### 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	Social security	y number			
LAKSHMI NAGA VENKATA PASUMARTHI	892-35-	892-35-5653			
Spouse's name	Spouse's soci	al security number	r		
UMA RUKMINI DEVI BATCHU	699-57-				
	year you ar	e authorizing.	.)		
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.		4   110	0.40		
1 Adjusted gross income			,940. ,907.		
<ul> <li>Total tax</li></ul>			,063.		
4 Amount you want refunded to you			,003. 1,156.		
5 Amount you owe		5	<u>, 100.</u>		
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k		of your retu	rn)		
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejet or any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indipayment 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 payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requipments agent to the payment (settlement) date. I also authorize the financial institutions involved in the 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) I ar Electronic Funds Withdrawal Consent.	e are the amounter, or electro- action of the trans. Treasury are cated in the tall the authorization of the tall the authorization of ayment. I furtile	nunts from the in- nic return original ansmission, (b) the dist designated of the preparation so- entry to this account of the control of the control of the control of the electronic paper acknowledge	come tax ator (ERO) ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of that the		
Taxpayer's PIN: check one box only					
▼ I authorize GLOBAL TAXES LLC to enter or generate r	mv PIN 5	5 6 5 3	as my		
ERO firm name	Ent	er five digits, but n't enter all zeros	,		
signature on the income tax return (original or amended) I am now authorizing.		0			
I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN method below.  Your signature ▶		must complete			
Your signature ► Date ► C	11/21/2024	+			
Spouse's PIN: check one box only					
I authorize GLOBAL TAXES LLC to enter or generate resignature on the income tax return (original or amended) I am now authorizing.	Ent	4 3 1 3 er five digits, but 't enter all zeros	as my		
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 method below.					
Spouse's signature Devi Date Date	01/2	7/2024			
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		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 ta authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm requirements of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of In	itting this retu	rn in accordance			
ERO's signature ▶ Date ▶					
ERO Must Retain This Form — See Instructions					

Don't Submit This Form to the IRS Unless Requested To Do So

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

<b>£1040</b>		artment of the Treasury—Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use On	ly—Do not v	vrite or sta	aple in this space.		
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning					, 2023, ending , 20					See separate instructions				
Your first name	and m	iddle initial	Last na	ame						Your so	cial sec	curity number		
LAKSHMI	NAG.	A VENKATA	PASU	JMARTH	ΙΙ					892	892   35   5653			
		s first name and middle initial	Last na								Spouse's social security number			
UMA RUKI	INIM	DEVI	BAT	CHU						699	57	4313		
Home address	(numb	er and street). If you have a P.O. box, see	instruct	ions.				1	\pt. no.	Preside	ntial Ele	ection Campaign		
<u>2401 W 1</u>	PFLU	GERVILLE PKWY						-	721			ou, or your		
City, town, or p	oost off	ice. If you have a foreign address, also co	mplete:	spaces bel	ow.	Sta	te	ZIP c	ode			jointly, want \$3 nd. Checking a		
ROUND RO	OCK					TX	ζ	786	64	1 -		not change		
Foreign countr	y name			Foreign pr	rovince/state/	count	ty	Foreiç	n postal code	e your ta	x or refu			
Filing Status	s $\Box$	Single					Head of h	ouseh	old (HOH)	•				
Check only		Married filing jointly (even if only o	ne had	income)										
one box.		Married filing separately (MFS)					☐ Qualifying	survi	ing spouse	(QSS)				
	lf y	you checked the MFS box, enter the	name	of your sp	oouse. If you	ı che	ecked the HOF	or Q	SS box, en	ter the ch	ild's na	me if the		
	qι	ıalifying person is a child but not you	ır depe	ndent:										
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	d, award, or	pavr	ment for prope	rtv or	services); c	or (b) sell,				
Assets		nange, or otherwise dispose of a dig						-			□ Ye	es 🛛 No		
Standard	Son	neone can claim:   You as a de	pender	nt 🗌	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or yo	u were a	dual-status	alien	1							
Δαe/Rlindnes	 • You	: Were born before January 2, 1	959 [	Are bl	ind <b>Snc</b>	ouse	• □ Was bor	n hefa	ore January	2 1959		s blind		
Dependent			000 [	T	•			1				(see instructions):		
-		(1) First name Last name			(2) Social security (3) Relationship number to you			iib I,	Child tax		i '	or other dependents		
If more than four	<del>、,</del>													
dependents,									一百			一一		
see instruction and check	s								一百			一一		
here	]													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruc	tions) .					. 1a		99,345.		
	b	Household employee wages not re	eported	on Form	ı(s) W-2 .					. 1k	,			
Attach Form(s) W-2 here, Also	С	Tip income not reported on line 1a	a (see ir	struction	s)					. 10	;			
attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s	s) W-2 (see ii	nstru	ictions)			. 10	ı			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	rm 2441,	line 26					. 16	,			
was withheld.	f	Employer-provided adoption bene	fits from	m Form 8	839, line 29					. 11	:			
If you did not	g	Wages from Form 8919, line 6 .								. 10	ı			
get a Form W-2, see	h	Other earned income (see instruct	ions)					, .		. 1h	1	0.		
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)			<u>1i</u>							
	z	Add lines 1a through 1h								. 1z	:	99,345.		
Attach Sch. B	2a	Tax-exempt interest	2a			b T	axable interes	t.		. 2k	<u> </u>			
if required.	3a_	Qualified dividends	3a			<b>b</b> 0	rdinary divide	nds .		. 3k	<u> </u>			
Standard .	4a	IRA distributions	4a			b T	axable amoun	t		. 4k	<u> </u>			
Standard Deduction for—	5a	Pensions and annuities	5a			b T	axable amoun	t		. 5b	)			
Single or     Married filing	6a	,	6a				axable amoun	t		. 6k	<u> </u>			
Married filing separately,	С	If you elect to use the lump-sum e					•							
\$13,850  Married filing	7	Capital gain or (loss). Attach Sche												
jointly or	8	Additional income from Schedule								. 8		14,595.		
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,			our <b>total inc</b>	come	e			. 9		113,940.		
\$27,700 • Head of	10	Adjustments to income from Sche								. 10	_			
household,	11	Subtract line 10 from line 9. This is								. 11	_	113,940.		
\$20,800 • If you checked	12	Standard deduction or itemized		•						. 12	_	27 <b>,</b> 700.		
any box under Standard	13	Qualified business income deducti	ion fror	n Form 89	995 or Form	899	5-A			. 13	_			
Deduction, see instructions.	14	Add lines 12 and 13								. 14		27,700.		
ace manuchons.	15	Subtract line 14 from line 11 If you	~ ~r   ~	o ontor	() This is v	4	tavabla inaam			4.5	• 1	06 210		

Form 1040 (2023	3)								Page <b>2</b>	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌 _		. 16	9,907.	
Credits	17	Amount from Schedule 2, lir	ne 3					. 17		
	18	Add lines 16 and 17						. 18	9,907.	
	19	Child tax credit or credit for	other dependen	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	I. If zero or less,	enter -0				. 22	9,907.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			. 23	0.	
	24	Add lines 22 and 23. This is	your <b>total tax</b>					. 24	9,907.	
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				<b>25a</b> 12	2,06	3.		
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						. 25d	12,063.	
If you have a	26	2023 estimated tax paymen	ts 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 fro	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, lin	ne 15			31				
	32	Add lines 27, 28, 29, and 31	. 32							
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				. 33	12,063.	
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amour	nt you <b>overpaid</b>		. 34	2,156.	
	35a	Amount of line 34 you want	☐ 35a	2,156.						
Direct deposit?	b	Routing number 0 1 1				Checking	Savin	ngs		
See instructions.	d	Account number 3 8 5								
	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	•		rn with the IRS?		ompl	ete below.	X No	
Designee				Phone			dentification	<u> </u>		
		Designee's Phone Finame no. Finame						IN)		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com								
Here	Yo	Your signature		Date	Your occupation			If the IRS sent you an Identity Protection PIN, enter it here		
Joint return?					SOFTWARE E	NGINEER		(see inst.)	, 6.116. 10.16	
See instructions.	Sp	Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupati			If the IRS se	nt your spouse an	
Keep a copy for your records.							Identity Protection PIN, enter it here			
your records.					HOME MAKEF			(see inst.)		
		one no. (203) 690-460		Email address	PSAIKIRAN20	16@GMAIL.CO			-	
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:	
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	l .	RAM SAGAR	GUPTA TALLAM	01/27/2024	P02	2082703	Self-employed	
Use Only	Fin	m's name GLOBAL TA						Phone no. (678) 965-9522		
<b>y</b>	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816								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

L PASUMARTHI

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

& U BATCHU

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

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

Your social security number 892-35-5653

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
<b>2</b> a	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		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	<b>8d</b> (	)	
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		
- 1	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:			
	Other income. List type and amount:  Nonemployee compensation from 1099-NEC 25,000.	<b>8z</b> 25,000	_	
9	Total other income. Add lines 8a through 8z		9	25 <b>,</b> 000.
10	Combine lines 1 through 7 and 9. This is your additional income. Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	14,595.

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

Par	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	<u></u>	
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					
		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:					
		24z				
25	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		 	26		

#### **SCHEDULE E** (Form 1040)

Department of the Treasury

#### **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. Internal Revenue Service

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 892-35-5653 L PASUMARTHI & U BATCHU 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 ☐ Yes ☐ No 1a Physical address of each property (street, city, state, ZIP code) BODAPATI STREET POLAMURU, PENUMANTRA ANDHRA PRADESH IN 534238 Α В С 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and Days Days personal use days. Check the QJV box only Α Α 315 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** С Income: Α В 3 614. Rents received . 4 Royalties received . 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 250. 7 7 874. Cleaning and maintenance . . . . . 8 Commissions 8 9 Insurance . . . . . 9 10 10 Legal and other professional fees 11 Management fees . . . . . . . . . . . . . . . . . 11 1,385. 12 12 Mortgage interest paid to banks, etc. (see instructions) 13 13 3,084. 14 14 15 Supplies . . . . . . . 15 3,584. 16 16 17 Utilities . . . . . . . . 17 1,842. 18 Depreciation expense or depletion . . . . . . . 18 19 19 Total expenses. Add lines 5 through 19 . . . . . 20 20 11,019. 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 . . . . . . . . . . . . . . . . . -10,405.21 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . 22 10,405. 23a Total of all amounts reported on line 3 for all rental properties 23a 614. 23b Total of all amounts reported on line 4 for all royalty properties c Total of all amounts reported on line 12 for all properties 23c Total of all amounts reported on line 18 for all properties 23d 11,019. 23e 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 24 25 10,405. 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 26 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 ...

-10,405.