funde Withdrayal Consort.	ction of the t S. Treasury a cated in the t n to debit the the authoriz ests must be processing o ayment. I fur	ransmis ax prep e entry t ation. T e receiventhe electrical	ssion, (b) the designated For this accourant to this accourant to the revoke (coved no later ectronic payethouses.	e reason Financial ware for unt. This ancel) a r than 2 rment of that the
	c Funds Withdrawal Consent.				
	er's PIN: check one box only	5 July 5	2 8	3 3 6	
X	I authorize GLOBAL TAXES LLC to enter or generate I	ř En		digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros	
☐ Your sig	I will enter my PIN as my signature on the income tax return (original or amended) I am notify you are entering your own PIN and your return is filed using the Practitioner PIN methodelow. Ram Prasad Reddy Kunduru Date ► 0) must		
Chausa	3a DINI, ahaak ana hay aniy				
⊠ ⊠	I authorize GLOBAL TAXES LLC to enter or generate a 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. I will enter my PIN as my signature on the income tax return (original or amended) I am now if you are entering your own PIN and your return is filed using the Practitioner PIN methods.	En do ow authorizi	ter five n't ente	digits, but er all zeros neck this bo	
Spouse	below. 's signature ► Naga Lakshmi Gade Date ► 0	1/31/202	24		
	Practitioner PIN Method Returns Only—continue below				
Part II	Certification and Authentication — Practitioner PIN Method Only				
ERO's l	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't ent	6 0 er all ze	8 2 7 eros	1
authorize	that the above numeric entry is my PIN, which is my signature for the electronic individual income tand to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Ir	tting this reti	urn in a	accordance	
ERO's s	signature ▶ Date ▶				

REV 01/21/24 PRO

ERO Must Retain This Form — See Instructions

E1040 Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

2023

OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jar	n. 1–De	c. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20		See sep	oarate instructi	ions.
Your first name	and m	niddle initial	Last na	ıme					Your so	cial security nur	mber
RAM PRAS	CAE	REDDY	KUND	NIRII					191	35 2836	
		's first name and middle initial	Last na							s social security	
NAGA LAI	KSHM	T	GADE	1					735	18 4942)
		er and street). If you have a P.O. box, see					Apt. r	10.		ntial Election Ca	
1851 KN	IGHT	SBRIDGE RD					441	7	Check h	nere if you, or yo	our .
		ice. If you have a foreign address, also co	mplete s	paces below.	Sta	ate	ZIP code			if filing jointly, w	
FARMERS	BRA	NCH			T	ς	75234			this fund. Chec ow will not chan	
Foreign country	Foreign country name Foreign province/state/county Foreign postal code you						or refund.	.go			
										☐ You ☐	Spouse
Filing Status	s [Single	•			Head of ho	ousehold (HOH)			
Check only	_	Married filing jointly (even if only or	ne had i	income)							
one box.		Married filing separately (MFS)				☐ Qualifying	surviving	spouse (0	QSS)		
	lf :	you checked the MFS box, enter the	name o	of your spouse. If you	u che	ecked the HOH	or QSS b	ox, enter	the chi	ld's name if the	е
	qι	ualifying person is a child but not you	ır deper	ndent:							
Digital	Δta	ny time during 2023, did you: (a) rec	aiva (as	a reward award or	navr	ment for proper	rty or serv	ices): or (h) sell		
Digital Assets		hange, or otherwise dispose of a dig	•				•	,. ,	, ,	☐ Yes 🏻	No
Standard		neone can claim: You as a de					, (
Deduction	_	Spouse itemizes on a separate retur	•			•					
				7					1050		
		: Were born before January 2, 1	959 L	Are blind Spo	ouse	: U Was bor	n before J			☐ Is blind	
Dependent	•	•		(2) Social security number	/	(3) Relationshi	ι ρ	еск tne bo hild tax cre		fies for (see instru Credit for other de	,
If more		First name Last name					X		Juit		pendenta
than four dependents,	KIA	IANSH REDDY KUNDURU		327-45-3887		Son		 			
see instruction	s										
and check here [1 —									<u></u>	
-	10	Total amount from Form(a) M 2 b	ov 1 /oo	o instructions)					10	106,	202
Income	1a b	Total amount from Form(s) W-2, by Household employee wages not re	•	•					1a 1b		070.
Attach Form(s)	C	Tip income not reported on line 1a	•	` ,					1c		
W-2 here. Also attach Forms	d	·	•	ted on Form(s) W-2 (see instructions)					1d		
W-2G and	e	Taxable dependent care benefits f		()	iiotic				1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene		·					1f		
If you did not	g	Wages from Form 8919, line 6.			•				1g		
get a Form	h	Other earned income (see instruct							1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,	ructions)		1 1i					
	z	Add lines 1a through 1h							1z	106,	898.
Attach Sch. B	 2a		2a		ь Т	axable interest	· ·		2b		
if required.	3a		3a			Ordinary divider			3b		
	4a	·	4a			axable amount			4b		
Standard Deduction for—	5a		5a			axable amount			5b		
Single or	6a	_	6a			axable amount			6b		
Married filing separately,	С	If you elect to use the lump-sum e	lection i	method, check here	(see	instructions)		🗆			
\$13,850	7	Capital gain or (loss). Attach Sche	dule D i	f required. If not requ	uired	, check here		🗆	7		
 Married filing jointly or 	8	Additional income from Schedule	1, line 1	0					8	-13,	082.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							9	93,	816.
\$27,700	10	Adjustments to income from Sche	dule 1,	line 26					10		
Head of household,	11	Subtract line 10 from line 9. This is	s your a	djusted gross incor	ne				11	93,	816.
\$20,800 If you checked	12	Standard deduction or itemized	deduct	ions (from Schedule	A)				12		700.
any box under	13	Qualified business income deduct	ion from	n Form 8995 or Form	899	05-A			13		
Standard Deduction,	14	Add lines 12 and 13							14	27,	700.
see instructions.	15	Subtract line 1/1 from line 11. If zer	n or lee	e enter -0- This is v	our :	tavahla incom			15	66	116

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	7,495.
Credits	17	Amount from Schedule 2, lin	ne3				.	17	
	18	Add lines 16 and 17						18	7,495.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	2,000.
	20	Amount from Schedule 3, lin	ne 8					20	727.
	21	Add lines 19 and 20						21	2,727.
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				22	4,768.
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	4,768.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a	8,959		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	8,959.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return	., . ,		26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27			
allacii Scii. Elo.	28	Additional child tax credit fro	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	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. T	hese are your to	tal payments				33	8,959.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you overpaic	Ι	34	4,191.
	35a	Amount of line 34 you want			is attached, che	ck here	🗆	35a	4,191.
Direct deposit?	b	Routing number 1 1 1				Checking [Saving	s	
See instructions.	d	Account number 4 8 8	0 5 6 3	4 7 6 7	7 2				
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another				See			
Designee	ins	structions				🗌 Yes.	Complete	e below.	⋉ No
		signee's me		Phone no.			rsonal ide mber (PIN		
Sign	Un	der penalties of perjury, I declare t	hat I have examined	d this return and	accompanying sche	edules and stateme	ents, and t	o the best	of my knowledge and
Here	be	lief, they are true, correct, and com	nplete. Declaration of	of preparer (other	r than taxpayer) is b	ased on all informa	ition of wh	ich prepar	er has any knowledge.
TICIC	Yo	Your signature		Date				nt you an Identity	
					CODELIADE			otection P ee inst.)	PIN, enter it here
Joint return? See instructions.		ougo's signature. If a joint return	hath must sign	Date	SOFTWARE Spouse's occupa		,		nt your spouse an
Keep a copy for your records.	Sμ	Spouse's signature. If a joint return, both must sign.		Date	STUDENT	lioit	Ide		ection PIN, enter it here
	———Ph	one no. (720)341-000	6	Email address	RAMPRASAD.KU	NDURU@GMATT.	COM		
		eparer's name	Preparer's signat	l		Date	PTIN		Check if:
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/01/2024	P020	82703	Self-employed
Preparer		m's name GLOBAL TA	1			1 - ,,			(678)965-9522
Use Only			le Creek L	n Cummin	g GA 30041			m's EIN	84-3171965
							1 "		

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

RAM PRASAD REDDY KUNDURU & NAGA LAKSHMI GADE

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

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

Attachment Sequence No. 01 Your social security number 191-35-2836

Par	Additional income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule E .	5	-13,082.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n		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:			
_	T. I.	8z	-	
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente 1040, 1040-SR, or 1040-NR, line 8			-13.082.
	1040, 1040-311, 01 1040-110, IIIIC 0 , , , , , , , , , , , , , , , , , ,		10	J,UOZ.

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

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-				
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			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	Nontaxable amount of the value of Olympic and Paralympic medals				
	· · · · · · · · · · · · · · · · · · ·	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	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	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	e. Enter	here and on	26	
	·				

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

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. 03

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

RAM PRASAD REDDY KUNDURU & NAGA LAKSHMI GADE

Your social security number 191-35-2836

Par	Nonrefundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441	, line 11. Attach	2	
3	Education credits from Form 8863, line 19		3	727.
4	Retirement savings contributions credit. Attach Form 8880		4	
5a	Residential clean energy credit from Form 5695, line 15		5a	
b	Energy efficient home improvement credit from Form 5695, line 32		5b	
6	Other nonrefundable credits:			
а	General business credit. Attach Form 3800	6a		
b	Credit for prior year minimum tax. Attach Form 8801	6b		
С	Adoption credit. Attach Form 8839	6c		
d	Credit for the elderly or disabled. Attach Schedule R	6d		
е	Reserved for future use	6e		
f	Clean vehicle credit. Attach Form 8936	6f		
g	Mortgage interest credit. Attach Form 8396	6g		
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h		
i	Qualified electric vehicle credit. Attach Form 8834	6i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j		
k	Credit to holders of tax credit bonds. Attach Form 8912	6k		
I	Amount on Form 8978, line 14. See instructions	61		
m	Credit for previously owned clean vehicles. Attach Form 8936 .	6m		
z	Other nonrefundable credits. List type and amount:			
		6z		
7	Total other nonrefundable credits. Add lines 6a through 6z		7	
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10 1040-NR, line 20	040, 1040-SR, or	8	727.

Schedule 3 (Form 1040) 2023 Page **2**

Par	Other Payments and Refundable Credits				
9	Net premium tax credit. Attach Form 8962			9	
10	Amount paid with request for extension to file (see instructions) .			10	
11	Excess social security and tier 1 RRTA tax withheld			11	
12	Credit for federal tax on fuels. Attach Form 4136			12	
13	Other payments or refundable credits:				
а	Form 2439	13a			
b	Credit for repayment of amounts included in income from earlier years	13b			
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c			
d	Deferred amount of net 965 tax liability (see instructions)	13d			
Z	Other payments or refundable credits. List type and amount:	13z			
14	Total other payments or refundable credits. Add lines 13a through	13z		14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	-	•	15	

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.

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 13

OMB No. 1545-0074

RAM PRASAD REDDY KINDURU & NAGA LAKSEMI GADE PORT Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4880 on page 2, line 40. A Did you make any payments in 2023 that would require you to file Form(s) 10997 See instructions. If you are an individual, report farm rental income or loss from Form 4880 on page 2, line 40. A INDIRA NAGAR, BANJARA HILLS HYDERABAD TELANGANA IN 500045 B C In Individual or line 1 to 1 t	Name(s)	shown on return					١	our socia	l security	number
Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report fram rental income or loss from Form 4830 page 2, line 4 (line) and the property of the property of the property (street, city, state, ZIP code)	RAM	AM PRASAD REDDY KUNDURU & NAGA LAKSHMI GADE 191-35-2836								
rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2023 that would require you to file Form(s) 10997 See instructions	Part	Note: If you are in the business of renting personal proper			C . See	instruc	ctions. If you are	e an indiv	ridual, rep	ort farm
No Pryse No Pryse No Pryse No Pryse No Physical address of each property (street, city, state, ZIP code)		rental income or loss from Form 4835 on page 2, line 40.								
Table Physical address of each property (street, city, state, ZIP code)										
A	B I	f "Yes," did you or will you file required Form(s) 1099? .							. ∐ Y∈	es U No
B	1a	Physical address of each property (street, city, state, ZIF	P code)						
The transfer of the property (from list below) above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions. Type of Property: 1 Single Family Residence 2 Multi-Family Residence 3 Vacation/Short-Term Rental 5 Land 6 Royalties 7 Self-Rental 8 Other (leserribe) Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 6 Royalties 7 Self-Rental 8 Other (leserribe) Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 6 Royalties 7 Self-Rental 8 Other (leserribe) Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 6 Royalties 7 Self-Rental 8 Other (leserribe) Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 6 Royalties 7 Self-Rental 8 Other (leserribe) Type of Property: 1 Single Family Residence 4 Commercial 5 Sand 7 Self-Rental 7 Self-Rental 8 Other (leserribe) Type of Property: 1 Single Family Residence 4 Commercial 5 Sand 7 Self-Rental 7 Self-Rental 8 Other (leserribe) Type of Property: 1 Single Family Residence 4 Commercial 5 Sand 7 Self-Rental 8 Other (leserribe) Type of Property: 1 Single Family Residence 4 Commercial 5 Sand 7 Self-Rental 8 Other (leserribe) Type of Property: 1 Single Family Residence 4 Commercial 5 Sand 7 Self-Rental 7 Self-Rental 8 Other (leserribe) Type of Property: 1 Single Family Residence 4 Commercial 5 Sand 7 Self-Rental 8 Other (leserribe) Type of Properties:	A	INDIRA NAGAR, BANJARA HILLS HYDERABAD T	relan	GANA I	N 50	0045				
Type of Property (from list below)										
A 3										T
A 3	1b					Fa				QJV
Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)		representation of the collection of			Α.		-	Da		
Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)							305		- 0	
Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 Other (describe)		qualified joint venture. See instru	uctions.							
1 Single Family Residence 3 Vacation/Short-Term Rental 6 Royalties 7 Self-Rental 8 Other (describe)		of Property:								
2 Multi-Family Residence		• •	ıtal	5 Land	l	7	Self-Rental			
Income:			· Cai					ce)		
Rents received										
Rents received			-		•			s:		
Expenses:						20	В			C
Expenses: 5 Advertising 5 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance 7 1,894. 8 Commissions 8 9 Insurance 9 10 Legal and other professional fees 10 11 Management fees 11 12 Mortgage interest paid to banks, etc. (see instructions) 13 1,842. 14 2,317. 15 Supplies 16 Taxes 17 2,645. 18 3,604. 19 Other (list) 20 Total expenses. Add lines 5 through 19 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 Form 6198 22 13,082. 23 Total of all amounts reported on line 3 for all rental properties 23a 24 22 (13,082.) () 25 Total of all amounts reported on line 2 for all properties 23b					5	20.				
5 Advertising 5 4uto and travel (see instructions) 6 7 Cleaning and maintenance 7 1,894. 4 8 Commissions 8 8 9 Insurance 9 4 10 Legal and other professional fees 10 4 11 Management fees 11 1,300. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 1,842. 4 14 2,317. 5 15 Supplies 15 16 Taxes 16 17 Utilities 17 2,645. 18 Depreciation expense or depletion 18 3,604. 19 Other (list) 19 13,602. 21 Total expenses. Add lines 5 through 19 20 13,602. 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 -13,082. 22 13,082. 21 -13,082. 23 Total of all amounts reported on line 19 for all rental propert			4							
6 Auto and travel (see instructions) 7 Cleaning and maintenance 7 1,894. 8 Commissions 8 9 Insurance 99 10 Legal and other professional fees 10 11 Management fees 111 1,300. 12 Mortgage interest paid to banks, etc. (see instructions) 13 Other interest 13 1,842. 14 Repairs 14 2,317. 15 Supplies 15 16 Taxes 16 17 Utilities 17 2,645. 18 Depreciation expense or depletion 18 3,604. 19 Other (list) 19 10 Total expenses. Add lines 5 through 19 20 13,602. 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 −13,082. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 (13,082.) () 23 Total of all amounts reported on line 4 for all royalty properties 236 24 Total of all amounts reported on line 12 for all properties 236 13,602. 24 Income. Add positive amounts shown on line 21. Do not include any losses rom line 22 font of lines 24 and 25. Enter total losses here 10 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on 10 to			5							
7		<u> </u>								
Section Sect					1.8	94.				
9						7				
10 Legal and other professional fees										
Management fees			10							
Mortgage interest paid to banks, etc. (see instructions) 12 13 1,842.			11		1,3	00.				
13 1,842. 14 Repairs . 14 2,317. 15 Supplies . 15 16 Taxes . 16 17 Utilities . 17 2,645. 18 Depreciation expense or depletion . 18 3,604. 19 Other (list) . 19 20 Total expenses. Add lines 5 through 19 . 20 13,602. 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 -13,082. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . 22 (13,082.)()(23a 520. b Total of all amounts reported on line 3 for all rental properties . 23a 520. b Total of all amounts reported on line 4 for all royalty properties . 23b 23b 3.604. c Total of all amounts reported on line 12 for all properties . 23c 3d 3,604. e Total of all amounts reported on line 20 for all properties . 23c 3d 3,604. e Total of all amounts reported on line 21 Do not include any losses . 24 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here there. If Parts II, III,	12		12							
15 Supplies	13	Other interest	13		1,8	42.				
Taxes	14	Repairs	14		2,3	17.				
17 Utilities	15	Supplies	15							
Depreciation expense or depletion			-							
Other (list) Total expenses. Add lines 5 through 19 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 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 12 for all properties Total of all amounts reported on line 18 for all properties Total of all amounts reported on line 18 for all properties Total of all amounts reported on line 18 for all properties Total of all amounts reported on line 20 for all properties Total of all amounts reported on line 20 for all properties Total of all amounts reported on line 20 for all properties Total of all amounts reported on line 21 no not include any losses Losses. Add positive amounts shown on line 21. Do not include any losses Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on		Utilities	-							
Total expenses. Add lines 5 through 19		·	-		3,6	04.				
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		` '								
result is a (loss), see instructions to find out if you must file Form 6198			20		13,6	02.				
file Form 6198	21									
Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)		· · · · · · · · · · · · · · · · · · ·	21		_13 N	82				
on Form 8582 (see instructions)	22		21		13,0	02.				
Total of all amounts reported on line 3 for all rental properties			22	(13.08	32.)	,)(1)
b Total of all amounts reported on line 4 for all royalty properties	23a	,				- 1		520.		
c Total of all amounts reported on line 12 for all properties						-				
d Total of all amounts reported on line 18 for all properties						-		$\neg \neg$		
Total of all amounts reported on line 20 for all properties	_	·				-	3,	604.		
 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on 	е	·				23e	13,	602.		
Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on	24	Income. Add positive amounts shown on line 21. Do not	t includ	de any lo	sses			24		
here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on	25	Losses. Add royalty losses from line 21 and rental real estate	e losse	s from lin	e 22. E	nter to	tal losses here	25 ((13,082.)
	26									
Schodula 1 (Form 10/0) line 5. Otherwise include this amount in the total on line /1 on near 0.		here. If Parts II, III, and IV, and line 40 on page 2 do no								_12 002

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

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

2023

OMB No. 1545-0074

Attachment Sequence No. 47

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Your social security number RAM PRASAD REDDY KUNDURU & NAGA LAKSHMI GADE 191-35-2836 Child Tax Credit and Credit for Other Dependents 1 Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR 1 93,816. Enter income from Puerto Rico that you excluded 2a Enter the amounts from lines 45 and 50 of your Form 2555 . . . b 2b 0 c Enter the amount from line 15 of your Form 4563 Add lines 2a through 2c 2d 0. 3 3 93,816. 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 17 or who do not have the required social security number 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 Add lines 5 and 7 8 2,000. Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 9 400,000. Subtract line 9 from line 3. 10 • 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. Is the amount on line 8 more than the amount on line 11? . . . 12 2,000. No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27. **X** Yes. Subtract line 11 from line 8. Enter the result. 13 Enter the amount from Credit Limit Worksheet A 13 6,768. Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents 2,000. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.

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.

BAA

Schedule 8812 (Form 1040) 2023

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	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	s of P	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		
	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	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.	25	
25	Subtract line 24 from line 23. If zero or less, enter -0	25	
26	Enter the larger of line 20 or line 25	26	
Dord	Next, enter the smaller of line 17 or line 26 on line 27.		
	II-C Additional Child Tax Credit	27	
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	

Form **8863**

Education Credits (American Opportunity and Lifetime Learning Credits)

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

RAM PRASAD REDDY KUNDURU & NAGA LAKSHMI GADE

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/Form8863 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. 50

2836

Your social security number

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Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

GAUI	ON THE PROPERTY OF THE PROPERT		
Par	Refundable American Opportunity Credit		
1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse		
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead		
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit		
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse		
6	If line 4 is: • Equal to or more than line 5, enter 1.000 on line 6	6	
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year and meet the conditions described in the instructions, you can't take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box	7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the amount here and on Form 1040 or 1040-SR, line 29. Then go to line 9 below.	8	
Part	II Nonrefundable Education Credits		
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions) .	9	
10	After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19	10	3,636.
11	Enter the smaller of line 10 or \$10,000	11	3,636.
12	Multiply line 11 by 20% (0.20)	12	727.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse		
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse		
17	If line 15 is: • Equal to or more than line 16, enter 1.000 on line 17 and go to line 18		
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to at	17	1.000
18	least three places)	18	727.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see instructions) here and on Schedule 3 (Form 1040), line 3	19	727.

Name(s) shown on return

RAM PRASAD REDDY KUNDURU & NAGA LAKSHMI GADE

Your social security number

191 | 35 | 2836

7	Î	1
CA	UT	ION

Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

Par							
20	Student name (as shown on page 1 of your tax return)	21 Student social security number (as s	hown on page 1 of				
	NAGA LAKSHMI	your tax return)					
	GADE	735-18-4942					
	Educational institution information (see instructions)						
а	Name of first educational institution	b. Name of second educational institut	ion (if any)				
- 1	WICHITA STATE UNIVERSITY	(4) Address Number and street (or D	O have City tayyour				
(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see	(1) Address. Number and street (or P. post office, state, and ZIP code. If					
	instructions.	instructions.	a foreign address, see				
	1845 FAIRMOUNT						
	WICHITA KS 67260						
<u> </u>	2) Did the student receive Form 1008-T	(2) Did the student receive Form 1098	-T				
	from this institution for 2023?	from this institution for 2023?	Yes No				
(Did the student receive Form 1098-T	(3) Did the student receive Form 1098					
	from this institution for 2022 with box Yes No 7 checked?	from this institution for 2022 with but 7 checked?	oox Yes No				
(4	4) Enter the institution's employer identification number (EIN)	(4) Enter the institution's employer ide					
	if you're claiming the American opportunity credit or if you	if you're claiming the American opp					
	checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	checked "Yes" in (2) or (3). You car 1098-T or from the institution.	i get the Eliv Irom Form				
	1030-1 of from the institution.	1030-1 of from the institution.					
	48-1209662						
23	Has the American opportunity credit been claimed for this	☐ Yes — Stop!					
	student for any 4 prior tax years?	Go to line 31 for this student.	Go to line 24.				
24	Was the student enrolled at least half-time for at least one						
	academic period that began or is treated as having begun						
	in 2023 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or		Stop! Go to line 31this student.				
	other recognized postsecondary educational credential?	101 1	ilis student.				
	See instructions.						
25	Did the student complete the first 4 years of postsecondary						
23	education before 2023? See instructions.	× Yes - Stop! No	— Go to line 26.				
		Go to line 31 for this student.					
26	Was the student convicted, before the end of 2023, of a	☐ Yes — Stop! ☐ No	 Complete lines 27 				
	felony for possession or distribution of a controlled substance?	☐ Go to line 31 for this student. ☐ thro					
	Substance:						
	You can't take the American opportunity credit and the la		in the same year. If				
CAUT	you complete lines 27 through 30 for this student, don't o	complete line 31.					
	American Opportunity Credit						
27	Adjusted qualified education expenses (see instructions). Dor	n't enter more than \$4,000	27				
28	Subtract \$2,000 from line 27. If zero or less, enter -0	28					
29							
30	If line 28 is zero, enter the amount from line 27. Otherwise,	add \$2,000 to the amount on line 29 and					
	enter the result. Skip line 31. Include the total of all amounts f		30				
	Lifetime Learning Credit						
31	Adjusted qualified education expenses (see instructions). Incl	ude the total of all amounts from all Parts					
	III line 31 on Part II line 10		31 3.636.				

(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 (ODC)), 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

Taxpayer identification number

RAM	PRASAD REDDY KUNDURU & NAGA LAKSHMI GADE	191-35-283	5			
reparer's name Preparer tax identification						
SYAI						
Part	Due Diligence Requirements					
	check the appropriate box for the credit(s) and/or HOH filing status claimed on the retubenefit(s) claimed (check all that apply).		the rel		arts I–V HOH	
1						
	or reasonably obtained by you?		×			
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 Schedu 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?	X				
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you meet the knowledge requirement, you meet the knowledge requirement.	nust do both of			_	
	• Interview the taxpayer, ask questions, and contemporaneously document the taxpayer'determine that the taxpayer is eligible to claim the credit(s) and/or HOH filling status.	s responses to				
	• 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)		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.)	tent? (If "Yes,"		×		
а	Did you make reasonable inquiries to determine the correct, complete, and consistent info	ormation? .				
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 questions 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) p taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing states.	nent, you must, a copy of any o prepare Form rovided by the tus or to figure				
	the amount(s) of the credit(s)		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 e 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	X			
7						
•	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)	your	×			
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	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		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 statement to the return?	×		
Part	statement to the return?		 Part \	/)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the quatuition and related expenses for the claimed AOTC?	alified	Yes	No
Part			Part	VI.)
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	VI Eligibility Certification			
	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	d filing	status
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responsing 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 on s) and/c	the ret or HOH	urn or filing
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checkl credit(s) claimed and HOH filing status, if claimed;	ist 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 88 Document Retention.	67 instru	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 application obtained.	ble work	ksheet(s) was
	5. A record of any additional information you relied upon, including questions you asked and the taxle 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	ses, to dit(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

Form **8582**

Passive Activity Loss Limitations

See separate instructions.
Attach to Form 1040, 1040-SR, or 1041.

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

2023

Attachment
Sequence No. 858

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

RAM PRASAD REDDY KUNDURU & NAGA LAKSHMI GADE

Identifying number 191–35–2836

Pai	t I 2023 Passive Activity Los	S			,		
	Caution: Complete Parts IV ar	nd V before comple	eting Part I.				
	al Real Estate Activities With Active Pance for Rental Real Estate Activities			ive participation, s	ee Special		
1a b	Activities with net income (enter the a Activities with net loss (enter the amo				0.	_	
С	Prior years' unallowed losses (enter the)			
d	Combine lines 1a, 1b, and 1c		<u> </u>			1d	-13,082.
All Ot	her Passive Activities						
2a	Activities with net income (enter the a	mount from Part V	, column (a)) .	2a			
b	Activities with net loss (enter the amo	unt from Part V, co	olumn (b))	2b ()		
С	Prior years' unallowed losses (enter the)		
d	Combine lines 2a, 2b, and 2c					2d	
3	Combine lines 1d and 2d and subtra zero or more, stop here and include prior year unallowed losses entered	this form with you	ur return; all losse	es are allowed, inc	luding any		
	normally used					3	-13,082.
	If line 3 is a loss and: • Line 1d is a	-					
		loss (and line 1d is	•	-			
	on: If your filing status is married filingInstead, go to line 10.	separately and yo	ou lived with your	spouse at any tim	ie during the	year,	, do not complete
Par		ntal Real Estate	Activities With	Active Particin	ation		
· G.	Note: Enter all numbers in Par						
4	Enter the smaller of the loss on line 1	<u> </u>				4	13,082.
5	Enter \$150,000. If married filing separ	rately, see instructi	ons	5 1	50,000.		
6	Enter modified adjusted gross income	e, but not less than	n zero. See instruc	tions 6 1	.06,898.		
	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	I to line 5, skip line	s 7 and 8 and ent	er -0-			
7	Subtract line 6 from line 5			7	43,102.		
8	Multiply line 7 by 50% (0.50). Do not e					8	21,551.
9 Par	Enter the smaller of line 4 or line 8. If Total Losses Allowed	line 3 includes any	/ CRD, see instruc	ctions		9	13,082.
10	Add the income, if any, on lines 1a an	nd 2a and enter the	total			10	0.
11	Total losses allowed from all passiv					10	0.
••	out how to report the losses on your t	_				11	13,082.
Par	<u> </u>					1	,
Name of activity		Current year		Prior years Ove		rall ga	ain or loss
		(a) Net income (b) Net loss (line 1a) (line 1b)		(c) Unallowed loss (line 1c) (d) Gai		n	(e) Loss
IND	IRA NAGAR,BANJARA HILLS	0.	13,082.				13,082.
		i e		i .			i .

0.

13,082.

Total. Enter on Part I, lines 1a, 1b, and 1c

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Part V Complete This Part Before	еΡ	art I, Lines 2	a, 2b,	and 2c. S	ee instru	ctions.				
Name of activity	Curre			ent year Pri		ears	Overall ga		ain or loss	
Name of activity		(a) Net income (line 2a)		(b) Net loss (line 2b)		lowed e 2c)	(d) Gain		(e) Loss	
Total. Enter on Part I, lines 2a, 2b, and 2c	n+ 1-	Shown on F	Down II	Line O. C	laa inatru	tions				
Part VI Use This Part if an Amoun			art II,	Line 9. S	ee instrud	ctions.				
Name of activity	an to I	rm or schedule ad line number be reported on se instructions)	(a) Loss		(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).	
INDIRA NAGAR,BANJARA HILLS		E Ln 22		13,082.	1.0000	0000	13,082.		0.	
Total				13,082.	1.0	0	13,08	2.	0.	
Part VII Allocation of Unallowed L	oss			S.		1				
Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	Loss		(b) Ratio (c		(c) Unallowed loss	
Total							1.00			
Part VIII Allowed Losses. See instr	ucti									
Name of activity t		Form or schedule and line number to be reported on (see instructions)		(a) l	Loss (b) Ur		nallowed loss		(c) Allowed loss	
Total										