## 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	
VINAY KUMAR DUVVA	-3827		
Spouse's name	ial security number		
Part I Tax Return Information — Tax Year Ending December 31, 2023 (En	 ter year you aı	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 Adjusted gross income		1 113,8	320.
2 Total tax		2 17,3	394.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 20,8	339.
4 Amount you want refunded to you		4 3,4	445.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	d keep a copy	y of your return	1)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I at return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tranto send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account it payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial instituauthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termin payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation r 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 the personal identification number (PIN) below is my signature for the income tax return (original or amended) Electronic Funds Withdrawal Consent.	smitter, or electro rejection of the tra e U.S. Treasury are indicated in the ta ution to debit the nate the authoriza equests must be the processing of e payment. I furti	nic return originator ansmission, (b) the indicts designated Fire an entry to this accountion. To revoke (call received no later the electronic paymer acknowledge the	r (ERO) reason nancial vare for nt. This ncel) a than 2 nent of nat the
Taxpayer's PIN: check one box only			
▼ I authorize GLOBAL TAXES LLC to enter or general	te my PIN		as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	er five digits, but n't enter all zeros	y
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN me below.			
Your signature ▶ Date ▶	•		
Spouse's PIN: check one box only			
• —	to make DINI		
I authorize to enter or genera	-	er five digits, but	as my
signature on the income tax return (original or amended) I am now authorizing.		n't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN me below.			
Spouse's signature ▶ Date ▶	•		
Practitioner PIN Method Returns Only—continue belo	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.		6 0 8 2 7 er all zeros	1
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am su requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of	bmitting this retu	rn in accordance w	
ERO's signature ▶ Date ▶	•		
ERO Must Retain This Form — See Instructions			

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

# E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



<b>£1040</b>		artment of the Treasury—Internal Revenue Serv  S. Individual Income Tax		ırn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	ıple in this s	space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, enc	ling			, 20	Ť	See se	oarate i	nstructio	ons.
Your first name	and m	iddle initial	Last nar	ne							Your so	cial sec	urity num	nber
VINAY K	IMAR		DUVV.	Α							376	77	3827	
		s first name and middle initial	Last nar										security	number
		er and street). If you have a P.O. box, see	instructio	ons.				A	Apt. no.	- 1			ection Ca	
3012 WYI						04-	4-	710 -	1 -				ou, or yo jointly, wa	
		ice. If you have a foreign address, also co	ompiete st	baces bei	ow.	Sta		ZIP c				<b>.</b>	nd. Checl	
CHARLOT'					avina a /atata /	NC		282					not chang	ge
Foreign countr	упатте			oreign pro	ovince/state/	Couri	y	Foreig	ın postal c	oue	your tax	or relu	_	Spouse
Filing Status	s 🗵	Single					Head of he	useh	old (HOH	<del>-</del> 1)				
Check only		Married filing jointly (even if only o	ne had ir	ncome)										
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spo	use (C	QSS)			
	lf y	you checked the MFS box, enter the	e name o	f your sp	ouse. If you	ı che	cked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	<del>)</del>
	qu	alifying person is a child but not you	ur depen	dent:										
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	l, award, or	payn	nent for prope	rty or	services	); or (	b) sell,			
Assets	exch	nange, or otherwise dispose of a dig	ital asset	t (or a fin	ancial inter	est ir	n a digital asse	et)? (Se	ee instru	ction	s.)		es 🛛 I	No
Standard	Som	neone can claim: 🗌 You as a de	pendent		Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-status	alien								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bli	nd <b>Sp</b>	ouse	: Was bor	rn befo	ore Janua	ary 2,	1959		s blind	
Dependent	s (see	instructions):		<b>(2)</b> S	ocial security	,	(3) Relationsh	nip (4	) Check t	he bo	x if quali	fies for (	see instru	ıctions):
If more		irst name Last name	Last name number to you Child tax		ax cre	edit	Credit fo	r other dep	pendents					
than four														
dependents, see instruction	. —													
and check														
here														
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		128,0	)80.
Attach Form(s)	b	Household employee wages not re	•								1b	_		
W-2 here. Also	С	Tip income not reported on line 1a	ome not reported on line 1a (see instructions)							1c				
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	ctions)				1d			
1099-R if tax	е	Taxable dependent care benefits t									1e			
was withheld.	f	Employer-provided adoption bene	efits from	Form 88	839, line 29						1f			
If you did not get a Form	g	Wages from Form 8919, line 6 .									1g			
W-2, see	h	Other earned income (see instruct	,					· ·			1h			0.
instructions.	i	Nontaxable combat pay election (	see instr	uctions)			<u>li</u>						100 (	200
	<u>z</u>	Add lines 1a through 1h			· · ·						1z	_	128,0	
Attach Sch. B	2a	. –	2a				axable interest				2b			81.
if required.	3a_		3a				rdinary divide				3b			
Standard	4a	<del>-</del>	4a				axable amoun				4b			
Deduction for—	5a		5a				axable amoun				5b			
Single or Married filing	6a	,	6a		.1		axable amoun	t		٠	6b			
separately,	_ c	If you elect to use the lump-sum e		-		•	,				1 -			
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche		•						. L	7			2 4 1
jointly or Qualifying	8	Additional income from Schedule	•								8	-	-14,3	
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-							9		113,8	5∠∪.
\$27,700 Head of	10	Adjustments to income from Sche									10		112 (	
household, \$20,800	11	Subtract line 10 from line 9. This is	•	-	_						11		113,8	
If you checked	12	Standard deduction or itemized				-					12	_	13,8	850.
any box under Standard	13	Qualified business income deduct									13		12 (	
Deduction, see instructions.	14	Add lines 12 and 13									14		13,8	350.

Form 1040 (2023	3)						Page <b>2</b>	
Tax and	16	Tax (see instructions). Check if any from Forn	n(s): <b>1</b> 881	4 <b>2</b> 4972	з 🗌	16	17,394.	
Credits	17	Amount from Schedule 2, line 3				17		
	18	Add lines 16 and 17				18	17,394.	
	19	Child tax credit or credit for other depender	nts from Sched	ule 8812		19		
	20	Amount from Schedule 3, line 8				20		
	21	Add lines 19 and 20				21		
	22	Subtract line 21 from line 18. If zero or less,	enter -0			22	17,394.	
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21		23	0.	
	24	Add lines 22 and 23. This is your total tax				24	17,394.	
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2			<b>25a</b> 20	,839.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c				250	20,839.	
If you have a	26	2023 estimated tax payments and amount a	applied from 20	)22 return		26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)		No .	27			
attach Sch. ElC.	28	Additional child tax credit from Schedule 8813	2		28			
	29	American opportunity credit from Form 886	3, line 8		29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15			31			
	32	Add lines 27, 28, 29, and 31. These are you	r total other pa	ayments and refu	indable credits	32		
	33	Add lines 25d, 26, and 32. These are your to	otal payments			33	20,839.	
Refund	34	If line 33 is more than line 24, subtract line 2	24 from line 33.	This is the amour	nt you <b>overpaid</b>	34	3,445.	
	35a	Amount of line 34 you want refunded to yo		B is attached, chec	ck here	. 🗌 35a	3,445.	
Direct deposit?	b	Routing number 0 1 1 0 0 0 1			Checking S	Savings		
See instructions.	d	Account number 0 0 4 6 6 2 6	4 3 5 !	5   5				
	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 am	ount you owe					
You Owe		For details on how to pay, go to www.irs.go	v/Payments or	see instructions .		37		
	38	Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to distructions			_	mplete below	. 🗵 No	
J	De na	signee's ne	Phone no.			nal identificatio er (PIN)	n	
Sign		der penalties of perjury, I declare that I have examine ief, they are true, correct, and complete. Declaration					, ,	
Here	Yo	ur signature	Date	Your occupation		If the IRS	sent you an Identity	
							PIN, enter it here	
Joint return?				DEVOPS/CLC				
See instructions. Keep a copy for your records.	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupati		If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Ph	one no. (612)300-6261	Email address	VINAYKUMAR.D	UVVA@GMAIL.CO	M		
Doid	Pre	parer's name Preparer's signa	ture		Date	PTIN	Check if:	
Paid	SYA	M PRIYA RAM SAGAR GUPTA SYAM PRIY	A RAM SAG	GAR GUPTA	03/22/2024	P02082703	Self-employed	
Preparer	Fir	n's name GLOBAL TAXES LLC				Phone no.	(678)965-9522	
Use Only	Fir	n's address 245 ROONEY CT E BRU	JNSWICK N	J 08816		Firm's EIN		
Go to www.irs.ai	ov/Form	21040 for instructions and the latest information		DAA	DEV 02/07/24 DDO		Form 1040 (2023)	

# 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

VINAY KUMAR DUVVA

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

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 376-77-3827

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. Att	ach Schedule E .	5	-14,341.
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 <b>additional income</b> . Ente	r here and on Form		14 241
	1040, 1040-SR, or 1040-NR, line 8		10	-14,341.

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	_			
	· · · · · · · · · · · · · · · · · · ·	24c			
d		24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	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				
	tax law violations	24i			
j	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		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 <b>adjustments to income</b> Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	here and on	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.

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

VINA	Y KUMAR DUVVA						376-7	7-3827	
Part									
	Note: If you are in the business of renting personal proper	ty, use	Schedule	<b>C</b> . See	instru	ctions. If you a	are an indiv	vidual, rep	ort farm
	rental income or loss from <b>Form 4835</b> on page 2, line 40.		- () 4	2000					57.11
	Did you make any payments in 2023 that would require you								
ВІ	f "Yes," did you or will you file required Form(s) 1099? .						<u> </u>		s U No
1a	Physical address of each property (street, city, state, ZIF	ode code	•)						
Α	PALAMANER CHITTOOR DISTRICT ANDHRA PRA	ADESH	IN AN	DHRA	PRA	DESH			
В									
С									
1b	Type of Property (from list below)  2 For each rental real estate properabove, report the number of fair				Fa	ir Rental Days	Personal Use Days		QJV
Α	personal use days. Check the Qu	JV box	a sala		365		0		
В	if you meet the requirements to f			В				-	
С	qualified joint venture. See instru	ictions	•	С					
Tvpe	of Property:				l				
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental			
	Multi-Family Residence 4 Commercial		6 Roya	Ities	8	Other (desc	ribe)		
	·								
		-				Propert	ies:		
Incon				<u>A</u>	00.	В			С
3 4	Rents received	3		0	00.				
Exper	Royalties received	4							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,8	25				
8	Commissions	8		1,0	23.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,6	00				
12	Mortgage interest paid to banks, etc. (see instructions)	12		1,0	00.				
13	Other interest	13							
14	Repairs	14		3,8	75				
15	Supplies	15		3,4					
16	Taxes	16							
17	Utilities	17		4,1	85.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		14,9	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 <b>Form 6198</b>	21		-14,3	41.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(	14,34	1.)	(	)	(	
23a	Total of all amounts reported on line 3 for all rental prope				23a		600.		
b	Total of all amounts reported on line 4 for all royalty prop				23b				
С	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				
е	Total of all amounts reported on line 20 for all properties				23e	14	1,941.		
24	Income. Add positive amounts shown on line 21. <b>Do not</b>		-				. 24	/	
25	Losses. Add royalty losses from line 21 and rental real estate							(	14,341.
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no						on   oc		_1/ 2/1