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

Submission Identification Number (SID)						
Taxpayer's name S	Social security	number				
LAKSHMI PRASANNA KUM YARRAM	831-05-9786					
Spouse's name	Spouse's social	security number	er			
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter y	ear you are	authorizing	ŋ.)			
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.						
1 Adjusted gross income		1 138	8,863.			
2 Total tax		2 23	3,403.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			5,906.			
4 Amount you want refunded to you	_		3,503.			
5 Amount you owe	en a conv	5 of your retu	ırn)			
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I						
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indica payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation request business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the propersonal identification number (PIN) below is my signature for the income tax return (original or amended) I am Electronic Funds Withdrawal Consent.	Treasury and ated in the tax to debit the eithe authorizations to must be rocessing of the ment. I further	its designated preparation so ntry to this accon. To revoke eceived no late the electronic per acknowledge	d Financial oftware for count. This (cancel) a ter than 2 sayment of e that the			
			1			
Taxpayer's PIN: check one box only X I authorize GLOBAL TAXES LLC to enter or generate my	V DIN 5	9 7 8 6	00 mv			
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	* Enter	five digits, but enter all zeros	as my			
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 method below.						
Your signature ▶ Date ▶						
Spouse's PIN: check one box only			_			
I authorize to enter or generate my	V DINI		as my			
ERO firm name		five digits, but] as my			
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) I am now if you are entering your own PIN and your return is filed using the Practitioner PIN method below.						
Spouse's signature ▶ Date ▶						
Practitioner PIN Method Returns Only—continue below						
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.	2 4 9 6		7 1			
	Don't enter	an zeros				
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitti requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of Indi	ting this return	in accordanc				
ERO's signature ▶ Date ▶						

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



1040		partment of the Treasury—Internal Revenue Servi .S. Individual Income Tax		urn 2	20 2 :	3	OMB No. 1545-	0074	IRS Use Only	–Do not w	rite or sta	aple in this space.
For the year Jai	n. 1–D	ec. 31, 2023, or other tax year beginning			, 2023, endi	ing			, 20	See se	parate	instructions.
Your first name	e and	middle initial	Last nar	me						Your so	cial sec	curity number
LAKSHMI	PR	ASANNA KUM	YARR	.AM						831	05	9786
If joint return, s	spouse	e's first name and middle initial	Last nar	me						Spouse	's socia	I security numbe
Home address	(num	per and street). If you have a P.O. box, see	instruction	ons.				А	pt. no.	Preside	ntial Ele	ection Campaigr
9520 SP	ECTI	RUM DR						1	0203	ı	,	ou, or your
City, town, or post office. If you have a foreign address, also complete spaces be				paces below		State ZIP code					_	jointly, want \$3 nd. Checking a
AUSTIN						ТХ		787	170060			not change
Foreign countr	y nam	е	F	oreign provi	nce/state/c	count	у	Foreig	n postal code	your tax		•
											Yo	ou Spouse
Filing Status	s [X Single					☐ Head of ho	ouseho	old (HOH)			
Check only	[Married filing jointly (even if only or	ne had ir	ncome)								
one box.	[Married filing separately (MFS)					☐ Qualifying	surviv	ing spouse	(QSS)		
	I1	you checked the MFS box, enter the	name o	of your spou	use. If you	ı che	cked the HOH	or QS	SS box, ente	er the ch	ild's na	me if the
	C	ualifying person is a child but not you	ır depen	dent:								
 Digital	At	any time during 2023, did you: (a) rec	eive (as	a reward. a	ward. or i	pavn	nent for proper	tv or s	services): or	(b) sell.		
Assets		change, or otherwise dispose of a dig									□ Y	es 🗵 No
Standard	So	meone can claim:	pendent	t 🗌 Yo	ur spouse	as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or you	were a dua	al-status a	alien						
Age/Blindnes	- Vo	u: Were born before January 2, 1	959 F	Are blind	Sno.	use:	. Mas bor	n hafa	re January 2	1050		s blind
		•	000 _	Ī				(4)		-		(see instructions):
•		e instructions): First name Last name			ial security ımber		(3) Relationshi	p (''	Child tax c			or other dependents
If more than four	(.,			,		,						
dependents,	_								+			
see instruction	ıs —											\dashv
and check here	1 —											—
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructio	ns)					. 1a		154,506.
IIICOIIIE	b		•		,					. 1b		
Attach Form(s) W-2 here. Also	c		Tip income not reported on line 1a (see instructions)								;	
attach Forms	c	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								. 1d		
W-2G and	e	Taxable dependent care benefits from Form 2441, line 26							. 1e			
1099-R if tax was withheld.	f	'	pployer-provided adoption benefits from Form 8839, line 29							. 1f		
If you did not	g							. 1g				
get a Form	h		·						. 1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	,	uctions) .			1i					
	Z									. 1z	:	154,506.
Attach Sch. B	2 a	Tax-exempt interest	2a			b Ta	axable interest			. 2b	,	
if required.	3a	Qualified dividends	3a			b 0	rdinary divider	nds .		. 3b	,	
	4a	IRA distributions	4a			b Ta	axable amount			. 4b	,	
Standard Deduction for—	5a	Pensions and annuities	5a			b Ta	axable amount			. 5b)	
Single or	6a	Social security benefits	6a			b Ta	axable amount			. 6b)	
Married filing separately,	c	If you elect to use the lump-sum e	lection n	nethod, ch	eck here (see	instructions)		[
\$13,850	7	Capital gain or (loss). Attach Schee	dule D if	required. I	f not requ	ired,	check here		[□ <u> 7</u>		
Married filing jointly or	8	Additional income from Schedule	Additional income from Schedule 1, line 10							. 8		-15,643.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8. ⁻	This is you	total inc	ome				. 9		138,863.
\$27,700 Head of	10	Adjustments to income from Sche	dule 1, li	ine 26 .						. 10)	
household,	11	Subtract line 10 from line 9. This is	s your ac	djusted gro	oss incom	ne				. 11		138,863.
\$20,800 If you checked	12	Standard deduction or itemized	deducti	i ons (from S	Schedule	A)				. 12	:	13,850.
any box under	13	Qualified business income deduct	ion from	Form 8995	or Form	899	5-A			. 13	3	
Standard Deduction,	14	Add lines 12 and 13								. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0	. This is yo	our t	axable incom	е.		. 15	;	125,013.

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check i	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌		16	23,403.
Credits	17	Amount from Schedule 2, line						17	
	18	Add lines 16 and 17					[18	23,403.
	19	Child tax credit or credit for c	other dependen	ts from Sched	ule 8812		🗆	19	
	20	Amount from Schedule 3, line	e 8					20	
	21	Add lines 19 and 20					🗆	21	
	22	Subtract line 21 from line 18.	If zero or less,	enter -0			🗆	22	23,403.
	23	Other taxes, including self-er	nployment tax,	from Schedule	e 2, line 21		🗆	23	0.
	24	Add lines 22 and 23. This is y	our total tax					24	23,403.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 26	,906.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c .					2	25d	26,906.
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	n Schedule 8812	2		28			
	29	American opportunity credit t	from Form 8863	3, line 8		29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line	e 15			31			
	32	Add lines 27, 28, 29, and 31.	These are your	total other pa	ayments and refu	undable credits		32	
	33	Add lines 25d, 26, and 32. Th						33	26,906.
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	3,503.
itorana	35a	Amount of line 34 you want r	efunded to you	u. If Form 8888	is attached, chec	ck here	. 🗆 🖫	35a	3,503.
Direct deposit?	b	Routing number 1 1 1	0 0 0 6	1 4	c Type:	Checking :	Savings		
See instructions.	d	Account number 7 5 5	3 1 7 2	1 6					
	36	Amount of line 34 you want a	pplied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24.	This is the amo	ount vou owe					
You Owe		For details on how to pay, go						37	
	38	Estimated tax penalty (see in	structions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee	ins	structions	·			🗌 Yes. Co	mplete bel	ow.	X No
		signee's		Phone			nal identifica	ition	
	naı			no.			er (PIN)	L 4	
Sign		der penalties of perjury, I declare the ief, they are true, correct, and comp							, ,
Here		ur signature		Date	Your occupation			•	nt you an Identity
	10	ur signature		Date	Tour occupation		I		N, enter it here
Joint return?					ENGINEER	(see inst.)			
See instructions.	Sp	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupati	ion			nt your spouse an
Keep a copy for your records.					Identity (see ins		ection PIN, enter it here		
,		(020)000 2115	•	- " "			,		
		one no. (832)909-3117		Email address	YARRAMPRASA	NNA@GMAIL.CC		$\overline{}$	Chaple if
Paid		eparer's name	Preparer's signat		CIIDMA TATTA	Date	PTIN	, , ,	Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	03/10/2024	P020827		Self-employed
Use Only		m's name GLOBAL TAX			T 00016				678)965-9522
		m's address 245 ROONEY		INSWICK N			Firm's E	:IN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the lates	t information.		BAA	REV 03/04/24 PRO			Form 1040 (2023)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal

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

Internal Revenue Service	Sequence No. 01		
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
LAKSHMI PRASAN	NA KUM YARRAM	831-05	-9786

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 S	Schedule E .	5	-15,643.
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	8р			
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	-15,643.

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

Par	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	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:	04-			
0E		24z		05	
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 Form 1040, 1040-SR, or 1040-NR, line 10	. ⊏nter	nere and on	26	
					de 4 (Ferme 4040) 0000
	BAA	REV 03/	04/24 PRO	ocnedu	ile 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.

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

Attachment Sequence No. 13

OMB No. 1545-0074

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

LAKSHMI PRASANNA KUM YARRAM

Your social security number 831-05-9786

Par	Income or Loss From Rental Real Estate a Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40	erty, use	yalties Schedule	C . See	instru	ctions. If you a	are an indi	vidual, rep	ort farm
Α	Did you make any payments in 2023 that would require you		Form(s) 1	099? 5	See in:	structions .		. \(\text{Ye} \)	s X No
1a									
A	REVENUE WARD NO 33 NANDYAL ANDHRA PRA			8502					
<u></u> B	REVENUE WARD NO 33 NAMBIAL ANDLIKA FRA	ME OII	111 31	.0302					
C									
1b	Type of Property (from list below) 2 For each rental real estate property listed above, report the number of fair rental and 5 Fair Rental Personal Use Days 6 Days								
A	gersonal use days. Check the C			Α		365		0	
В	if you meet the requirements to			В		303			- i
	qualified joint venture. See instr	ructions	s. <u> </u>						- i
	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Re Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (desc	ribe)		
						Properti	ies:		
Incor	me:			Α		В			С
3	Rents received	3		6	00.				
4	Royalties received	4							
Expe	nses:								
5	Advertising	5 6							
6	Auto and travel (see instructions)	1,8							
7	Cleaning and maintenance								
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,4	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14			98.				
15	Supplies	15		2,5	46.				
16	Taxes	16							
17	Utilities	17			29.				
18	Depreciation expense or depletion	18		2,9	45.				
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		16,2	43.				
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		-	-15,6	43.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(15,64	13.)	()	()
23a	Total of all amounts reported on line 3 for all rental prop	erties			23a		600.		
b	Total of all amounts reported on line 4 for all royalty pro	perties			23b				
С	Total of all amounts reported on line 12 for all properties	-			23c				
d	Total of all amounts reported on line 18 for all properties	3			23d	2	2,945.		
е	Total of all amounts reported on line 20 for all properties				23e	16	,243.		
24	Income. Add positive amounts shown on line 21. Do no		de any los	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real esta		-		nter to	tal losses her	_	(15,643.)
26	Total rental real estate and royalty income or (loss).								
-	here. If Parts II, III, and IV, and line 40 on page 2 do n Schedule 1 (Form 1040), line 5. Otherwise, include this a	ot appl	ly to you,	also e	nter t	his amount o		-	-15,643.

Form **4562**

Department of the Treasury Internal Revenue Service Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2023

Attachment
Sequence No. 179

Name(s) shown on return Business or activity to which this form relates Identifying number LAKSHMI PRASANNA KUM YARRAM Sch E REVENUE WARD NO 33 831-05-9786 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1,160,000. 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,890,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property h Residential rental 27.5 yrs. MM S/L 01/23 84,521. 2,945 S/L 27.5 yrs. MM property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. **b** 12-year ММ S/L c 30-year 30 yrs. ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 2,945. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.