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 number
SHIVA CHARAN PATLURI	773-66-1629
Spouse's name	Spouse's social security number
PRATYUSHA PATLOLLA	988-97-3229
Part I Tax Return Information — Tax Year Ending December 31,	2023 (Enter year you are 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.	
1 Adjusted gross income	
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization (Be sur Under penalties of perjury, I declare that I have examined a copy of the income tax return (
my knowledge and belief, it is true, correct, and complete. I further declare that the am return (original or amended) I am now authorizing. I consent to allow my intermediate serv to send my return to the IRS and to receive from the IRS (a) an acknowledgement of rece for any delay in processing the return or refund, and (c) the date of any refund. If applicab Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial inspayment of my federal taxes owed on this return and/or a payment of estimated tax, and tauthorization is to remain in full force and effect until I notify the U.S. Treasury Financia payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payme business days prior to the payment (settlement) date. I also authorize the financial institut taxes to receive confidential information necessary to answer inquiries and resolve issupersonal identification number (PIN) below is my signature for the income tax return (original Electronic Funds Withdrawal Consent.	ice provider, transmitter, or electronic return originator (ERO) eipt or reason for rejection of the transmission, (b) the reason ole, I authorize the U.S. Treasury and its designated Financial stitution account indicated in the tax preparation software for the financial institution to debit the entry to this account. This il Agent to terminate the authorization. To revoke (cancel) a ent cancellation requests must be received no later than 2 tions involved in the processing of the electronic payment of use related to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
	enter or generate my PIN 6 1 6 2 9 as my
ERO firm name	don't enter all zeros
signature on the income tax return (original or amended) I am now author	
I will enter my PIN as my signature on the income tax return (original or if you are entering your own PIN and your return is filed using the Pracebelow.	
Your signature ▶	Date ▶
Spouse's PIN: check one box only	
	enter or generate my PIN 7 3 2 2 9 as my
ERO firm name signature on the income tax return (original or amended) I am now autho	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) rannow authorized by a signature on the income tax return (original or amended) rannow authorized by a signature or the income tax return (original or amended) rannow authorized by a signature or the income tax return (original or amended) rannow authorized by a signature or the income tax return (original or amended) rannow authorized by a signature or the income tax return (original or amended) rannow authorized by a signature or the income tax return (original or amended) rannow authorized by a signature or the income tax return (original or amended) rannow authorized by a signature or the income tax return (original or amended).	_
if you are entering your own PIN and your return is filed using the Prace below.	
Spouse's signature ▶	Date ▶
Practitioner PIN Method Returns Only—	-continue below
Part III Certification and Authentication — Practitioner PIN Method	od Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected	ed PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic authorized to file for tax year indicated above for the taxpayer(s) indicated above. I conrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS	firm that I am submitting this return in accordance with the
ERO's signature ▶	Date▶
ERO Must Retain This Form — See	

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



£1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta)		urn	202	3	OMB No. 1545-0	0074	IRS Use Only	–Do not v	vrite or staple in	ı this space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	parate instr	uctions.
Your first name	and m	iddle initial	Last na	ame						Your so	ocial security	number
SHIVA C	HARAI	N	PATI	LURI						773	66 16	529
		s first name and middle initial	Last na								's social secu	
PRATYUSI	НА		PATI	COLLA						988	97 32	229
		er and street). If you have a P.O. box, see						Д	pt. no.		ential Election	
730 WES:	TEC I	WAY								ł	here if you, o	
		ce. If you have a foreign address, also co	mplete s	spaces be	low.	Sta	ite	ZIP co	ode		if filing joint	
FUQUAY V	VARI	NA				NC		275	26		o this fund. C low will not c	
Foreign countr				Foreign p	rovince/state/o	count			n postal code	1	x or refund.	niange
											You	Spouse
Filing Status	s \square	Single	<u> </u>				Head of ho	useh	old (HOH)			
Check only		Married filing jointly (even if only or	ne had	income)								
one box.		Married filing separately (MFS)					☐ Qualifying s	surviv	ing spouse	(QSS)		
	If y	ou checked the MFS box, enter the	name o	of your s	pouse. If you	ı che	ecked the HOH	or Q	SS box, ente	er the ch	ild's name i	f the
	qu	alifying person is a child but not you	ır depei	ndent:								
Digital	Δt aı	ny time during 2023, did you: (a) rec	aiva (as	a reward	d award or i	navr	ment for proper	hy or	services). or	(h) sell		
Digital Assets		nange, or otherwise dispose of a digital	,					•	,	. ,	Yes	⊠ No
Standard		eone can claim: You as a de					a dependent	/ - (,		
Deduction	_	Spouse itemizes on a separate retur	•				•					
		<u> </u>										
		: Were born before January 2, 1	959 [Are bl	lind Spo	use	: U Was born		ore January 2	-	☐ Is blir	
Dependent				(2) 9	Social security		(3) Relationship) (4) Check the b		1	
If more	<u>(1)</u> F	irst name Last name		number to you			to you		Child tax c	reait	Credit for other	er dependents
than four dependents,											L	
see instruction	s										L	
and check	, —											
here L		T-1-1			-1'					1 4		<u> </u>
Income	1a	Total amount from Form(s) W-2, b	,		,							2 , 955.
Attach Form(s)	b	Household employee wages not re			. ,							
W-2 here. Also attach Forms	C	Tip income not reported on line 1a	`		,					. 10		
W-2G and	d	Medicaid waiver payments not rep		,	,	ıstru	ictions)			. 10		
1099-R if tax	e	Taxable dependent care benefits f								. 16		
was withheld. If you did not	' 	Employer-provided adoption bene			·					. 11		
get a Form	g									. 10	^	0.
W-2, see	h i	Other earned income (see instruction (see instruction) (see instru	,			•		i .		. 1h	-	
instructions.	ı Z	Add lines 1a through 1h	JOU 1115L	. actions)		• •				. 12	14	2 , 955.
Attach Sch. B	<u>_</u> 2a	1	2a		· · · ·	h T	axable interest			. 12	_	1,076.
if required.	2a 3a	•	3a				axable interest Ordinary dividen	ds .				, , , , , ,
	<u>5a</u> _ 4a		4a				axable amount					
Standard	5a		5a				axable amount					
• Single or	6a		6a				axable amount			. 6k		
Married filing	C	If you elect to use the lump-sum e	_	method								
separately, \$13,850	7	Capital gain or (loss). Attach Sche				•	,			7		
 Married filing jointly or 	8									_ <u>.</u> . 8		0,780.
Qualifying	9	Additional income from Schedule 1, line 10							. 9		3,251.	
surviving spouse, \$27,700	10	Adjustments to income from Sche		•						. 10		,
 Head of household, 	11	Subtract line 10 from line 9. This is								. 11	_	3,251.
\$20,800	12	Standard deduction or itemized	-							. 12		7,700.
 If you checked any box under 	13	Qualified business income deducti		`		,	15-A			. 13		_,
Standard Deduction,	14									. 14		7,700.
see instructions.	15	Subtract line 1/1 from line 11. If zer				our f	tavabla income		-	15		5 551

Form 1040 (202)	3)								Page Z
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	13,836.
Credits	17	Amount from Schedule 2, lin	ne 3					17	
	18	Add lines 16 and 17						18	13,836.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	13,836.
	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 total tax					24	13,836.
Payments	25	Federal income tax withheld	l from:						
•	а	Form(s) W-2				25a 21	,419.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	21,419.
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			
attach Sch. 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, lin							
	32	Add lines 27, 28, 29, and 31	32						
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	21,419.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amoun	t you overpaid		34	7,583.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	k here		35a	7,583.
Direct deposit?	b	Routing number 0 7 2			c Type: 🛛	Checking	Savings		
See instructions.	d	Account number 5 1 3							
	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	Do	you want to allow another				See			
Designee		structions				. 🗌 Yes. C	omplete	below.	⋈ No
		esignee's		Phone		onal ident	ification		
<u></u>		me	hat I hava avamina	no.			ber (PIN)	tha baat	of my lenguinders and
Sign		der penalties of perjury, I declare to lief, they are true, correct, and com							
Here	Vo	ur signature		Date	Your occupation		l If th	 e IRS se	nt you an Identity
	10	di Signature	Date Tour occupation					IN, enter it here	
Joint return?				PROGRAMMER ANALYST					
See instructions.	Sp	Spouse's signature. If a joint return, both must sign.		Date Spouse's occupation					nt your spouse an
Keep a copy for your records.					HOME MYKEB		itity Prote inst.)	ection PIN, enter it here	
		one no. (512) 461-592	Λ	HOME MAKER Email address CHARANPATLURI@GMAIL.COM					
		eparer's name	Preparer's signat		CHANAMEATLU	Date	PTIN		Check if:
Paid		4 PRIYA RAM SAGAR GUPTA TALLAM	'		מבד.ד.א שמד.ד.א	02/05/2024	P0208	2703	Self-employed
Preparer		m's name GLOBAL TA		IVIII DUQUI	COLITY TABLIAM	02/03/2024			
Use Only				INSMICK M	т 08816		Phone no. (678) 965-9522 Firm's EIN 84-3171965		
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Fi							I S LIIV	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

SHIVA CHARAN PATLURI & PRATYUSHA PATLOLLA

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

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

Sequence No. 01

Your social security number
773-66-1629

Par	t I 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 Schedule E .	5	-10,780.
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		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter	here and on Form		
	1040 1040-SR or 1040-NR line 8		10	-10-780

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

Par	t 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	, , , , , , , , , , , , , , , , , , ,	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	04			
_1	· · · · · · · · · · · · · · · · · · ·	24c		_	
d		24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		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				
	-	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			
0 -					
25 26	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. ∟nter	nere and on		
	Form 1040, 1040-SR, or 1040-NR, line 10			26	

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.

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

Sequence No. 13

OMB No. 1545-0074

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

Your social security number

PHT/	7A CHARAN PAT.	\overline{PGK}	. & PRATIUSI	AA PATLULLA						113-6	0-1629	
Par				Real Estate an			C. See	instructi	ons. If you	are an indiv	vidual repo	ort farm
	rental income	or los	ss from Form 4835	on page 2, line 40.								
	Did you make any p											
В	lf "Yes," did you or	will y	ou file required F	orm(s) 1099? .							. \[Ye	s 🗌 No
1a	Physical address	of e	ach property (str	eet, city, state, ZII	P code	e)						
Α	F.NO:4,FLOOR	R:4,	MYPI GREEN	GUNDLAPOCHAN	MAPAI	LLY(V)	MEDCI	HAL, TI	ELANGAN	A IN 50	0014	
В												
С												
1b	Type of Property	2		l real estate prope							al Use	QJV
	(from list below)			the number of fair					ays	Da	ys	
Α	3			lays. Check the Qore requirements to the contract of the contr			Α		365		0	
В				enture. See instru			В					
С	1.5						С					
	of Property:		0.14	/OL . T D				7.0				
	Single Family Resid			n/Short-Term Ren	itai	5 Land			elf-Rental	(م مانس		
2	Multi-Family Resid	ence	4 Comme	erciai		6 Roya	ities	8 C	ther (desc	ribe)		
									Propert	ies:		
ncon	ne:						Α		В			С
3	Rents received .				3		6	50.				
4	Royalties received	b			4							
Expe	nses:											
5	•				5							
6	Auto and travel (s		,		6							
7	Cleaning and mai				7		9	50.				
8	Commissions .				8							
9	Insurance				9							
10	Legal and other p				10			-				
11	Management fees				11		1,5	60.				
12	Mortgage interest	-	·	·	12							
13 14	Other interest .				13		2,3	5.0				
15	Repairs Supplies				15		2,3					
16	Taxes				16		4,5	50.				
17	Utilities				17		3,6	20				
18	Depreciation expe				18							
19	Other (liet)		·		19							
20	Total expenses. A	dd lir	nes 5 through 19)	20		11,4	30.				
21	Subtract line 20 fr		ŭ				· ·					
•	result is a (loss), s											
	file Form 6198 .			•	21		-10,7	80.				
22	Deductible rental											
	on Form 8582 (se	e ins	tructions)		22	(10 , 78	0.)()	(
23 a	Total of all amour							23a		650.		
b	Total of all amour							23b				
С	Total of all amour							23c				
d	Total of all amour	its rei	ported on line 18	3 for all properties				23d				

11,430.

24

25

10,780.

-10,780.

24

25

26

Total of all amounts reported on line 20 for all properties

Income. Add positive amounts shown on line 21. **Do not** include any losses

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

23e