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

20**23** OMB No. 1545-0074

For the year Jar	n. 1–Dec	. 31, 2023, or other tax year beginning		, 2023, endi	ing	, 20	See ser	parate instructions.
Your first name and middle initial Last n				ame	Your so	Your social security number		
RUSHIKESH REDDY			BOR	ANCHU	*** ** 4996			
If joint return, spouse's first name and middle initial			Last n	ame	Spouse's social security number			
Home address	(numbe	r and street). If you have a P.O. box, see	instruct	tions.		Apt. no.	Preside	ntial Election Campaign
6323 PROSPERITY CHURCH RD							Check here if you, or your	
		ce. If you have a foreign address, also co	mplete	spaces below.	ZIP code	spouse	spouse if filing jointly, want \$3	
CHARLOTT	ſΕ				28269		this fund. Checking a ow will not change	
Foreign country name				Foreign province/state/c	Foreign postal code		or refund.	
						☐ You ☐ Spous		
Filing Status	<u> </u>	Single						
Check only		Married filing jointly (even if only o						
one box.		Married filing separately (MFS)	(QSS)					
	If y	ou checked the MFS box, enter the	name	of your spouse. If you	checked the HOH	or QSS box, ent	er the chi	ld's name if the
	qu	alifying person is a child but not you	ır depe	endent:				
 Digital	At ar	y time during 2023, did you: (a) rec	eive (as	s a reward, award, or i	payment for proper	rty or services); o	r (b) sell.	
Assets		ange, or otherwise dispose of a dig						☐ Yes ☐ No
Standard	Som	eone can claim: You as a de	pender	nt Your spouse	as a dependent			
Deduction		Spouse itemizes on a separate retur	n or yo	u were a dual-status a	alien			
Age/Blindness	- Vou	☐ Were born before January 2, 1	050	Are blind Spo	use: Was bor	n before January	2 1050	s blind
			909			(4) (1)		fies for (see instructions):
•		see instructions): (1) First name Last name		(2) Social security number	Child tax	1	Credit for other dependents	
If more than four	(.,				to you			
dependents,								
see instructions	s —							
and check here \square]				, T			
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	ee instructions)			. 1a	87,770.
	b	Household employee wages not re	eported	on Form(s) W-2			. 1b	
Attach Form(s) W-2 here. Also	C	Tip income not reported on line 1a (see instructions)						
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	. 1e					
was withheld.	f	Employer-provided adoption bene	fits from	m Form 8839, line 29			. 1f	
If you did not	g	Wages from Form 8919, line 6 .					. 1g	
get a Form W-2, see	h	Other earned income (see instruct	. 1h	0.				
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)	<u>1</u> i			
Attach Sch. B if required.	Z	Add lines 1a through 1h					. 1z	87,770.
	2a		2a		b Taxable interest		. 2b	
	3a		3a		b Ordinary divider		. 3b	
Standard	4a	- 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4a		b Taxable amount		. 4b	
Deduction for-	5a		5a		b Taxable amount		. 5b	
Single or Married filing	6a		6a		b Taxable amount		. 6b	
separately,	C	If you elect to use the lump-sum e						
\$13,850 Married filing	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						
jointly or Qualifying	8	Additional income from Schedule	. 8	0.				
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	. 9	87,770.				
Head of	10	Adjustments to income from Sche					. 10	
household, \$20,800	11	Subtract line 10 from line 9. This is		_			. 11	
If you checked I	12	Standard deduction or itemized deductions (from Schedule A)						
any box under Standard	13	Add lines 12 and 13	ion iror	III FOITH OSSO OF FORM	0330-A		. 13	
Deduction, see instructions.	14 15	Subtract line 14 from line 11. If zer	on le		our taxable incom	 e	. 14	
		Sastiast mis 17 horifills 11. Il 20	J 01 10	, U . IIII3 13 Y	our waxabic iiicdiii	•	. 13	1 00,070.

orm 1040 (2023	3)			Page
Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	6 , 769.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	6 , 769.
	19	Child tax credit or credit for other dependents from Schedule 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	6,769.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	6,769.
Payments	25	Federal income tax withheld from:		
	а	Form(s) W-2		
	b	Form(s) 1099		
	C	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	10,802.
If you have a qualifying child,	26	2023 estimated tax payments and amount applied from 2022 return	26	
	27	Earned income credit (EIC)		
tach Sch. EIC.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8	*	
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	10,802.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	4,033.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	4,033.
irect deposit?	b	Routing number * * * * * 0 3 3 9 c Type: Checking X Savings		
See instructions.	d	Account number * * * * * * * * * 6 9 5 9		
	36	Amount of line 34 you want applied to your 2024 estimated tax 36		
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37	
04 0110	38	Estimated tax penalty (see instructions)	<u>.</u>	
hird Party Designee	Do	by you want to allow another person to discuss this return with the IRS? See structions	elow.	× No
20.3.100	De	signee's Phone Personal identifi		

Date

Date

Preparer's signature

Email address

Go to www.irs.gov/Form1040 for instructions and the latest information.							A		
Use Only	Firm's address	245 R	OONEY	CT	E BRU	JNSW:	ICK N	J 088	16
Preparer Use Only	Firm's name GLOBAL TAXES LLC								
Proposer	SYAM PRIYA RAM SAG	GAR GUPTA	TALLAM S	SYAM	PRIYA	RAM	SAGAR	GUPTA	TALLAM

Spouse's signature. If a joint return, both must sign.

(518)423-1929

Your signature

Phone no.

Preparer's name

Joint return? See instructions.

your records.

Paid

Keep a copy for

-*1965 Form 1040 (2023)

Self-employed

(678) 965-9522

If the IRS sent you an Identity Protection PIN, enter it here

If the IRS sent your spouse an

Identity Protection PIN, enter it here

Check if:

(see inst.)

(see inst.)

****2703

Phone no.

Firm's EIN

PTIN

Your occupation

Spouse's occupation

SOFTWARE ENGINEER

RUSHIBREDDY@GMAIL.COM

Date

01/04/2024