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.

Submission Identification Number (SID)

Taxpay	/er's name	Social security nu	imber
VAM	ISHI KUMAR BOGOJU	330-83-71	.58
Spouse	o's name	Spouse's social s	ecurity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Ent	er year you are a	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	1	71,277.
2	Total tax	2	7,941.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	13,558.
4	Amount you want refunded to you	4	
5			5

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

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

				FBO firm name		Ēr
X	l authorize	GLOBAL '	TAXES	LLC	to enter or generate my PIN	
-			-			≺

Ent	er fiv	/e di	gits, all ze	but	as my
3	7	1	5	8	

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

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

		as my
er fiv n't er		

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 >									
Practitioner PIN Method Returns Only—co	ontinue	bel	ow						
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 nter a	 	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 🕨	
ERO Must Retain This Don't Submit This Form to the			
For Paperwork Reduction Act Notice, see your tax return instruction	S. BAA	REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)

1040		artment of the Treasury—Internal Revenue Serv S. Individual Income Ta x		turn	202	3	OMB No. 1545	-0074	IRS Use Only	∕−Do not w	vrite or sta	aple in this space.
For the year Jan	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate	instructions.
Your first name	and m	 iddle initial	Last r	name						Your so	cial sec	urity number
VAMSHI K			BOG	OJU								7158
		s first name and middle initial	Last r									security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.	Preside	ntial Ele	ection Campaigr
605 SPUR	LOCI	K WAY										ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP c	ode			jointly, want \$3 nd. Checking a
LIBERTY	HIL	L				TΣ	K	786	42			not change
Foreign country name				Foreign p	rovince/state/o	count	ty	Foreig	n postal code	your tax	k or refu	nd
											∐ Yo	ou Spouse
Filing Status	X	Single					Head of h	ouseh	old (HOH)			
Check only		Married filing jointly (even if only o	ne hac	l income)			_					
one box.		Married filing separately (MFS)							ving spouse			
		you checked the MFS box, enter the			pouse. If you	ı che	ecked the HOF	l or Q	SS box, ente	er the ch	ild's na	me if the
	qu	alifying person is a child but not you	ır aepe	endent:								
Digital	At ar	ny time during 2023, did you: (a) rec	eive (a	s a reward	d, award, or	payr	ment for prope	rty or	services); or	· (b) sell,		
Assets	exch	ange, or otherwise dispose of a dig	ital ass	set (or a fi	nancial intere	est ir	n a digital asse	et)? (Se	ee instructio	ns.)	Y e	es 🛛 No
Standard	Som	eone can claim: 🗌 You as a de	pende	nt 🗌	Your spouse	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	۱					
Age/Blindness	You	: 🗌 Were born before January 2, 1	959	Are bl	lind Spo	ouse	: 🗌 Was bor	n befo	ore January	2, 1959	_ I:	s blind
Dependents	s (see	instructions):		(2) 5	Social security	,	(3) Relationsh	ip (4) Check the b	ox if qual	fies for ((see instructions):
If more		irst name Last name			number		to you		Child tax c	redit	Credit fo	or other dependents
than four												
dependents, see instructions												
and check	, 											
here 🗌												
Income	1a	Total amount from Form(s) W-2, b			,						-	82,632.
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						• •		. 10		
1099-R if tax	e	Taxable dependent care benefits t		,				• •	· · ·	. 1e		
was withheld. If you did not	f	Employer-provided adoption bene						• •		. 1f . 1g		
get a Form	g h	Wages from Form 8919, line 6 . Other earned income (see instruct				• •		• •		· <u>ry</u> . 1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (,	tructione			· · · · ·		• • •			``•
	z	Add lines 1a through 1h								. 1z		82,632.
Attach Sch. B	2a	-	2a			bТ	axable interest	t.		. 2b	_	
if required.	3a		3a				Drdinary divide			. 3b	,	
	4a		4a				axable amoun			. 4b		
Standard Deduction for—	5a	Pensions and annuities	5a			bΤ	axable amoun	t		. 5b	1	
 Single or 	6a	Social security benefits	6a			bΤ	axable amoun	t		. 6b)	
Married filing separately,	с	If you elect to use the lump-sum e	lectior	method,	check here	(see	instructions)		[
\$13,850	7	Capital gain or (loss). Attach Sche	dule D	if require	d. If not requ	iired	, check here		[7		
 Married filing jointly or 	8	Additional income from Schedule								. 8		-11,355.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8	8. This is y	our total inc	come	e			. 9	_	71,277.
\$27,700 • Head of	10	Adjustments to income from Sche								. 10		
household,	11	Subtract line 10 from line 9. This is	-							. 11	-	71,277.
\$20,800 • If you checked T	12	Standard deduction or itemized								. 12	-	13,850.
any box under Standard	13	Qualified business income deduct	ion fro	m Form 8	995 or Form	899	95-A			. 13		10 0
Deduction, see instructions.	14	Add lines 12 and 13	•••	•••				• •		. 14		13,850.
	15	Subtract line 14 from line 11. If zer	ro or le	ss, enter	-0 This is y	our	taxable incom	ie .		. 15		57,427.

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	7,941.
Credits	17	Amount from Schedule 2, lin	ie3				[17	
	18	Add lines 16 and 17					[18	7,941.
	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	7,941.
	23	Other taxes, including self-e					[23	0.
	24	Add lines 22 and 23. This is						24	7,941.
Payments	25	Federal income tax withheld							,
. aymente	а	Form(s) W-2				25a 13	3,558.		
	b	Form(s) 1099				25b	·		
	С	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	,					25d	13,558.
	26	2023 estimated tax payment						26	
If you have a l qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit				29			
	30	Reserved for future use .		·		30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31				-		32	
	33	Add lines 25d, 26, and 32. T	,	-	-		· · -	33	13,558.
Defined	34	If line 33 is more than line 24					•••	34	5,617.
Refund	34 35a	Amount of line 34 you want	-					35a	5,617.
Direct deposit?	b 35a	Routing number 0 4 4					Souingo	35a	5,017.
See instructions.		Account number 5 1 9					Savings		
	d								
	36	Amount of line 34 you want a				36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g							
rou Owe						1 1	•••	37	
	38	Estimated tax penalty (see in				38			
Third Party		you want to allow another					omplete be		🗙 No
Designee				· · · Phone			onal identific		
	nai	signee's ne		no.			ber (PIN)	ation	
Sign	Un	der penalties of perjury, I declare tl	nat I have examined	d this return and	accompanying sche	edules and statemen	ts, and to the	e best (of my knowledge and
Here	bel	ief, they are true, correct, and com	plete. Declaration of	of preparer (othe	r than taxpayer) is b	ased on all informati	on of which p	orepare	er has any knowledge.
TIELE	Yo	ur signature		Date	Your occupation		If the I	RS ser	nt you an Identity
									N, enter it here
Joint return?					SOFTWARE		(see in	,	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	tion			nt your spouse an action PIN, enter it here
your records.							(see in		
	Ph	one no. (240) 413-128	5	Email address	VAMSHIKIIMAR	0401@GMAIL.C	 אר		
		eparer's name	Preparer's signat		*1110111101141	Date	PTIN		Check if:
Paid		M PRIYA RAM SAGAR GUPTA			GAR GUPTA	03/23/2024	P02082	703	Self-employed
Preparer		m's name GLOBAL TAX		A TATA DAG	JUIL OULIA	00/20/2024			678) 965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816		Firm's		0101905-9522
Go to warne in a		1040 for instructions and the late		TIONICI IN					Form 1040 (2023)
GO IO WWW.IIS.go	JVIPOM	no40 for instructions and the late	scillionnation.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 23

Department of the Treasury Internal Revenue Service		Attachment Sequence No. 01						
Name(s) shown on Fo	Your soc	ial security number						
VAMSHI KUMAR BOGOJU 330-83-72								

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
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		5	-11,355.
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		
- 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		
ο	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			11 055
	1040, 1040-SR, or 1040-NR, line 8		10	-11,355.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedul	e 1 (Form 1040) 2023

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	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	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8I from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m	_	
d	Reforestation amortization and expenses 24d		
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974	_	
f	Contributions to section 501(c)(18)(D) pension plans	-	
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)	_	
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	-	
j	Housing deduction from Form 2555	-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)	-	
Z	Other adjustments. List type and amount:		
05	Tatal athen adjustments. Add lines 04a through 04a	05	
25 06	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	06	
		26	
	BAA REV 03/07/24 PRO	Schedule	1 (Form 1040) 2023

(Form 1040)		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)								20 7 3			
	nent of the Treasury Revenue Service	Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to <i>www.irs.gov/ScheduleE</i> for instructions and the latest information.								Attachment Sequence No. 13			
Name(s) shown on return									Your soc	ial security			
VAMSHI KUMAR BOGOJU						330-8					3-7158		
Part	I Income	or Los	s From Rent	al Real Estate an	d Ro	yalties							
	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.												
	id you make any payments in 2023 that would require you to file Form(s) 1099? See instructions												
1a	Physical addr	ress of ea	ach property (s	street, city, state, ZI	P code	e)							
Α	H NO.5-5-15	56/95 , R	OAD NO:8 M	ALLIKARJUNA NAG	GAR	(NORTH),	CHINT	TALKU	NTA, HYDERA	ABAD, TE	LANGANA	IN 50068	
В													
С													
1b	Type of Property (from list below) 2 For each rental real estate property list above, report the number of fair rental							Fair Rental Days		Personal Use Days		QJV	
Α	personal use days. Check the QJ						Α		325	0			
В	if you meet the requirements to fil qualified joint venture. See instruct						В				-		
С			qualified join	t venture. See instru	lotions	5. ·	С						
Туре	of Property:					1							
	Single Family R			ion/Short-Term Ren	ital	5 Land			Self-Rental				
2	Multi-Family Re	sidence	4 Comn	nercial		6 Roya	lities	8	Other (desc				
							Properties						
Incom		-1			•		A	0.0	В			С	
3					3		0	80.					
4		ived			4								
Exper					5								
5	-				5 6								
6		Auto and travel (see instructions)						50.					
7 8					7		/	50.					
9		9											
9 10	Insurance	10											
11	Legal and other professional fees						1 5	94.					
12	Mortgage inter		11		, J	J - .							
13	00				13								
14	Repairs				14		3,8	45.					
15					15		4,1						
16					16		-,-						
17	Utilities	17		1,6	94.								
18					18								
19	Other (list)	•			19								
20				19	20		12,0	35.					
21	Subtract line 2	0 from li	ne 3 (rents) an	d/or 4 (royalties). If									
			structions to fi	ind out if you must									
	file Form 6198				21	-	-11 , 3	55.					
22				er limitation, if any,	22	(11,35	55.)	()	()	
23a	Total of all am	ounts rep	ported on line 3	3 for all rental prope	rties			23a		680.		,	
b				4 for all royalty prop				23b					
с	Total of all am	ounts rep	ported on line	12 for all properties				23c					
d	Total of all am	ounts rep	ported on line	18 for all properties				23d					
е	Total of all amounts reported on line 20 for all properties												
24				n on line 21. Do no t						. 24			
25				and rental real estat							(11,355.)	
26				income or (loss). 10 on page 2 do no									

Supplemental Income and Loss

For Paperwork Reduction Act Notice, see the separate instructions.

SCHEDULE E

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

Schedule E (Form 1040) 2023

26

-11,355.

OMB No. 1545-0074