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

	5						
Submis	ssion Identification Number (SID)						
Taxpaye	r's name	Social securi	ty numl	per			
PRAV	YEEN REDDY TATIREDDY	160-45	-327	5			
Spouse's	s name	Spouse's social security number					
Dont	Too Determ Information Too Very Fulling December 04			tla a siladaa a V			
Part	, ,	year you a	ire au	tnorizing.)			
	vhole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
	Adjusted gross income		1	101	303.		
2	Total tax		2		552.		
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		087.		
	Amount you want refunded to you		4		535.		
	Amount you owe		5		<u> </u>		
Part		еер а сор	y of y	our retur	n)		
my kno return (a to send for any Agent to paymen authoriz paymen busines taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmi my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejecteday in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated to my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate att, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised allowed to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the payor of the payment (PIN) below is my signature for the income tax return (original or amended) I and identification number (PIN) below is my signature for the income tax return (original or amended) I and if the payment is Funds Withdrawal Consent.	e are the am tter, or electriction of the the second of the the second of the the the authorizes the authorizes must be processing of ayment. I fur	ounts for the counts of the co	from the inc turn originat ssion, (b) the designated I paration soft to this accor To revoke (coved no late ectronic pay	ome tax or (ERO) e reason Financial ware for unt. This cancel) a r than 2 yment of that the		
	yer's PIN: check one box only						
X	•	nv PIN	3 2	2 7 5	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	,		
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.						
Your si	Ignature ► Praveen Reddy Date ►	01/19/	/2024	4			
Spous	e's PIN: check one box only	_					
	I authorize to enter or generate r	nv PIN			as my		
	ERO firm name	En		digits, but	,		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.						
Spouse	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part I	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 4 9 Don't ent	6 0	8 2 7	1		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subminents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of In	tting this ret	urn in a	accordance			
ERO's	signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To D	o So					

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



1040		artment of the Treasury—Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.	
For the year Ja	n. 1–Dec	c. 31, 2023, or other tax year beginning		1	, 2023, end	ling			, 20		See se	parate	instructions.	_
Your first name	e and m	 iiddle initial	Last nar								Your social security number			_
PRAVEEN REDDY TATI				REDDY							160	45	3275	
		s first name and middle initial	Last nar										security numb	er
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				P	Apt. no.	- 1			ection Campai	gn
		TSBRIDGE RD				1							ou, or your jointly, want \$	3
		ice. If you have a foreign address, also co	mplete sp	paces belo	ow.	Sta		ZIP c				_	nd. Checking a	
FARMER :						TX		752					not change	
Foreign countr	y name			-oreign pro	ovince/state/	count	У	Foreig	n postal c	ode	your tax	or retu	_	se
Filing Status	<u> X</u>	Single					Head of h	ouseh	old (HOI	L ⊣)				_
-	, <u> </u>	☐ Married filing jointly (even if only o	ne had ir	ncome)				oucon	0.0 (1.101	.,				
Check only one box.		Married filing separately (MFS)		,			☐ Qualifying	surviv	ina spoi	use ((2SS)			
OHE BOX.	If v	you checked the MFS box, enter the	name o	of vour sp	ouse. If voi	ı che	, ,		0 1	,	,	ld's na	me if the	
		ualifying person is a child but not you												
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward										_
Assets		nange, or otherwise dispose of a digi										□ Ye	es 🗵 No	
Standard	Som	neone can claim:	pendent	: 🗆 `	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-status	alien								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bli	nd Sp	ouse	: Was bor	n befo	ore Janua	ary 2,	, 1959		s blind	
Dependent	s (see	instructions):		(2) S	ocial security	,	(3) Relationsh	nip (4) Check t	he bo	x if quali	fies for (see instruction	s):
If more		(1) First name Last name			number to you				Child t	ax cre	edit	Credit fo	or other depender	nts
than four														
dependents,														
see instruction and check	5													
here														
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		112,448	<u>.</u>
Attach Form(s)	b	Household employee wages not re	•								1b			_
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)								1c			_	
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d			_	
1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							1e			_		
was withheld.	f	Employer-provided adoption bene	fits from	Form 88	339, line 29						1f			_
If you did not get a Form	g	Wages from Form 8919, line 6						1g			_			
W-2, see	h	Other earned income (see instruct	,					· ·			1h	_	0	<u>.</u>
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)			<u>1</u> i						110 440	
	<u>z</u>	Add lines 1a through 1h			<u>.</u>						1z		112,448	<u>.</u>
Attach Sch. B	2a	· —	2a				axable interes				2b			_
if required.	3a		3a				rdinary divide				3b			
Standard	4a		4a				axable amoun				4b			_
Deduction for—	5a	-	5a				axable amoun				5b			_
Single or Married filing	6a	,	6a				axable amoun	t		٠ ـ	6b			_
separately,	C	If you elect to use the lump-sum e		•		`	,							
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche								. L	7			_
jointly or Qualifying	8		e from Schedule 1, line 10							8		-11,145		
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-							9		101,303	<u>.</u>
\$27,700 • Head of	10	Adjustments to income from Schedule 1, line 26								10	_	404 55		
household, \$20,800	11	Subtract line 10 from line 9. This is	-								11		101,303	
If you checked	12	Standard deduction or itemized									12		13,850	<u>.</u>
any box under Standard	13	Qualified business income deducti									13		10 0==	
Deduction, see instructions.	14	Add lines 12 and 13									14		13,850 87,453	
	15	Subtract upo 1/1 tram lina 11 lf zar	o or less	e antar	II Ibicicy	Our t	avable incom	••			1 45	1	8//153	

Form 1040 (202)	3)								Page 2	
Tax and	16	Tax (see instructions). Check if any	from Form(s	s): 1 🗌 8814	4 2 🗌 4972	з 🗌		16	14,552.	
Credits	17	Amount from Schedule 2, line 3						17		
	18	Add lines 16 and 17						18	14,552.	
	19	Child tax credit or credit for other	dependents	s from Sched	ule 8812			19		
	20	Amount from Schedule 3, line 8						20		
	21	Add lines 19 and 20						21	_	
	22	Subtract line 21 from line 18. If zer	ro or less, e	nter -0				22	14,552.	
	23	Other taxes, including self-employ	ment tax, fr	rom Schedule	2, line 21			23	0.	
	24	Add lines 22 and 23. This is your t	total tax					24	14,552.	
Payments	25	Federal income tax withheld from:								
•	а	Form(s) W-2				25a 17	,087.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c						25d	17,087.	
If you have a	26	2023 estimated tax payments and	l amount ap	plied from 20	22 return			26		
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	28	Additional child tax credit from Scho	edule 8812			28				
	29	American opportunity credit from	Form 8863,	line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line 15				31				
	32	Add lines 27, 28, 29, and 31. Thes	se are your t	total other pa	yments and refu	ndable credits		32		
	33	Add lines 25d, 26, and 32. These a	are your tot	al payments				33	17,087.	
Refund	34	If line 33 is more than line 24, subt	tract line 24	from line 33.	This is the amour	t you overpaid		34	2,535.	
	35a	Amount of line 34 you want refund	ded to you.	If Form 8888	is attached, chec	k here		35a	2,535.	
Direct deposit?	b	Routing number 3 2 2 2 7	7 1 6	2 7	c Type:	Checking	Savings			
See instructions.	d	Account number 6 7 7 5 (0 8 8	1 9						
	36	Amount of line 34 you want applie	ed to your 2	024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24. This								
You Owe		For details on how to pay, go to w	/ww.irs.gov/	Payments or	see instructions .			37		
	38	Estimated tax penalty (see instruction	tions)			38				
Third Party		you want to allow another person				_				
Designee		structions					•		⊠ No	
		signee's me		Phone no.			onal identif ber (PIN)	ication		
Sign		der penalties of perjury, I declare that I ha	ave examined		accompanying sched		, ,	ne best	of my knowledge and	
-	be	lief, they are true, correct, and complete. [Declaration of	f preparer (other	than taxpayer) is ba	sed on all informati	on of which	prepare	er has any knowledge.	
Here	Yo	ur signature		Date	Your occupation				nt you an Identity	
	Praveen Reddy			/19/2024				Protection PIN, enter it here (see inst.)		
Joint return?					SOFTWARE E					
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.		nust sign.	Date Spouse's occupation				If the IRS sent your spouse an Identity Protection PIN, enter it here		
, 541 1000145.							(see	1151.)		
		one no. (510) 953-9014		Email address	PRAVEENR13				Chapte if	
Paid			arer's signatu		OHDER	Date	PTIN		Check if:	
Preparer		1 PRIYA RAM SAGAR GUPTA TALLAM SYAM		KAM SAGAR	GUPTA TALLAM	01/09/2024	P02082		Self-employed	
Use Only		m's name GLOBAL TAXES		10111011	T 00016				678) 965-9522	
	Fir	m's address 245 ROONEY CT	E BRUN	NSWICK No	N 088T0		Firm'	s EIN	84-3171965	

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

PRAVEEN REDDY TATIREDDY

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

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

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

Sequence No. 01

Your social security number
160-45-3275

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	-11,145.
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	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 . Ente 1040, 1040-SR, or 1040-NR, line 8		10	-11,145.

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-basis g			
	officials. Attach Form 2106	í	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 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
İ	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:			
0E	Total other adjustments. Add lines 24s through 24z		OF	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter he Form 1040, 1040-SR, or 1040-NR, line 10	iere and on	26	
			20	

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.

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

PRAV	EEN REDDY TA	TIREDDY						160-4	5-3275	
Part	Note: If you a	Loss From Rental Real Estate and the in the business of renting personal properts or loss from Form 4835 on page 2, line 40.			c . See	instruc	ctions. If you a	are an indi	vidual, rep	ort farm
		payments in 2023 that would require you								s 🛛 No
В	f "Yes," did you or	will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No
1a		s of each property (street, city, state, ZIP								
Α	41-20/4-14/1	1,Rahman street Krishnalank	a Ar	ndhra p	orades	sh Il	N 520013			
В										
С										
1b	Type of Property (from list below)	For each rental real estate proper above, report the number of fair r	rental	and	Fair Rental Days			Persor Da	QJV	
Α	3	personal use days. Check the QJ	JV box	only	Α		365		0	
В		if you meet the requirements to fi qualified joint venture. See instru	ne as a	a	В					
С		qualified joint vortare. God institut	0110110	,.	С					
1	of Property: Single Family Resid Multi-Family Resid		tal	5 Land 6 Roya		-	Self-Rental Other (descr			
							Properti	es:		
Incon					Α		В			С
3			3		6	84.				
<u> 4</u>		d	4			-				
Exper			_							
5			5							
6		ee instructions)	6 7		2,4	E 0				
7 8		intenance	8		2,4	30.				
9			9							
10		orofessional fees	10							
11		S	11		1,9	3 U				
12		t paid to banks, etc. (see instructions)	12		1, 3	30.				
13	0 0		13							
14			14		2,7	89				
15			15		2,0	_				
16			16		_, _					
17			17		2,6	60.				
18		ense or depletion	18		, -					
19		\\\dd lines 5 through 40	19							
20	Total expenses. A	Add lines 5 through 19	20		11,8	29.				
21	result is a (loss), s	rom line 3 (rents) and/or 4 (royalties). If see instructions to find out if you must	21		-11,1					
22		real estate loss after limitation, if any, ee instructions)	22	(11,14	5.)(()	(
23a	Total of all amoun	nts reported on line 3 for all rental proper	rties			23a		684.		
b		nts reported on line 4 for all royalty prope				23b				
С		nts reported on line 12 for all properties				23c				
d	Total of all amoun	nts reported on line 18 for all properties				23d				
е	Total of all amoun	nts reported on line 20 for all properties				23e	11	,829.		
24	-	sitive amounts shown on line 21. Do not		-				. 24		
25	Losses. Add royalt	ty losses from line 21 and rental real estate	e losse	es from lin	e 22. Er	nter tot	tal losses her	e 25	(11,145.
26		estate and royalty income or (loss).								
		II, and IV, and line 40 on page 2 do not a 1040), line 5. Otherwise, include this an						on · 26		-11,145.