# 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 Revenue Service Go to www.irs.gov/Form8879 for the latest information.		
Submission Identification Number (SID)		
Taxpayer's name	Social security	y number
SATYA SURYA SUBRAMAN VEDULA	323-83-	2160
Spouse's name		al security number
Port I Tay Deturn Information Tay Very Ending December 21 2022 (Fr		ro outhorizing \
	nter year you ar	e authorizing.)
Enter whole dollars only on lines 1 through 5. <b>Note:</b> Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1 Adjusted gross income		1 58,224
2 Total tax		2 5,105
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 9,463
4 Amount you want refunded to you		4 4,358
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an		
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amenmy knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I areturn (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trait to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial instituant payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial instituant payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) Electronic Funds Withdrawal Consent.  Taxpayer's PIN: check one box only  I authorize GLOBAL TAXES LLC to enter or generating your own PIN and your return is filed using the Practitioner PIN my below.  Your signature ▶	above are the amonsmitter, or electron of the trans to the U.S. Treasury are quests must be the processing of the payment. I furth of a man authorizate my PIN  The treatment of the u.S. Treasury are my PIN  The treatment of the u.S. Treasury are u.S. Treasury are my PIN  The treatment of the u.S. Treasury are u.S. Tr	unts from the income nic return originator (EF ansmission, (b) the reas did its designated Finance entry to this account. To tion. To revoke (cancel received no later than the electronic payment are acknowledge that the reaction and, if applicable, the time of the digits, but the tenter all zeros as no creations.
Out and a DIN to the other way to see the		
Spouse's PIN: check one box only	. 511	
I authorize to enter or general to enter or general		as n
signature on the income tax return (original or amended) I am now authorizing.		er five digits, but 't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I all if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.		
Spouse's signature ▶ Date ▶	<b>&gt;</b>	
Practitioner PIN Method Returns Only—continue bel	low	
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 2 4 9 6 Don't ente	5 0 8 2 7 1 or all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incomauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am strequirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers	ubmitting this retu	rn in accordance with
ERO's signature ▶ Date ▶	•	
ERO Must Retain This Form — See Instructions	 S	
Don't Submit This Form to the IRS Unless Requested T		

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



For the year Jan	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		, 2	0	;	See se	parate inst	ructions.
Your first name	and m	iddle initial	Last na	ıme					٠,	Your so	cial securit	ly number
SATYA SI	JRYA	SUBRAMAN	VEDU	JLA						323	83 2	160
		s first name and middle initial	Last na						-			curity number
										670	61 7	869
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ons.			Apt.	no.	T I			on Campaign
9204 NOF	RTHF	IELD CROSSING DRIVE							(	Check h	here if you,	or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Stat	te	ZIP code	,		•	· ·	ntly, want \$3
CHARLOTT	ГE				NC	;	28269	)		•	ow will not	Checking a change
Foreign country	y name			Foreign province/state/o	count	у	Foreign p	ostal co			k or refund.	
											You	Spouse
Filing Status	s [	Single				Head of he	ousehold	(HOF	1)			
Check only		Married filing jointly (even if only or	ne had i	income)								
one box.	X	Married filing separately (MFS)				☐ Qualifying	surviving	ງ spoເ	ıse (C	QSS)		
		ou checked the MFS box, enter the					or QSS	box,	enter	the chi	ild's name	if the
	qu	alifying person is a child but not you	ır deper	ndent: <u>HARITHA</u>	VAD	LAMUDI						
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	navn	nent for prope	rtv or ser	vices)	: or (t	a) sell.		
Assets		nange, or otherwise dispose of a digi	,				•	,	. ,	,	☐ Yes	⊠ No
Standard	Som	neone can claim:	penden	t	e as	a dependent						
Deduction		Spouse itemizes on a separate retur		•	alien	·						
Ago/Blindnos	- Vau	: Were born before January 2, 1	050 F	Are blind Spo		. Mas bor	n before	lanur	nn/ 2	1050	☐ Is bli	ind
	-		333 <u></u>	<del>-</del>	ouse:		(4) 0					instructions):
Dependents		instructions): irst name Last name		(2) Social security number	′	(3) Relationsh to you	iip   · ·	Child ta				her dependents
If more than four	(1)	Last name		Hamboi		to you					[	
dependents,								<u>_</u>	_			=
see instructions	s —								=			=
and check here	1								=			=
-	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instructions)						1a	<u>_</u>	68 <b>,</b> 709.
Income	b	Household employee wages not re	•	,				·		1b		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Attach Form(s) W-2 here. Also	c	Tip income not reported on line 1a	•	, ,				·		1c		
attach Forms	d	Medicaid waiver payments not rep		•						1d		
W-2G and	e	Taxable dependent care benefits f		, , , ,						1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene		,						1f		
If you did not	g	Wages from Form 8919, line 6.								1g		
get a Form W-2, see	h	Other earned income (see instructi	ions)							1h		0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		1i						
	z	Add lines 1a through 1h								1z	: 6	68,709.
Attach Sch. B	2a	Tax-exempt interest	2a		<b>b</b> Ta	axable interest	t.			2b	)	
if required.	3a	Qualified dividends	3a		<b>b</b> 0	rdinary divider	nds			3b	,	
	4a	IRA distributions	4a		<b>b</b> Ta	axable amoun	t			4b	,	
Standard Deduction for—	5a	Pensions and annuities	5a		<b>b</b> Ta	axable amoun	t			5b	,	
Single or	6a	Social security benefits	6a		<b>b</b> Ta	axable amoun	t			6b	,	
Married filing separately,	С	If you elect to use the lump-sum e	lection	method, check here (	(see i	instructions)						
\$13,850 Married filing	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						7				
jointly or	8	Additional income from Schedule	1, line 1	0						8		10,485.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•	come					9		58,224.
\$27,700 • Head of	10	Adjustments to income from Sche								10		
household,	11	Subtract line 10 from line 9. This is	-							11		58,224.
\$20,800 If you checked	12	Standard deduction or itemized		•	,					12		13,850.
any box under Standard	13	Qualified business income deducti			899	5-A				13		
Deduction, see instructions.	14	Add lines 12 and 13								14	_	13,850.
300 III ISII UCIIOI IS.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our <b>t</b>	axable incom	ne			15	,   4	44,374.

Form 1040 (2023	3)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	5,105.	
Credits	17	Amount from Schedule 2, lir	ne 3					17		
	18	Add lines 16 and 17						18	5,105.	
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lir	ne 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				22	5,105.	
	23	Other taxes, including self-e			•			23	0.	
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	5,105.	
<b>Payments</b>	25	Federal income tax withheld	I from:							
	а	Form(s) W-2				25a	9,463.			
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	9,463.	
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return	.,		26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)				27				
allacii Scii. Elc.	28	Additional child tax credit from	m Schedule 8812			28				
	29	American opportunity credit	from Form 8863	3, line 8 .     .		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir	ne 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	9,463.	
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	4,358.	
	35a	Amount of line 34 you want			is attached, che	ck here	🗆	35a	4,358.	
Direct deposit?	b	Routing number 0 7 1			c Type: 🛛	Checking	Savings			
See instructions.	d	Account number 4 6 3	5 3 7 0	2 5 7						
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37		
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party		you want to allow another	person to disc	cuss this retu	n with the IRS?	_	Complete	bolow	X No	
Designee		esignee's		Phone			sonal ident		∠ NO	
		me		no.			nber (PIN)	incation		
Sign		nder penalties of perjury, I declare t lief, they are true, correct, and com							, ,	
Here	Υn	our signature		Date	Your occupation		l If th	e IRS se	nt vou an Identity	
		rour dignature			Tour coodpanor			tection P	PIN, enter it here	
Joint return?				SOFTWARE ENGINEER				e inst.)		
See instructions. Keep a copy for your records.		Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupa	tion	Ider	If the IRS sent your spouse an Identity Protection PIN, enter it he (see inst.)		
	Ph	one no. (757)408-640	2	Email address	RAVITEJA.2	1114@GMAIL.C	OM			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/24/2024	P0208	32703	Self-employed	
Use Only	Fir	m's name GLOBAL TA	XES LLC				Pho	ne no. (	(678)965-9522	
————	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816					Firn	n's EIN	84-3171965		

# 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

SATYA SURYA SUBRAMAN VEDULA

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

1.		Sequence No. <b>01</b>
	Your soc	ial security number
	323-83	_2160

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received			
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			
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule E	E . 5	-10,485.
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			1
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente	r here and on	Form	
	1040, 1040-SR, or 1040-NR, line 8	<u> </u>	10	-10,485.

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

Par	t II Adjustments to Income					
11	Educator expenses			. 11	1	_
12	Certain business expenses of reservists, performing artists, and fee-					
	officials. Attach Form 2106			. 12	2	
13	Health savings account deduction. Attach Form 8889			. 13	3	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			. 14	4	
15	Deductible part of self-employment tax. Attach Schedule SE				5	
16	Self-employed SEP, SIMPLE, and qualified plans			. 16	6	
17	Self-employed health insurance deduction			. 17	7	
18	Penalty on early withdrawal of savings				3	
19a	Alimony paid				a	
b	Recipient's SSN					
С	Date of original divorce or separation agreement (see instructions):					
20	IRA deduction				_	
21	Student loan interest deduction					_
22	Reserved for future use					
23	Archer MSA deduction			. 23	3	
24	Other adjustments:					
а	,	24a				
b	Deductible expenses related to income reported on line 8l from the					
	, , , , , , , , , , , , , , , , , , , ,	24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					
	· · · · · · · · · · · · · · · · · · ·	24c				
d		24d		_		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e				
f		24f				
g		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					
	<del>-</del>	24i				
j	•	24j				
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
		24k				
Z	Other adjustments. List type and amount:					
		24z				
25	Total other adjustments. Add lines 24a through 24z				5	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	r here and	on <b>26</b>		
	1 OHH 1070, 1070-011, 01 1070-1111, IIIIC 10			.   20	י ע	

#### **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,

Department of the Treasury Internal Revenue Service

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

2023	
Attachment Sequence No. <b>13</b>	

OMB No. 1545-0074

Name(s) shown on return Your social security number SATYA SURYA SUBRAMAN VEDULA 323-83-2160 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) VIVEKANANDA NAGAR COLONY HYDERABAD TELANGANA IN 500072 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 198 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 . 3 548. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,108. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . . . 11 1,205. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 1,427. 14 Repairs . . . . 2,017. 15 Supplies 15 16 16 Taxes 17 Utilities . . . . . . . 17 1,926. 18 3,350. 18 Depreciation expense or depletion . . . . . . 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 . . . . . 11,033. 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 -10,485. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . 10,485.) 548. 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 3,350. 23d Total of all amounts reported on line 18 for all properties 11,033. Total of all amounts reported on line 20 for all properties 23e 24 Income. Add positive amounts shown on line 21. Do not include any losses 24

25

26

10,485.

-10,485.

25

26

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