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

| | 5.5.135 55.135 | | | | | | |
|---|--|---|--|--|---|--|--|
| Submis | ssion Identification Number (SID) | | | | | | |
| Taxpayer | 's name | Social securi | Social security number | | | | |
| AKSH | ITH REDDY KATKURI | 044-93-3130 | | | | | |
| Spouse's | name | Spouse's social security number | | | | | |
| Part | Tax Return Information — Tax Year Ending December 31, 2023 (Ente | r vear vou a | re au | thorizina | 1 | | |
| | hole dollars only on lines 1 through 5. | year you a | ile au | ti lonzing. | ·) | | |
| | Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | | | | |
| | Adjusted gross income | | 1 | 70 | ,333. | | |
| | Total tax | | 2 | | ,732. | | |
| | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 | | ,794. | | |
| 4 | Amount you want refunded to you | | 4 | | ,062. | | |
| 5 | Amount you owe | | 5 | | | | |
| Part I | Taxpayer Declaration and Signature Authorization (Be sure you get and | кеер а сор | y of y | our retu | rn) | | |
| my knorreturn (c to send for any c Agent to paymen authoriz paymen business taxes to persona | enalties 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 abording and or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectled in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Los initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indiction of the financial institution account indiction is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate to the Indiction of the payment (settlement) date. I also authorize the financial institutions involved in the process of the pr | we are the am itter, or electroction of the tale. S. Treasury a icated in the tale to the authorizates must be processing opayment. I fur | ounts for the counts of the co | rom the in turn origina ssion, (b) the designated paration so to this acco To revoke (ved no late ectronic parakenowledge | come tax tor (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of that the | | |
| | yer's PIN: check one box only | | | | | | |
| X | l authorize GLOBAL TAXES LLC to enter or generate | my PIN 3 | 3 2 | 1 3 0 | as my | | |
| | ERO firm name signature on the income tax return (original or amended) I am now authorizing. | - En | | digits, but er all zeros | aomy | | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN methoelow. | | | | | | |
| Your si | gnature ▶ Date ▶ _ | | | | | | |
| Snous | e's PIN: check one box only | | | | | | |
| | I authorize to enter or generate | my PIN | | | as my | | |
| | ERO firm name | _ | ter five | digits, but | asiny | | |
| | 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 r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow. | | | | | | |
| 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 er all ze | 8 2 7 | 1 | | |
| authoriz | that the above numeric entry is my PIN, which is my signature for the electronic individual income to the text that the second 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 I | ax return (orig nitting this ret | inal or urn in a | amended) accordance | | | |
| ERO's | signature ► Date ► | | | | | | |
| | ERO Must Retain This Form — See Instructions | | | | | | |
| | Don't Submit This Form to the IRS Unless Requested To | Do So | | | | | |

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



| For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, end | | | | ding | | , 2 | 20 | See se | parate ins | structions. | |
|---|----------------|---|--------------------|--------------------------|-----------------|-----------------|-------------|-------------|-----------------------------|----------------------------|------------------|
| Your first name and middle initial Last na | | | | | | | | | Your social security number | | |
| | | | | | | | | | | 93 : | - |
| AKSHITH REDDY KATK If joint return, spouse's first name and middle initial Last na | | | | | | | | | | | ecurity number |
| ii joint rotain, t | poudo | s mot hame and militare militar | Laot na | | | | | | Орошоо | | Journey Humbon |
| Home address | (numbe | er and street). If you have a P.O. box, see | l e instruction | ons. | | | Apt | . no. | Preside | ntial Flect | tion Campaign |
| | • | HOUSE LN | | | | | | | | here if you | |
| | | ce. If you have a foreign address, also co | omplete s | spaces below. | Stat | te | ZIP cod | e | spouse | if filing jo | intly, want \$3 |
| FUQUAY ' | | | · | | NC 27526 | | | 6 | 0 | | l. Checking a |
| Foreign countr | | | F | Foreign province/state/ | | | | oostal code | 1 | low will no x or refund | • |
| · · | | | | | | | | | * | You | _ |
| Filing Status | s X | Single | | | | Head of ho | ousehol | d (HOH) | | | |
| _ | | Married filing jointly (even if only o | ne had i | income) | | | | , | | | |
| Check only one box. | | Married filing separately (MFS) | | , | | Qualifying | survivin | g spouse | (QSS) | | |
| 00 20 | lf y | ou checked the MFS box, enter the | e name c | of your spouse. If you | u che | | | | | ild's nam | e if the |
| | | alifying person is a child but not you | | ndent: | | | | | | | |
| District of | Λ+ or | ny time during 2023, did you: (a) rec | noista (aa | | | | | | | | |
| Digital Assets | | ange, or otherwise dispose of a dig | | | | | | | | Yes | X No |
| Standard | _ | eone can claim: You as a de | | | | | .,. (000 | ou doud | 110.) | | |
| Deduction | | Spouse itemizes on a separate return | • | • | | а асренает | | | | | |
| | | | | _ | unon | | | | | | |
| Age/Blindnes | s You: | : Were born before January 2, 1 | 1959 _ | Are blind Spo | ouse: | Was bor | | January 2 | | | olind |
| Dependent | • | • | | (2) Social security | / | (3) Relationshi | ip (4) (| | | | e instructions): |
| If more | (1) F | irst name Last name | number | number to you | | | Child tax c | redit | Credit for o | other dependents | |
| than four dependents, | | | | | | | | | | | |
| see instruction | s — | | | | | | | | | | <u> </u> |
| and check | 1 — | | | | | | | | | | |
| here L | | T | 4.1 | | | | | | | | 04 040 |
| Income | 1a | Total amount from Form(s) W-2, b | , | , | | | | | . 1a | | 84,242. |
| Attach Form(s) | b | Household employee wages not reported on Form(s) W-2 | | | | | | . 1b | | | |
| W-2 here. Also attach Forms | C | | | | | | | . 10 | _ | | |
| W-2G and | d | Medicaid waiver payments not reported on Form(s) W-2 (see instructions) | | | | | | | . 16 | | |
| 1099-R if tax was withheld. | e e | Employer-provided adoption benefits | | · · | | | | | . 16 | | |
| If you did not | f | Wages from Form 8919, line 6. | | 11 1 OTTI 0009, IIIIe 29 | • | | | | . 1g | _ | |
| get a Form | g h | Other earned income (see instruct | tions) | | | | | | . 16 | | 0. |
| W-2, see | | | | | | | | | | | |
| instructions. | z | Add lines 1a through 1h | 300 111311 | 140110113) | | | | | . 1z | | 84,242. |
| Attach Sch. B | <u>-</u> | Ŭ I | 2a | · · · · · i | b Тя | axable interest | • • | | . 12 | | |
| if required. | 3a | · | 3a | | | rdinary divider | | | | _ | |
| | 4a | | 4a | | | axable amount | | | . 4b | | |
| Standard | 5a | _ | 5a | | | axable amount | | | . 5b | _ | |
| Deduction for— Single or | 6a | | 6a | | | axable amount | | | . 6b | | |
| Married filing separately, | С | If you elect to use the lump-sum e | | method, check here | | | | [| | | |
| \$13,850 | 7 | Capital gain or (loss). Attach Sche | | • | • | , | | [| 7 | | |
| Married filing jointly or | larried filing | | | | . 8 | | 13,909. | | | | |
| Qualifying Q Add lines 17 2h 2h 4h 5h 6h 7 and 8 This is your total income | | | | | . 9 | | 70,333. | | | | |
| surviving spouse, \$27,700 10 Adjustments to income from Schedule 1, line 26 | | | | | | . 10 |) | | | | |
| Head of household, | Head of | | | | | | . 11 | | 70,333. | | |
| \$20,800 | 12 | Standard deduction or itemized | • | - | | | | | . 12 | 2 | 13,850. |
| If you checked any box under | 13 | Qualified business income deduct | | | | 5-A | | | . 13 | 3 | |
| Standard Deduction, | 14 | Add lines 12 and 13 | | | | | | | . 14 | ı | 13,850. |
| see instructions. | 15 | Subtract line 14 from line 11. If ze | ro or les | s. enter -0 This is v | our t | avable incom | e | | . 15 | : | 56,483. |

| Form 1040 (202 | 3) | | | | | | Page 2 | | |
|------------------------------------|---------|---|-----------------------------|--|------------------------|----------------|--|--|--|
| Tax and | 16 | Tax (see instructions). Check if any from F | orm(s): 1 881 | 4 2 4972 | 3 🗌 | 1 | 7,732. | | |
| Credits | 17 | | | | | 1 | 17 | | |
| | 18 | Add lines 16 and 17 | | | | 1 | 7,732. | | |
| | 19 | Child tax credit or credit for other depen | dents from Sched | ule 8812 | | 1 | 19 | | |
| | 20 | Amount from Schedule 3, line 8 | | | | 2 | 20 | | |
| | 21 | Add lines 19 and 20 | | | | 2 | 21 | | |
| | 22 | Subtract line 21 from line 18. If zero or le | ess, enter -0 | | | 2 | 7,732. | | |
| | 23 | Other taxes, including self-employment | tax, from Schedule | e 2, line 21 | | 2 | 23 0. | | |
| | 24 | Add lines 22 and 23. This is your total to | - | • | | 2 | 24 7,732. | | |
| Payments | 25 | Federal income tax withheld from: | | | | | · | | |
| , | а | Form(s) W-2 | | | 25a 10, | 794. | | | |
| | b | Form(s) 1099 | | | 25b | | | | |
| | С | Other forms (see instructions) | | | 25c | | | | |
| | d | Add lines 25a through 25c | | | | 2 | 5d 10,794. | | |
| If you have a | 26 | 2023 estimated tax payments and amou | int applied from 20 | 022 return | | 2 | 26 | | |
| qualifying child, | 27 | Earned income credit (EIC) | | No . | 27 | | | | |
| attach Sch. EIC. | 28 | Additional child tax credit from Schedule 8 | 3812 | | 28 | | | | |
| | 29 | American opportunity credit from Form 8 | 3863, 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. These are | your total other p a | ayments and refu | indable credits | 3 | 32 | | |
| | 33 | Add lines 25d, 26, and 32. These are you | | | | 3 | 10,794. | | |
| Refund | 34 | If line 33 is more than line 24, subtract line | ne 24 from line 33. | . This is the amour | nt you overpaid | 3 | 3,062. | | |
| | 35a | Amount of line 34 you want refunded to | you. If Form 8888 | 3 is attached, ched | k here | . 🗆 🖪 | 5a 3,062. | | |
| Direct deposit? | b | Routing number 0 7 1 0 0 0 | 0 1 3 | c Type: | Checking S | avings | | | |
| See instructions. | d | Account number 5 3 0 2 5 1 | 3 3 6 | | | | | | |
| | 36 | Amount of line 34 you want applied to y | our 2024 estimate | ed tax | 36 | | | | |
| Amount | 37 | Subtract line 33 from line 24. This is the | amount you owe | | | | | | |
| You Owe | | For details on how to pay, go to www.irs | | | | 3 | 37 | | |
| | 38 | Estimated tax penalty (see instructions) | | | 38 | | | | |
| Third Party Designee | | you want to allow another person to tructions | | rn with the IRS? | | nplete belo | w. 🛛 No | | |
| 3 | | signee's | Phone | | | al identificat | ion | | |
| | na | | no. | | numbe | | | | |
| Sign Here | | der penalties of perjury, I declare that I have examelef, they are true, correct, and complete. Declara | | | | | , , | | |
| 11010 | Yo | Your signature | | Date Your occupation | | | S sent you an Identity | | |
| | | | | COETWADE ENCINEED | | | on PIN, enter it here | | |
| Joint return? See instructions. | Sn | ouse's signature. If a joint return, both must sig | n. Date | SOF'TWARE ENGINEER Date Spouse's occupation | | (see inst. | the IRS sent your spouse an | | |
| Keep a copy for your records. | | ouse a signature. If a joint return, boar must sig | iii. Bate | Said Spouse 3 dooupation | | | Identity Protection PIN, enter it here (see inst.) | | |
| | Ph | one no. (773)707-1636 | Email address | AKSHDEVP@G | GMAIL.COM | | | | |
| Doid | Pre | parer's name Preparer's s | ignature | | Date | PTIN | Check if: | | |
| Paid | SYAN | PRIYA RAM SAGAR GUPTA TALLAM SYAM PRI | YA RAM SAGAR | GUPTA TALLAM | 02/17/2024 E | 0208270 |)3 Self-employed | | |
| Preparer | Fir | m's name GLOBAL TAXES LLC | | | - | Phone no | o. (678)965-9522 | | |
| Use Only | Fir | n's address 245 ROONEY CT E I | BRUNSWICK N | J 08816 | | Firm's El | N 84-3171965 | | |
| Go to www.irs.o | ov/Forr | 21040 for instructions and the latest information | | DAA | DEV 02/11/24 DDO | | Form 1040 (202 | | |

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

| Name(s) shown on Form 1040, 1040-SR, or 1040-NR | | | | social security number | | |
|---|---|--------------|-----|------------------------|----------|--|
| AKSI | 044-9 | 3-31 | 30 | | | |
| 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. Att | ach Schedule | ЭE. | 5 | -13,909. | |
| 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 instructions) | 8m | | | | |
| n | Section 951(a) inclusion (see instructions) | 8n | | | | |

80

8p

8q

8r

8s

8t

8u

8z

For Paperwork Reduction Act Notice, see your tax return instructions.

u Wages earned while incarcerated

9

10

z Other income. List type and amount:

Section 951A(a) inclusion (see instructions)

Section 461(I) excess business loss adjustment

Taxable distributions from an ABLE account (see instructions) . . .

Scholarship and fellowship grants not reported on Form W-2 . . .

Nontaxable amount of Medicaid waiver payments included on Form

Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan

Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form

Schedule 1 (Form 1040) 2023

-13,909.

9

10

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

| Par | 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 | 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 | | - | |
| 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) | 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: | | | | |
| 05 | Tatal allows allow to sales Add lines Ode thousands Ode | 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 | . ∟nter | nere and on | | |
| | | | | 26 | I. 4 (F 1010) 0000 |
| | BAA | REV 02/ | 11/24 PRO | Schedu | le 1 (Form 1040) 2023 |

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,

Attachment

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.

Sequence No. 13

OMB No. 1545-0074

AKSHITH REDDY KATKURI 044-93-3130 Part I Income or Loss From Rental Real Estate and Royalties 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 . 1a Physical address of each property (street, city, state, ZIP code) TELANGANA IN 517408 PALAMANER CHITTOOR Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 580. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,887. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 1,555. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 2,124. 14 Repairs 2,776. 15 Supplies 15 16 16 Taxes 17 Utilities 17 2,421. 18 3,726. 18 Depreciation expense or depletion 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 14,489. 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 -13,909. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 13,909.) 580. 23a Total of all amounts reported on line 3 for all rental properties 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 3,726.

24

25

26

Total of all amounts reported on line 18 for all properties

Total of all amounts reported on line 20 for all properties

Income. Add positive amounts shown on line 21. Do not include any losses

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

13,909.

-13,909.

23d

23e

14,489.

24

25

26