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

	513.1.1.0 53.1.1.0					
Submis	ssion Identification Number (SID)					
Taxpayer	's name	Social secur	ity numl	ber		
RAVI	KUMAR NAIDU PRASADAM	443-85-9454				
Spouse's	name	Spouse's so	pouse's social security number			
В	To Dilate the Company of the Company			0		
Part	, , ,	year you a	are au	thorizing.	.)	
	hole 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 1	124	,093.	
	Total tax		2		,093. ,258.	
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,793.	
	Amount you want refunded to you		4		, 793. , 535.	
	Amount you owe		5	J	, , , , , , .	
Part I		eep a coi		our retu	rn)	
my know return (of to send for any of Agent to payment authorize payment business taxes to persona Electron	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 above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the I.I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I am ic Funds Withdrawal Consent.	e are the ameter, or election of the state of the teath of the state of the the the authorizests must be processing cayment. I full	ronic recreased in the control of the electron	from the inc turn original ssion, (b) the designated paration soft to this according To revoke (ved no late dectronic parack	come tax tor (ERO) ne reason Financial ftware for bunt. This cancel) a er than 2 ayment of that the	
Taxpay	ver's PIN: check one box only		9 4	4 E 4		
×	I authorize GLOBAL TAXES LLC to enter or generate n	ny PIN		4 5 4	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.			digits, but er all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.					
Your sig	gnature ▶ Date ▶					
Spous	e's PIN: check one box only	_				
Spouse	-	av DINI			as my	
I authorize to enter or generate my PIN as						
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am no 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 II	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 en	6 0	8 2 7	1	
		Don't en	cor an Zt			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income tax ed 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 e-file Providers of Indiana.	tting this ret	urn in a	accordance		
FRO's	signature ► Date ►					
<u> </u>	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To D	o So				

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



£1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545-	0074	IRS Use Only	–Do not v	write or staple in this space.		
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 202							, ending , 20				See separate instructions.		
Your first name	iddle initial	ame						Your social security number					
RAVI KUN	NAIDU	SADAM						443	85 9454				
If joint return, s	s first name and middle initial	ame						Spouse's social security numb					
	/ 1										<u> </u>		
										ł	ential Election Campaig here if you, or your		
											if filing jointly, want \$3		
GEORGET(ce. If you have a foreign address, also ce	inpicto .	эрассэ вс	to go to this f			this fund. Checking a					
Foreign countr				Foreign p	1				n postal code	1	low will not change x or refund.		
· · · · · · · · · · · · · · · · · · ·	,) our tu	You Spous		
Filing Status	s X	Single					Head of ho	ouseh	old (HOH)	ı			
Check only		Married filing jointly (even if only or	ne had	income)									
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spouse	(QSS)			
	If y	ou checked the MFS box, enter the	name	of your s	pouse. If you	ı che	ecked the HOH	or Q	SS box, ente	er the ch	ild's name if the		
	qu	alifying person is a child but not you	ır depe	ndent:									
Digital	At ar	ny time during 2023, did you: (a) rec	eive (as	a reward	d, award, or i	payr	ment for proper	tv or	services); or	(b) sell,			
Assets		ange, or otherwise dispose of a dig						-			☐ Yes ☐ No		
Standard		eone can claim:	•		•		a dependent						
Deduction		Spouse itemizes on a separate retur	n or yo	u were a	dual-status a	alien	1						
Age/Blindnes	s You:	Were born before January 2, 1	959 [Are b	lind Spo	use	: Was bor	n befo	ore January 2	2, 1959	☐ Is blind		
Dependent	s (see	instructions):		(2)	Social security		(3) Relationshi	ip (4) Check the b	ox if qual	ifies for (see instructions		
If more	(1) F	irst name Last name			number		to you		Child tax c	redit	Credit for other dependent		
than four													
dependents, see instruction	s												
and check	· —												
here L													
Income	1a	Total amount from Form(s) W-2, b								. 1a	,		
Attach Form(s)	b									. 1k			
W-2 here. Also attach Forms	C C	Tip income not reported on line 1a (see instructions)											
W-2G and	d	Taxable dependent care benefits f								. 16			
1099-R if tax was withheld.	e f	Employer-provided adoption bene			•					. 11			
If you did not		Wages from Form 8919, line 6.	1113 1101	ii i oiiii c	0009, III le 29	•				. 10			
get a Form	g h	Other earned income (see instructi	ions)			•				. 11			
W-2, see instructions.	i	Nontaxable combat pay election (s	,	ructions)		•	1i	i.					
	z	Add lines 1a through 1h						<u> </u>		. 1z	149,940.		
Attach Sch. B			2a	• •	· · · ·	b T	axable interest	•		. 2t			
if required.	3a	· · · · · · · · · · · · · · · · · · ·	3a				ordinary divider			. 3k			
	4a		4a				axable amount			. 4k			
Standard Deduction for—	5a	Pensions and annuities	5a				axable amount			. 5k)		
• Single or	6a		6a			b T	axable amount	:		. 6b)		
Married filing separately,	С	If you elect to use the lump-sum election method, check here (see instructions)											
\$13,850	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							□				
 Married filing jointly or 	8	Additional income from Schedule 1, line 10						. 8	-15,847.				
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							. 9	134,093.			
\$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 your adjusted gross income							. 11	134,093.			
\$20,800 If you checked	12	Standard deduction or itemized deductions (from Schedule A)							. 12	13,850.			
any box under Standard	13	Qualified business income deduct	ion fron	n Form 8	995 or Form	899	5-A			. 13	3		
Deduction,	14									. 14	· ·		
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter	-0 This is yo	our t	taxable incom	е.		. 15	120,243.		

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check in	f any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	22,258.	
Credits	17	Amount from Schedule 2, line	3					17		
	18	Add lines 16 and 17						18	22,258.	
	19	Child tax credit or credit for o	ther dependen	ts 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 zero or less,	enter -0				22	22,258.	
	23	Other taxes, including self-en	nployment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is y	our total tax					24	22,258.	
Payments	25	Federal income tax withheld t	from:							
•	а	Form(s) W-2				25a 2	7,793			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions))			25c				
	d	Add lines 25a through 25c .						25d	27 , 793.	
If you have a	26	2023 estimated tax payments	s and amount a	pplied from 20	22 return			26		
qualifying child,	27	Earned income credit (EIC) .			No .	27				
attach Sch. EIC.	28	Additional child tax credit from	Schedule 8812			28				
	29	American opportunity credit f	rom Form 8863	8, 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.	32							
	33	Add lines 25d, 26, and 32. Th	ese are your to	tal payments				33	27,793.	
Refund	34	If line 33 is more than line 24,	subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	5,535.	
	35a	Amount of line 34 you want re	efunded to you	ı. If Form 8888	is attached, che	ck here	\square	35a	5,535.	
Direct deposit?	b	Routing number 0 7 2				Checking [] Savings			
See instructions.	d	Account number 3 7 5	0 1 5 9	3 5 4 9	9 7					
	36	Amount of line 34 you want a	pplied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24.								
You Owe		For details on how to pay, go	to www.irs.gov	//Payments or	see instructions .			37		
	38	Estimated tax penalty (see ins	structions) .			38				
Third Party		you want to allow another	•							
Designee		structions					Complete		⊠ No	
		signee's me		Phone no.			rsonal iden mber (PIN)	titication		
Sign	Un	der penalties of perjury, I declare that	at I have examined	d this return and	accompanying sche	dules and stateme	ents, and to	the best	of my knowledge and	
Here	be	lief, they are true, correct, and comp	olete. Declaration of	of preparer (othe	r than taxpayer) is ba	sed on all informa	tion of whic	ch prepar	er has any knowledge.	
Here	Yo	Your signature		Date Your occupation				If the IRS sent you an Identity		
							tection P e inst.)	IN, enter it here		
Joint return? See instructions.		avec's signature If a laint vature. It	DEVOPS ENGINEER			·				
Keep a copy for your records.		Spouse's signature. If a joint return, both must sign.		Date Spouse's occupation			Ide	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
		one no. (313) 977-7156		Email address	P.RAVIKUMAR	21320CMATT (,			
			Preparer's signat		I . IVA V I I V IIV.	Date	PTIN		Check if:	
Paid		M PRIYA RAM SAGAR GUPTA TALLAM			СПРТА ТАТ.Т.АМ	03/01/2024		32703	Self-employed	
Preparer		m's name GLOBAL TAX		1411 01101111	001111 111LDIII1	100/01/2021			(678) 965-9522	
Use Only		m's address 245 ROONEY		NSWICK N	т 08816			n's EIN	84-3171965	
		1010 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	27 7 210				1	5 = 1	- 4040	

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

RAVI KUMAR NAIDU PRASADAM

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 soc	ial security number
443-85	-9454

Par	t 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	ich Schedule E .	5	-15,847.
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. Enter			
	1040. 1040-SR. or 1040-NR. line 8		10	-15,847.

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	-basis	government		
	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	041			
	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	04:			
	Housing deduction from Form 2555	24i 24j		-	
J Ia	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24j		-	
k	1041)	24k			
_		24K		-	
Z	Other adjustments. List type and amount:	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income			23	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		23/24 PRO		le 1 (Form 1040) 2023
	BAA	1\L'V UZ/	LUIZA FINO		

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

OMB No. 1545-0074

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

Your social security number

443-85-9454 RAVI KUMAR NAIDU PRASADAM 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 . ☐ Yes ☐ No 1a Physical address of each property (street, city, state, ZIP code) PLOT NO: 44,45, SAI VIHAR NAGAR PHASE-2, MEERPET RANGA REDDY, TELANGANA IN 500097 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 310 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 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 710. 3 Rents received . 3 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 890. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 1,845. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 4,122. 14 Repairs 4,851. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,754. 18 3,095. 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 16,557. 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 -15,847.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 15,847.) 710. 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 3,095. 23d Total of all amounts reported on line 18 for all properties 23e 16,557. Total of all amounts reported on line 20 for all properties 24 Income. Add positive amounts shown on line 21. Do not include any losses 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 15,847. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 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 .

-15**,**847.