## 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

internal nevertue Service	
Submission Identification Number (SID)	
Taxpayer's name	Social security number
ASHWITH REDDY DANDA	423-99-9988
Spouse's name	Spouse's social security number
Dorth Tow Detume Information Tow Veer English December 04 0000	/Ct
	(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.	4   71 122
1 Adjusted gross income	
2 Total tax	
4 Amount you want refunded to you	
5 Amount you owe	
Part I Taxpayer Declaration and Signature Authorization (Be sure you get	
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or an	
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reasor for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution according authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellated business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amend Electronic Funds Withdrawal Consent.	the U.S. Treasury and its designated Financial bunt indicated in the tax preparation software for institution to debit the entry to this account. This erminate the authorization. To revoke (cancel) a ion requests must be received no later than 2 d in the processing of the electronic payment of the payment. I further acknowledge that the
Taxpayer's PIN: check one box only  X I authorize to enter or get	nerate my PIN 9 9 8 8 as my
ERO firm name	Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.	N method. The ERO must complete Part III
Your signature ► Da	ite -
Spouse's PIN: check one box only	
	nerate my PIN as my
ERO firm name	Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.	
Spouse's signature ► Da	ite ▶
Practitioner PIN Method Returns Only—continue	
Part III Certification and Authentication — Practitioner PIN Method Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual in authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I arrequirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providence.	m submitting this return in accordance with the
ERO's signature ▶ Da	nte ▶
FRO Must Retain This Form — See Instruction	

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

# 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–Dec	. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20	See se	parate instructions.		
Your first name and middle initial Last name				Your social security number							
ASHWITH REDDY DANDA					423 99 9988						
If joint return, s	pouse's	s first name and middle initial	Last na	ame				Spouse	's social security number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.			Apt. no.	Preside	ntial Election Campaign		
2073 HII	DEAWA	AY LANE							here if you, or your		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	te	ZIP code	10 to 55	spouse if filing jointly, want \$3 to go to this fund. Checking a		
FRISCO			4	TX 7			75026		ow will not change		
Foreign country name			Foreign province/state/		county		Foreign postal code				
	-								You Spouse		
Filing Status Check only one box.	☐ If y	Single  Married filing jointly (even if only or Married filing separately (MFS)  ou checked the MFS box, enter the alifying person is a child but not you	name	of your spouse. If you	u che	☐ Qualifying	surviving spouse or QSS box, ent	8 5 5	ild's name if the		
Digital Assets		ny time during 2023, did you: (a) rece ange, or otherwise dispose of a digi	17.80	17	- E		**	* 6	☐ Yes ☒ No		
Standard	2062	eone can claim:  You as a de	Table			a dependent		30,0 m 1,2 <b>f</b> 1	7. W. 3. 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12		
Deduction		Spouse itemizes on a separate retur	n or yo	u were a dual-status	alien	M <del>.</del>					
Δαe/Rlindness	· Vou	Were born before January 2, 1	959 [	Are blind Spo	ouse	· 🗆 Was bori	n before January	2 1959	☐ Is blind		
Dependents			000 [				(4) Chaalatha I	e sees sa	ifies for (see instructions):		
<b>:</b> ■	Postes er	(1) First name Last name		(2) Social security number		(3) Relationshi to you	Child tax	57	Credit for other dependents		
If more than four											
dependents,											
see instructions and check	s										
here $\square$											
Income		Total amount from Form(s) W-2, b	2.0					2	78,647.		
Attach Form(s)		Household employee wages not re						2			
W-2 here. Also	С	Tip income not reported on line 1a	2								
attach Forms W-2G and		Medicaid waiver payments not rep		2							
1099-R if tax	e	*· <b>"</b>	from Form 2441, line 26								
was withheld.  If you did not	I 		nefits from Form 8839, line 29								
get a Form	g	/ages from Form 8919, line 6							0.		
W-2, see instructions.	h i	Nontaxable combat pay election (see instructions)							•		
mstructions.	7	Add lines 1a through 1h							78,647.		
Attach Sch. B		ľ	2a								
if required.			3a b Ordinary dividends								
	4a	IRA distributions	4a			•		2			
Standard Deduction for—	5a	Pensions and annuities	5a		b Ta	axable amount		. 5b			
Single or	6a	Social security benefits	<b>b</b> Taxable amount								
Married filing separately,	С	If you elect to use the lump-sum election method, check here (see instructions)									
\$13,850 Married filing	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here									
jointly or	8	Additional income from Schedule 1, line 10							The second secon		
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>						Ž.			
\$27,700 Head of	10	Adjustments to income from Schedule 1, line 26						2	0 === 01		
household, \$20,800	11	Subtract line 10 from line 9. This is your <b>adjusted gross income</b>						Ž.			
If you checked I	12		eduction or itemized deductions (from Schedule A)								
any box under Standard	13		duction from Form 8995 or Form 8995-A								
Deduction, see instructions.	14 15	Add lines 12 and 13						-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	STATE OF THE STATE		The second of the second	The state of the s	The second second						

ign	Und	der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the	ne best	of my knowledge and
	Des nan	signee's Phone Personal identif ne no. number (PIN)	ication	
esignee		tructions	elow.	× No
hird Party		Estimated tax penalty (see instructions)		
ou Owe	38	For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
mount	37	Subtract line 33 from line 24. This is the amount you owe.		
	36	Amount of line 34 you want applied to your 2024 estimated tax 36		
e instructions.		Account number 7 2 6 9 2 7 6 6 5		
rect deposit?	b	Routing number 1 1 1 0 0 6 1 4 c Type: X Checking Savings		
Ciuilu		Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	1,655
efund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	1,655
		Add lines 27, 26, 29, and 31. These are your total other payments and retundable credits Add lines 25d, 26, and 32. These are your total payments	33	9,563
	31 32	Amount from Schedule 3, line 15	32	
	30	Reserved for future use		
	29	American opportunity credit from Form 8863, line 8		
	28	Additional child tax credit from Schedule 8812		
alifying child, ach Sch. EIC.		Earned income credit (EIC)		
ou have a	26	2023 estimated tax payments and amount applied from 2022 return	26	
		Add lines 25a through 25c	25d	9,563
	C	Other forms (see instructions)		
	b	Form(s) 1099		
	а	Form(s) W-2		
ayments		Federal income tax withheld from:		
		Add lines 22 and 23. This is your <b>total tax</b>	24	7,908
		Other taxes, including self-employment tax, from Schedule 2, line 21	23	0
		Subtract line 21 from line 18. If zero or less, enter -0		7,908
	21	Add lines 19 and 20	21	
		Amount from Schedule 3, line 8	20	
		Child tax credit or credit for other dependents from Schedule 8812	19	7,900
realts	18	Add lines 16 and 17	18	7,908
ax and redits	16 17	Tax (see instructions). Check if any from Form(s):       1       8814       2       4972       3	16 17	7,900
2	10	Tana (and in atmosting a) Charak if any fuens Famor(a), 4  0014  0  0  0070  0  0	40	7,908

Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions								
	Designee's name	Phone no.	E .	Pe nu					
Sign Here  Joint return? See instructions. Keep a copy for your records.	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.								
	Your signature	Date	Your occupation SOFTWARE		means on comment of	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)			
	Spouse's signature. If a joint	Date	Spouse's occupa	Seco	the state of the s	If the IRS sent your spouse an Identity Protection PIN, enter it her (see inst.)			
	Phone no. (920)349-7670 Email address ASHWITH.DANDA@GMAIL.COM					COM			
Paid Preparer Use Only	Preparer's name	Preparer's signa	iture		Date	PTIN	Check if:  Self-employed		
	Firm's name GLOBA			Phone no.					
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816					Firm's EIN	Firm's EIN		
Go to www.irs.gov	//Form1040 for instructions and	the latest information.		BAA	REV 12/18/23 PRO		Form 1040 (2023		

#### SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

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

Department of the Treasury Internal Revenue Service

Name(s) shown on 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

OMB No. 1545-0074

ASHW	ITH REDDY DANDA	423-99-998	38	
Par	t Additional Income			
	Taxable refunds, credits, or offsets of state and local income taxes			
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	E . 5	-7,525.	
6	Farm income or (loss). Attach Schedule F	* * * * *	6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (	)	
	Gambling	8b		
	Cancellation of debt	8c		
	Foreign earned income exclusion from Form 2555	8d (	)	
е	Income from Form 8853	8e		
	Income from Form 8889	8f		
	Alaska Permanent Fund dividends	1		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
	Stock options	8k		
Ī	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		
	Section 951A(a) inclusion (see instructions)	80		
	Section 461(I) excess business loss adjustment	8p		
	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
	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		
	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			

-7,525.

10

Schedule 1 (Form 1040) 2023

Par	Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee-b					
	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	
	Self-employed SEP, SIMPLE, and qualified plans					
17	Self-employed health insurance deduction	* *			17	
18	Penalty on early withdrawal of savings	<b>.</b>			18	
	Alimony paid					
b	Recipient's SSN	# ( <u>-</u>				
С	Date of original divorce or separation agreement (see instructions):					
20	IRA deduction					
21	Student loan interest deduction				2	
	Reserved for future use				2	
	Archer MSA deduction	• •		* * *	23	
24	Other adjustments:	100 0000				
а	Jury duty pay (see instructions)	24a			4	
b	Deductible expenses related to income reported on line 8l from the					
		24b				
C	Nontaxable amount of the value of Olympic and Paralympic medals	240				
٦		24c 24d			-	
	Reforestation amortization and expenses	24u			-	
E		24e				
f	Contributions to section 501(c)(18)(D) pension plans	24f				
	Contributions by certain chaplains to section 403(b) plans 2	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			_	
j	Housing deduction from Form 2555	24j			_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	22- 2-2000				
		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.				00	
	Form 1040, 1040-SR, or 1040-NR, line 10				26	

#### 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.

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

OMB No. 1545-0074 Attachment Sequence No. 13

Name(s) shown on return

Department of the Treasury

Internal Revenue Service

Your social security number

423-99-9988 ASHWITH REDDY DANDA Income or Loss From Rental Real Estate and Royalties Part I 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 4835 on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . . . . . Yes X No If "Yes," did you or will you file required Form(s) 1099? \_\_ Yes No Physical address of each property (street, city, state, ZIP code) 1a KOHEDA HYDERABAD TELANGANA IN 501511 B C Type of Property 1b For each rental real estate property listed Fair Rental Personal Use QJV above, report the number of fair rental and (from list below) Days Days personal use days. Check the QJV box only 365 if you meet the requirements to file as a B qualified joint venture. See instructions. Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties Properties: B Income: 500. Expenses: Auto and travel (see instructions) . . . . . . . 800. Legal and other professional fees . . . . . . . 1,000. 11 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 1,600. 14 14 1,975. 15 15 16 16 2,650. 17 18 18 19 19 Other (list) 20 8,025. Total expenses. Add lines 5 through 19 . . . . . 20 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If 21 result is a (loss), see instructions to find out if you must -7,525. 21 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . 7,525.)(Total of all amounts reported on line 3 for all rental properties 500. 23a Total of all amounts reported on line 4 for all royalty properties . . . . 23b Total of all amounts reported on line 12 for all properties . . . . . . . 23c Total of all amounts reported on line 18 for all properties . . . . . . . 23d 8,025. 23e Total of all amounts reported on line 20 for all properties . . . . . . . **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 24 7,525. 25 **Losses.** Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

26

-7,525.

here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2