IRS e-file Signature Authorization

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Internal Revenue Service

Taxpayer's name		Social security numb	er
LAKSHMI NAGA VENKATA PASUMARTHI		892-35-5653	3
Spouse's name		Spouse's social secu	irity number
UMA RUKMINI DEVI BATCHU		699-57-431	3
Part I Tax Return Information – Tax Year Ending December 31,	2023 (Enter	year you are aut	horizing.)
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	113,940.
2 Total tax		2	9,907.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12,063.
4 Amount you want refunded to you		4	2,156.
5 Amount you owe		5	

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

				ERO firm name	, <u> </u>	E
X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	

5	5	6	5	3						
Enter five digits, but don't enter all zeros										

Enter five digits, but don't enter all zeros

3

as mv

7 4 3 my

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature 🕨

Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC ERO firm name

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature 🕨	Date 🕨	
	N Method Returns Only—continue below	
Part III Certification and Authentication -	Practitioner PIN Method Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed		6 0 8 2 7 1

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature 🕨		Date 🕨	
Don't	ERO Must Retain This Form — Submit This Form to the IRS Unl		
			F 0070 (D 01 0001)

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

to enter or generate my PIN

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta)		turn	202	3	OMB No. 1545-	-0074	IRS Use On	ly—Do not w	rite or sta	ple in this space.
For the year Jan	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate i	nstructions.
Your first name	and mi	iddle initial	Last n	ame						Your social security number		
LAKSHMI	NAG	A VENKATA	PAS	UMARTH	ΗI					892	35	5653
		s first name and middle initial	Last n									security number
UMA RUKM	ITNT	DEVT	BAT	СНЦ						699	57	4313
		er and street). If you have a P.O. box, see						A	pt. no.		• •	ction Campaign
2401 W F) [], []q	GERVILLE PKWY						7	21			ou, or your
		ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP c				ointly, want \$3
ROUND RC	CK					TX	ζ l	786	64			nd. Checking a not change
Foreign country				Foreign p	rovince/state/				n postal code		c or refu	0
											🗌 Yo	u 🗌 Spouse
Filing Status		Single					Head of he	ouseh	old (HOH)			
-		Married filing jointly (even if only o	ne had	income)					(-)			
Check only one box.		Married filing separately (MFS)		,			Qualifying	surviv	rina spouse	(QSS)		
one box.	lf v	you checked the MFS box, enter the	name	of vour s	pouse. If vou	u che			•	· /	ild's nar	ne if the
	-	alifying person is a child but not you		•	, ,				, .			
Digital		ny time during 2023, did you: (a) rece	`			• •			,.		⊡ v•	s 🛛 No
Assets		ange, or otherwise dispose of a digi					-	1)? (36		ons.)	∐ Ye	
Standard	_	eone can claim: 🗌 You as a de	•				a dependent					
Deduction		Spouse itemizes on a separate retur	n or yc	ou were a	dual-status	alien	1					
Age/Blindness	You:	Were born before January 2, 1	959	Are bl	lind Spo	ouse	: 🗌 Was bor	n befo	ore January	2, 1959	🗌 Is	blind
Dependents	s (see	instructions):		(2) 5	Social security	,	(3) Relationsh	_{ip} (4) Check the	box if qual	fies for (s	see instructions):
If more	(1) F	irst name Last name			number		to you		Child tax	credit	Credit for	r other dependents
than four												
dependents,												
see instructions and check												
here 🗌												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	ee instruc	ctions) .					. 1a	L	99,345.
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2								. 1b)	
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)								. 10	;	
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								. 10	1	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	orm 2441,	line 26					. 1e	,	
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8	839, 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 instruction	ions)				_. .			. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)			1 i					
	z	Add lines 1a through 1h	• •							. 1z		99,345.
Attach Sch. B	2a	Tax-exempt interest	2a			bΤ	axable interest			. 2b)	
if required.	3a	Qualified dividends	3a			b C	Ordinary divider	nds .		. 3b)	
Otom dawd	4a	IRA distributions	4a			bΤ	axable amount	t		. 4b)	
Standard Deduction for—	5a	Pensions and annuities	5a			bΤ	axable amount	t		. 5b)	
Single or	6a	Social security benefits	6a			bΤ	axable amount	t		. 6b		
Married filing separately,	С	If you elect to use the lump-sum e	lection	method,	check here	(see	instructions)					
\$13,850 • Married filing	7	Capital gain or (loss). Attach Schee	dule D	if require	d. If not requ	uired	, check here			7		
jointly or	8	Additional income from Schedule	1, line	10						. 8		14,595.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8	. This is y	our total inc	come	e			. 9		113,940.
\$27,700 • Head of	10	Adjustments to income from Sche	dule 1,	line 26						. 10		
household,	11	Subtract line 10 from line 9. This is	s your a	adjusted	gross incor	ne				. 11		113,940.
\$20,800 • If you checked г	12	Standard deduction or itemized	deduc	tions (fro	m Schedule	A)				. 12	:	27,700.
any box under Standard	13	Qualified business income deduction	ion fro	m Form 8	995 or Form	899	5-A			. 13		
Deduction,	14	Add lines 12 and 13								. 14		27,700.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ss, enter	-0 This is y	our	taxable incom	е.		. 15		86,240.
												1010

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	9,907.
Credits	17	Amount from Schedule 2, lin	ie3					17	
	18	Add lines 16 and 17						18	9,907.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ie 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	9,907.
	23	Other taxes, including self-e						23	0.
	24	Add lines 22 and 23. This is						24	9,907.
Payments	25	Federal income tax withheld							
· · · , · · · · · · · · · · ·	а	Form(s) W-2				25a 1	2,063		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c	<i>.</i>					25d	12,063.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20)22 return			26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .		·		30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31				undable credits		32	
	33	Add lines 25d, 26, and 32. T	,	-				33	12,063.
Refund	34	If line 33 is more than line 24						34	2,156.
lioidiid	35a	Amount of line 34 you want	-				🗆	35a	2,156.
Direct deposit?	b	Routing number 0 1 1				Checking	Savings	;	
See instructions.	d	Account number 3 8 5					. 0		
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24							
You Owe	0.	For details on how to pay, g						37	
	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another							
Designee							Complete	below.	× No
U	De	signee's		Phone			sonal iden	tification	
	na			no.			nber (PIN)		
Sign		der penalties of perjury, I declare tl ief, they are true, correct, and com							
Here		· · · ·	pioro: Doolaration (• •	, ,
	YO	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE I	ENGINEER		e inst.)	,
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion	lf tl	he IRS se	nt your spouse an
Keep a copy for your records.							ntity Prot e inst.)	ection PIN, enter it here	
your records.				IIOME MARER (
		one no. (203) 690-460		Email address	PSAIKIRAN2	0160GMAIL.C			
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	01/27/2024		82703	Self-employed
Use Only	Fir	m's name GLOBAL TAX					Ph	one no.	(678)965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Fir	m's EIN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/21/24 PRO			Form 1040 (2023)

REV 01/21/24 PRO

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 20

Attachment Sequence No. **01** Your social security number

892-35-5653

Þ	ort I	۸dditi	ion) J	Incomo	
L	PASUM	IARTHI	&	U	BATCHU	

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

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. Atta	ach Schedu	leE.	5	-10,405.
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			
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: Nonemployee compensation from 1099-NEC 25,000.				
	Nonemployee compensation from 1099-NEC 25,000.		25,000.	•	
9	Total other income. Add lines 8a through 8z			9	25,000.
10	Combine lines 1 through 7 and 9. This is your additional income . Enter			10	14 505
	1040, 1040-SR, or 1040-NR, line 8			10	14,595.

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

Schedule 1 (Form 1040) 2023

Part	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				
-	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:		• •	 	
 a		24a			
-	Deductible expenses related to income reported on line 81 from the	210			
N		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals	- 10		-	
Ŭ	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d		-	
e	Repayment of supplemental unemployment benefits under the Trade	2.10		-	
C	Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
q	Contributions by certain chaplains to section 403(b) plans	24g		-	
	Attorney fees and court costs for actions involving certain unlawful	2-TY		 -	
	discrimination claims (see instructions)	24h			
:		2411		-	
	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			
:	Housing deduction from Form 2555	24i 24j			
ן ר	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24j			
ĸ		24k			
-	Other adjustments. List type and amount:	24N		-	
z	Other aujustitients. List type and antount.	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	
20	Form 1040, 1040-SR, or 1040-NR, line 10			26	
	BAA		01/21/24 P		le 1 (Form 1040) 202

	EDULE E		Supplementa	l Inc	ome ar	nd Los	SS			OMB No	o. 1545-0074
(Form	1040)	(From	rental real estate, royalties, partners	hips, S	6 corporat	ions, es	tates,	trusts, REMICs	s, etc.)	20	23
	nent of the Treasury Revenue Service		Attach to Form 1040 Go to <i>www.irs.gov/ScheduleE</i> fo					formation.		Attachn	nent ce No. 13
) shown on return								our soci	al security	
		& U B.	АТСНИ							5-5653	
Part			s From Rental Real Estate an	nd Ro	valties						
	Note: If yo	ou are in	the business of renting personal propersonal propersonal ss from Form 4835 on page 2, line 40.	rty, use	Schedule	e C. See	instru	ctions. If you are	e an indiv	vidual, rep	ort farm
Α			ents in 2023 that would require you		Form(s) 1	1099? 5	See ins	structions		. 🗌 Ye	s 🛛 No
			you file required Form(s) 1099?								
1a			each property (street, city, state, Zl								
A	-		STREET POLAMURU, PENUMAN		,	DRA	DESH	TN 534238	2		
B	2 /0, DOD.	ALAII	STREET TODAHORO,TENOHA		ANDIIN			111 334230	J		
C											
 1b	Type of Prope	erty 2	For each rental real estate prope	ertv list	ted		Fa	ir Rental	Person	nal Use	• • • •
	(from list below		above, report the number of fair					Days		iys	QJV
Α	3		personal use days. Check the Q			Α		315		0	
В			if you meet the requirements to qualified joint venture. See instru			В					
С					5.	С					
	of Property:										
	Single Family R			ntal	5 Lanc			Self-Rental			
2	Multi-Family Re	sidence	e 4 Commercial		6 Roya	alties	8	Other (describ	oe)		
								Propertie	s:		
Incom	ne:					Α		В			С
3				3		6	14.				
4		ived.		4							
Exper											
5				5							
6		-	structions)	6			50.				
7	-		ance	7		8	74.				
8				8							
9 10			ssional fees	10							
11	•	•		11		1,3	85				
12	-		to banks, etc. (see instructions)	12		1,5	00.				
13				13							
14				14		3,0	84.				
15	- ···			15		3,5					
16	Taxes			16							
17				17		1,8	42.				
18	•	expense	or depletion	18							
19				19							
20	•		ines 5 through 19	20		11,0	19.				
21			line 3 (rents) and/or 4 (royalties). If								
			nstructions to find out if you must	21		-10,4	05				
22			estate loss after limitation, if any,			_ , 1					
			structions)	22	(10,40) 5.)	()	()
23a	Total of all am	ounts re	ported on line 3 for all rental prope	erties			23a	, , , , , , , , , , , , , , , , , , ,	614.		,
b			ported on line 4 for all royalty prop				23b				
С			ported on line 12 for all properties				23c				
d			ported on line 18 for all properties				23d				
е			ported on line 20 for all properties				23e	11,	019.		
24			amounts shown on line 21. Do no		-				24	1	10 10 - `
25			ses from line 21 and rental real estat						25	(10,405.)
26			te and royalty income or (loss). d IV, and line 40 on page 2 do no								
			0), line 5. Otherwise, include this a						26		-10,405.

-10,405.

Schedule E (Form 1040) 2023