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			
SIDDARTHA KORIDE	885-28-	-5169			
Spouse's name	Spouse's soci	cial security number			
NEELOTHPALA MAHAVADI	989-97-	-7586			
	nter year you ar	re 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 1			
1 Adjusted gross income		1 83,257.			
2 Total tax		2 6,229.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 13,036.			
4 Amount you want refunded to you		4 6,807.			
5 Amount you owe		5			
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or american)		· · · · · · · · · · · · · · · · · · ·			
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trato send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize to depart to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accoun payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term 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 a personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent.	or rejection of the tra he U.S. Treasury ar t indicated in the ta titution to debit the ninate the authoriza requests must be nother processing of the payment. I furth	ansmission, (b) the reason of its designated Financia or preparation software for entry to this account. This titon. To revoke (cancel) or received no later than of the electronic payment of the acknowledge that the			
Taxpayer's PIN: check one box only					
I authorize GLOBAL TAXES LLC to enter or general signature on the income tax return (original or amended) I am now authorizing.	Ent	5 1 6 9 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 a if you are entering your own PIN and your return is filed using the Practitioner PIN r below.					
Your signature ▶ Date	-				
Spouse's PIN: check one box only					
I authorize GLOBAL TAXES LLC to enter or generation in 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 are if you are entering your own PIN and your return is filed using the Practitioner PIN rebelow.	Ent don am now authorizin				
Spouse's signature ▶ Date	>				
Practitioner PIN Method Returns Only—continue be	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.		6 0 8 2 7 1 er all zeros			
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incorauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am srequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers	submitting this retu	rn in accordance with the			
ERO's signature ▶ Date					
FRO Must Retain This Form — See Instruction	9	· · · · · · · · · · · · · · · · · · ·			

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 Tax		urn	202	3	OMB No. 1545-0	074	IRS Use Only	–Do not v	vrite or staple ir	ı this space.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ing	'		, 20	See se	parate instr	uctions.
Your first name	e and m	iddle initial	Last na	ame						Your so	ocial security	number
SIDDART	HA		KORI	DE						885	28 51	.69
		s first name and middle initial	Last na								's social sec	
NEELOTH:	PALA		MAHA	AVADI						989	97 75	86
		er and street). If you have a P.O. box, see						Д	pt. no.		ential Electio	
6066 PL	UMAS	ST						F	1	Check	here if you,	or your
City, town, or p	oost offi	ice. If you have a foreign address, also co	mplete s	spaces be	low.	Sta	te Z	ZIP co	ode		if filing joint	
RENO						N	7	895	19		o this fund. C low will not a	
Foreign countr	y name			Foreign p	rovince/state/o	count	ty F	oreig	n postal code	1	x or refund.	
											You	Spouse
Filing Status	s \square	Single					Head of hou	useh	old (HOH)			
Check only	×	Married filing jointly (even if only o	ne had	income)								
one box.		Married filing separately (MFS)					☐ Qualifying s	urviv	ing spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name o	of your s	pouse. If you	ı che	ecked the HOH	or QS	SS box, ente	er the ch	ild's name i	f the
	qu	ıalifying person is a child but not you	ır deper	ndent:								
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	d. award. or i	navr	ment for property	v or :	services): or	(b) sell.		
Assets		nange, or otherwise dispose of a dig							•	. ,	Yes	⊠ No
Standard		neone can claim: You as a de					a dependent			,		
Deduction		Spouse itemizes on a separate retur	•		•		•					
		·						bofo		1050	☐ Is blir	
		: Were born before January 2, 1	909 [Are bl	•	use		14	re January 2) Check the b	-		
Dependent		e instructions): First name Last name		1 11		(3) Relationship to you	(4	Child tax c		Credit for oth		
If more than four	(1)	Last Harrie		, , , , , , , , , , , , , , , , , , , ,			10 700				Г	7
dependents,												┪
see instruction	ıs											┪
and check here	1 —											┪
	1a	Total amount from Form(s) W-2, b	nx 1 (se	e instruc	rtions)					. 1a	9	2 , 508.
Income	b	Household employee wages not re	•		,							2,000.
Attach Form(s)	c	Tip income not reported on line 1a	•		. ,					. 10		
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	•		,					. 10		
W-2G and	e	Taxable dependent care benefits f		•	,	10110				. 16		
1099-R if tax was withheld.	f	Employer-provided adoption bene								. 11		
If you did not	g	Wagaa from Form 2010 line 6								. 10		
get a Form	h	Other earned income (see instruct								. 1h	_	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,				1i		•			
	z	Add lines 1a through 1h								. 1z	9	2,508.
Attach Sch. B			2a			b T	axable interest			. 2b		
if required.	За	· –	3a				ordinary dividend	ds .				
	4a	IRA distributions	4a			b T	axable amount .			. 4t	,	
Standard Deduction for—	5a	Pensions and annuities	5a			b T	axable amount .			. 5b	,	
• Single or	6a	Social security benefits	6a			b T	axable amount .			. 6k)	
Married filing separately,	С	If you elect to use the lump-sum e	ise the lump-sum election method, check here (see instructions)									
\$13,850	7	Capital gain or (loss). Attach Sche	dule D i	f require	d. If not requ	iired	, check here		[□ 7		
 Married filing jointly or 	8	Additional income from Schedule	1, line 1	0						. 8	_	9,251.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is y	our total inc	ome	e			. 9	8	3,257.
\$27,700	10	Adjustments to income from Sche	dule 1,	line 26						. 10)	
 Head of household, 	11	Subtract line 10 from line 9. This is	s your a	djusted	gross incon	ne				. 11	8	3 , 257.
\$20,800 • If you checked	12	Standard deduction or itemized	deduct	t ions (fro	m Schedule	A)				. 12	2 2	7,700.
any box under	13	Qualified business income deduct	ion fron	n Form 8	995 or Form	899	5-A			. 13	3	
Standard Deduction,	14	Add lines 12 and 13								. 14	_	7,700.
see instructions.	15	Subtract line 1/1 from line 11 If zer	ro or loc	c ontor	O This is w	our t	tavabla incomo			15	- 1 5	5 557

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	6,229.
Credits	17	Amount from Schedule 2, lir					-	17	
	18	Add lines 16 and 17						18	6,229.
	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	. If zero or less,	enter -0				22	6,229.
	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	6,229.
Payments	25	Federal income tax withheld							
•	а	Form(s) W-2				25a 1	3 , 036.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	13,036.
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)				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				ndable credits		32	
	33	Add lines 25d, 26, and 32. T						33	13,036.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amoun	t you overpaid		34	6,807.
	35a								6,807.
Direct deposit?	b	Routing number 1 2 2				Checking	Savings		
See instructions.	d	Account number 7 5 2	8 9 1 0	7 2					
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe					
You Owe		For details on how to pay, g						37	
	38	Estimated tax penalty (see i	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			_
Designee	instructions							below.	⊠ No
		Designee's Phone Personal id- name no. number (PII						tification	
Ciana		der penalties of perjury, I declare t	hat I have examined		accompanying sched			the hest	of my knowledge and
Sign		lief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		lf th	ne IRS se	ent you an Identity
							I		PIN, enter it here
Joint return?					ASSISTANT PR	ER (see	e inst.)		
See instructions. Keep a copy for	Sp	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupation			nt your spouse an	
your records.					HOME MAKER		Identity Protection PIN, enter it here (see inst.)		
	——Ph	one no. (480) 738-107	7	Email address	SKORIDE@AS				-
		eparer's name	Preparer's signat		DITOTALDERAD	Date	PTIN		Check if:
Paid	SYAN	I PRIYA RAM SAGAR GUPTA TALLAM	1 .		GUPTA TALIAM	01/20/2024	P0208	32703	Self-employed
Preparer		m's name GLOBAL TA				1 -1, 23, 2321			(678) 965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816			n's EIN	84-3171965
			_ 01 11 11(0		- 000-0		1	0 =111	01 01/1000

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

SIDDARTHA KORIDE & NEELOTHPALA MAHAVADI

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 885–28–5169

t I Additional Income			
Date of original divorce or separation agreement (see instructions):			
			-9 , 251
Unemployment compensation		. 7	
Other income:			
	8a ()	
Gambling	8b		
Cancellation of debt	8c		
Foreign earned income exclusion from Form 2555	8d ()	
Income from Form 8853	8e		
Income from Form 8889	8f		
Alaska Permanent Fund dividends	8g		
Jury duty pay	8h		
Prizes and awards	8i		
	8j		
Stock options	8k		
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		
	8m		
,	8n		
	80		
	8p		
	8r		
	8s (
	8t		
Other income. List type and amount:			
	8z		
Total other income. Add lines 8a through 8z		. 9	
	Taxable refunds, credits, or offsets of state and local income taxes. Alimony received	Taxable refunds, credits, or offsets of state and local income taxes Alimony received Date of original divorce or separation agreement (see instructions): Business income or (loss). Attach Schedule C Other gains or (losses). Attach Form 4797 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Farm income or (loss). Attach Schedule F Unemployment compensation Other income: Net operating loss Gambling Cancellation of debt Foreign earned income exclusion from Form 2555 Bd (Income from Form 8853 Income from Form 8889 Alaska Permanent Fund dividends Jury duty pay Prizes and awards Activity not engaged in for profit income Stock options 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 Olympic and Paralympic medals and USOC prize money (see instructions) Section 951(a) inclusion (see instructions) Section 951(a) inclusion (see instructions) Section 461(f) excess business loss adjustment Taxable distributions from an ABLE account (see instructions) Section or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan Wages earned while incarcerated Other income. List type and amount: Taxable amount in the paralymont included on Form 1040, line 1 a or 1 d Section 1 compensation plan or a nongovernmental section 457 plan Wages earned while incarcerated Other income. List type and amount: Bate Attach Schedule C Attac	Taxable refunds, credits, or offsets of state and local income taxes

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.

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

OMB No. 1545-0074 Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service

Name(s	s) shown on return						Your soci	al security	number	
SIDI	DARTHA KORIDE & NEELOTHPALA MAHAVADI						885-2	8-5169)	
Par	Income or Loss From Rental Real Estate ar Note: If you are in the business of renting personal prope rental income or loss from Form 4835 on page 2, line 40.	rty, use		e C . See	e instruc	ctions. If you	are an indi	vidual, rep	oort farm	
	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions ☐ Yes ☐ No If "Yes," did you or will you file required Form(s) 1099?									
1a	Physical address of each property (street, city, state, ZI									
A	12-136, GODAVARI ROAD DHARMAPURI TELA		<u> </u>	50542	5					
В	12 100, COBINING NOTE BINISH ON THE	11011111		30012						
1b		For each rental real estate property listed above, report the number of fair rental and Days						nal Use ays	QJV	
Α	personal use days. Check the Q					365	0			
В	if you meet the requirements to qualified joint venture. See instru			В						
С	qualified joint venture. See instit	uctions	5.	С						
Type	of Property:									
	Single Family Residence 3 Vacation/Short-Term Rer Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya	-		Self-Rental Other (desc	cribe)			
						Propert	ies:			
Incor	me:			Α		В			С	
3	Rents received	3		4	190.					
4	Royalties received	4								
Expe	nses:									
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		8	347.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,7	44.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14			249.					
15	Supplies	15		3,1	.57.					
16	Taxes	16								
17	Utilities	17		1,7	44.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		9,7	41.					
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			-9, 2	51					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(51.)(,		,		
23a	Total of all amounts reported on line 3 for all rental proper		(9, 40	23a		490.	()	
zsa b	Total of all amounts reported on line 4 for all royalty prop				23b		100.			
C	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties			•	23d					
e e	Total of all amounts reported on line 20 for all properties			•	23e		9,741.			
24	Income. Add positive amounts shown on line 21. Do no						. 24			
25	Losses. Add royalty losses from line 21 and rental real esta:				nter to	al losses he		(9,251.)	
26	Total rental real estate and royalty income or (loss).								2, = 0 = 0	

here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

26

-9,251.