Internal Revenue Service

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

IRS e-file Signature Authorization

Social security number

Submission Identification Number (SID)

Taxpaver's name

512-99-9056
Spouse's social security number
year you are authorizing.)
1 104,035.
2 15,146.
3 18,961.
4 3,815.
5
eep 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

X I authorize GLOBAL TAXES LLC to enter or generate my PIN

9	9	0	5	6	
			gits, all ze		as my

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.

Your sig	nature 🕨	R. Vdayasy	Date 🕨	01/19/20:	24	
	s PIN: check one box only I authorize	ERO firm name	to enter or generate n	וא PIN	Enter five digits, but don't enter all zeros	as my
	signature on the income tax re	eturn (original or amended) I ar	m now authorizing.		don t enter an zeros	

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 ►	Date I								
Practitioner PIN Method Returns Only—continu	e be	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	2		0 all zei	 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 Rei Don't Submit This For	tain This Form — See rm to the IRS Unless		
For Paperwork Reduction Act Notice, see your tax return in	structions. RAA	REV 01/12/24 PRO	Form 8879 (Rev. 01-2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

Deduction for - Sa Definitions and annulutes	1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta >		turn	202	3	OMB No. 1545	-0074	IRS Use Only	y−Do not v	/rite or sta	aple in this space.
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If joint return, spouse's first name and middle initial Last name Spouse's social security number Home address (number and street). If you have a P.O. box, are instructions. Apt. nb. 52.4 Presidential Election Campaign Spouse instructions. Presidential Election Campaign Spouse instructions. DALLAS Presidential Election Campaign Spouse instructions. TX TS 24.0 Does bree if you, or your of Spouse instructions. Freign country name Foreign province/state/county Foreign province/state/county Foreign province/state/county Presidential Election Campaign Spouse instructions. Fling Status Single Image and the MTS box, enter the name of your spouse. If you checked the MOH or QSS box, enter the child's name if the qualifying surviving spouse (QSS) You spouse. If you checked the MOH or QSS box, enter the child's name if the qualifying surviving spouse (CSS) Image and the MTS box, enter the name of your spouse. If you checked the MOH or QSS box, enter the child's name if the qualifying surviving spouse (CSS) Image and the MTS box enter the name of your spouse as a dependent: Digital At any time during 2023, did you: (a) receive (as a reveral, award, or payment for property or services); or (b) sell, each and prove the more than tame Image and the MTS box, enter the name of your spouse as a dependent: Diduction Spouse instructions): Image and													-
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Deduction, 14 Add lines 12 and 13 14 13,850.	any box under	13	Qualified business income deduction	ion fro	m Form 8	995 or Form	899	95-A			. 13		
see instructions. 15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income 15 90, 185.	Deduction,	14	Add lines 12 and 13								. 14		
	see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	ourt	taxable incom	e.		. 15	;	90,185.

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 an	iy from Form	(s): 1 🗌 881	4 2 4972	3 🗌	10	6 15,146.
Credits	17	Amount from Schedule 2, line 3					1	7
	18	Add lines 16 and 17					18	B 15,146.
	19	Child tax credit or credit for othe	er dependent	ts from Sched	ule 8812		19	9
	20	Amount from Schedule 3, line 8					20	0
	21	Add lines 19 and 20					2	1
	22	Subtract line 21 from line 18. If z	ero or less,	enter -0			2	2 15,146.
	23	Other taxes, including self-emplo	oyment tax,	from Schedule	e 2, line 21		2	3 0.
	24	Add lines 22 and 23. This is your	total tax				24	4 15,146.
Payments	25	Federal income tax withheld from						
•	а	Form(s) W-2				25a 18	,961.	
	b	Form(s) 1099				25b		
	с	Other forms (see instructions) .				25c		
	d	Add lines 25a through 25c					25	id 18,961.
If you have a	26	2023 estimated tax payments ar	nd amount a	pplied from 20	22 return		20	
qualifying child,	27	Earned income credit (EIC)				27		
attach Sch. EIC.	28	Additional child tax credit from Sc				28		
	29	American opportunity credit fron				29		
	30	Reserved for future use				30		
	31	Amount from Schedule 3, line 15				31		
	32	Add lines 27, 28, 29, and 31. The					3	2
	33	Add lines 25d, 26, and 32. These						10.011
Refund	34	If line 33 is more than line 24, su					3	
neruna	35a	Amount of line 34 you want refu						
Direct deposit?	b	Routing number 0 4 4 0					avings	
See instructions.	ď	Account number 3 6 6 8					avingo	
	36	Amount of line 34 you want appl			ed tax	36		
Amount	37	Subtract line 33 from line 24. Thi						
You Owe	37	For details on how to pay, go to					3	7
	38	Estimated tax penalty (see instru				38		•
Third Party		you want to allow another per						
Designee		tructions					mplete belov	w. 🔀 No
Deelghee	De	signee's		Phone			nal identificatio	
	nar			no.		numbe	er (PIN)	
Sign		der penalties of perjury, I declare that I l						
Here	bel	ef, they are true, correct, and complete	. Declaration of	ot preparer (otne	r than taxpayer) is ba	ased on all information		, ,
	Yo	ur signature		Date	Your occupation			sent you an Identity
Joint return?					SOFTWARE I	INCINEER	(see inst.)	n PIN, enter it here
See instructions.	Sp	ouse's signature. If a joint return, both	must sign.	Date	Spouse's occupat		If the IRS	sent your spouse an
Keep a copy for	οp		indet eigin	2410	opoulo o occupat			rotection PIN, enter it here
your records.							(see inst.)	
	Ph	one no. (937)830-7514		Email address	UDAYASRI05	06@GMAIL.COM	1	
Paid	Pre	parer's name Pre	parer's signat	ure		Date	PTIN	Check if:
Paid Proparor	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYA	AM PRIYA	RAM SAGAR	GUPTA TALLAM	01/20/2024	P0208270	3 Self-employed
Preparer	Firi	n's name GLOBAL TAXES	LLC				Phone no	(678)965-9522
Use Only	Fin	n's address 245 ROONEY C	T E BRU	NSWICK N	J 08816		Firm's EI	N 84-3171965
Go to www.irs.go	ov/Forn	1040 for instructions and the latest inf	ormation.		BAA	REV 01/12/24 PRO		Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Additional Income and Adjustments to Income

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

OMB No. 1545-0074

2023 Attachment Sequence No. **01** security number

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attach Seque
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soc	ial secu
UDAYASRI REGAL	LA	512-99	-9056

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a			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. Attach Schedule E	. [5	-14,085.
6	Farm income or (loss). Attach Schedule F.	. [6	
7	Unemployment compensation	. [7	
8	Other income:			
а	Net operating loss)		
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555)		
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay	_		
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
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)			
n	Section 951(a) inclusion (see instructions)			
0	Section 951A(a) inclusion (see instructions) . . . 80			
р	Section 461(I) excess business loss adjustment			
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			
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan			
u	Wages earned while incarcerated 8u			
Z	Other income. List type and amount: 8z			
9	Total other income. Add lines 8a through 8z		9	
9 10	Combine lines 1 through 7 and 9. This is your additional income . Enter here and on Fo		3	
10	1040, 1040-SR, or 1040-NR, line 8		10	-14,085.
For Pa	perwork Reduction Act Notice, see your tax return instructions.			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-basic	s 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:			
a	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			
Ŭ	and USOC prize money reported on line 8m			
d				
e	Repayment of supplemental unemployment benefits under the Trade			
C	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans		-	
a	Contributions by certain chaplains to section 403(b) plans		-	
	Attorney fees and court costs for actions involving certain unlawful		-	
	discrimination claims (see instructions)			
	, , , , , , , , , , , , , , , , , , , ,		-	
1	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect			
:				
J				
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)			
_			-	
Z	Other adjustments. List type and amount: 24z			
05			05	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter Form 1040, 1040-SR, or 1040-NR, line 10			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV	01/12/24 PRO	Schedule 1 (F	orm 1040) 202

SCHEDULE	Ε
(Form 1040)	

Department of the Treasury

Supplemental Income and Loss

OMB No. 1545-0074

5 12

Attachment

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Internal	Revenue Service			Go to www.irs.gov/ScheduleE fo	r instru	uctions an	d the la	atest in	formation.		Sequen	ce No.	13
Name(s) shown on return							Your social security number						
UDAYASRI REGALLA									512-99-9056				
Part				From Rental Real Estate an					•				
	Note: If you	u are in	n th	e business of renting personal proper	rty, use	Schedule	c . See	e instru	ctions. If you are	e an indiv	vidual, rep	ort far	m
A [from Form 4835 on page 2, line 40. Its in 2023 that would require you			00000	Coo inc	tructions				
													NO
				u file required Form(s) 1099?							re	: 5 _	
1a	Physical address of each property (street, city, state, ZIP code)												
Α	IN												
В													
С	C												
1b	Type of Proper	For each rental real estate prope						Person		C	λlγ		
	(from list below							Days		Days			
A	3			personal use days. Check the Qa if you meet the requirements to the					365	0			<u> </u>
<u>B</u>				qualified joint venture. See instru			В						<u> </u>
							С						
	of Property:							_					
	1 Single Family Residence3 Vacation/Short-Term Rental5 Land7 Self-Rental2 Multi-Family Residence4 Commercial6 Royalties8 Other (describe)												
2	Multi-Family Res	sidenc	ce	4 Commercial		6 Roya	alties	8	Other (descrit	oe)			
									Propertie	s:			
Incom	ne:						Α		В			С	
3	Rents received				3		6	500.					
4	Royalties received	/ed .			4								
Exper	ises:												
5					5								
6				tructions)	6								
7	Cleaning and maintenance						1,355.						
8			8										
9	Insurance												
10				ional fees	10								
11					11		1,0	00.					
12	00			o banks, etc. (see instructions)	12								
13					13								
14	Repairs					2,652. 3,251.							
15			15		3,2	251.							
16		• •	·		16 17		2 0	- 7 0					
17	Utilities					· · · · · · · · · · · · · · · · · · ·							
18 19	•		18 19		3,1	49.							
19 20	Other (list) Total expenses. Add lines 5 through 19						14,6	85					
	•	•	20		14,0								
21				e 3 (rents) and/or 4 (royalties). If tructions to find out if you must									
					21		-14,0	85.					
22				state loss after limitation, if any,									
				ructions)	22	(14,08	85.)	()	()
23a				orted on line 3 for all rental prope				23a	x	600.			,
b			-	orted on line 4 for all royalty prop				23b					
С			-	orted on line 12 for all properties				23c					
d				orted on line 18 for all properties				23d	3,	749.			
е													
24	Income. Add positive amounts shown on line 21. Do not include any losses												
25	Losses. Add roy	/alty lo	DSS	es from line 21 and rental real estat	te losse	es from lin	e 22. E	inter to	tal losses here	25	(14,0)85.)
26	Total rental re	al est	tate	e and royalty income or (loss).	Comb	ine lines	24 and	1 25. E	nter the result	t			
				IV, and line 40 on page 2 do no						n -			
	Schedule 1 (Fo	rm 10	40)	, line 5. Otherwise, include this a	mount	t in the to	tal on l	ine 41	on page 2 .	26	-	-14,	085.

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

Passive Activity Loss Limitations

See separate instructions.

Attach to Form 1040, 1040-SR, or 1041.

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 20 3 Attachment Sequence No. **858**

Identifying number 512-99-9056

UDAY	YASRI	REGALLA				51	2-99	-9056		
Pa	rt I	2023 Passive Activity Loss	6							
		Caution: Complete Parts IV ar	nd V before comple	eting Part I.				-		
		Estate Activities With Active Pa or Rental Real Estate Activities			ive participatio	on, see Special				
1a	Activities with net income (enter the amount from Part IV, column (a)) 1a 0.									
b		ties with net loss (enter the amo				14,085.	7			
c		years' unallowed losses (enter th					<u>/</u>			
d		bine lines 1a, 1b, and 1c					1d	-14,085.		
		ssive Activities	<u></u>	<u></u>				-14,003.		
22	Activi	ties with net income (enter the a	mount from Part V	column (a))	2a					
2a Activities with net income (enter the ab Activities with net loss (enter the amount							7			
b		years' unallowed losses (enter th					/			
C L		bine lines 2a, 2b, and 2c					/			
d			2d							
3	Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any									
	prior		14 005							
		ally used					3	-14,085.		
	It line	3 is a loss and: • Line 1d is a l	-		in Dout II and	na ta lina 10				
• • •			oss (and line 1d is			-				
		our filing status is married filing	separately and yo	bu lived with your	spouse at an	y time during the	e year,	, do not complete		
		id, go to line 10.		A . 11 111	A					
Par	t II	Special Allowance for Rer				•				
		Note: Enter all numbers in Par			tions for an ex	ample.	1 -			
4		the smaller of the loss on line 1					4	14,085.		
5		\$150,000. If married filing separ	-		5	150,000.	_			
6		modified adjusted gross income				118,120.	_			
		If line 6 is greater than or equal	to line 5, skip line	s 7 and 8 and ent	er -0-					
	on lin	e 9. Otherwise, go to line 7.								
7		act line 6 from line 5			7	31,880.				
8	Multip	ly line 7 by 50% (0.50). Do not ei	nter more than \$25	,000. If married fili	ng separately,	see instructions	8	15,940.		
9	Enter	the smaller of line 4 or line 8. If	line 3 includes any	/ CRD, see instruc	tions		9	14,085.		
Par	t III	Total Losses Allowed								
10	Add t	he income, if any, on lines 1a an	d 2a and enter the	total			10	0.		
11	Total	losses allowed from all passiv	e activities for 20	23. Add lines 9 ar	d 10. See inst	tructions to find				
	out h	ow to report the losses on your ta	ax return				11	14,085.		
Par	t IV	Complete This Part Before	e Part I, Lines 1	a, 1b, and 1c. S	ee instructio	ons.				
		Name of activity	Currer	Prior year	s Ove	erall gain or loss				
	Name of activity		(a) Net income (b) Net loss (line 1a) (line 1b)		(c) Unallow loss (line 1		n	(e) Loss		
			0.	14,085.				14,085.		
				-						
Total.	. Enter	on Part I, lines 1a, 1b, and 1c	0.	14,085.						
		k Reduction Act Notice, see instru	uctions.		RE	V 01/12/24 PRO		Form 8582 (2023)		

Part V	Complete This Part Befor	e Part I, Lines 2	a, 2b,	and 2c. S	ee instruc	ctions.				
		Currer		Prior years (c) Unallowed loss (line 2c)		Overall g		ain or loss		
	Name of activity	(a) Net income (line 2a)	(b) Net loss (line 2b)			(d) Gain		(e) Loss		
	on Part I, lines 2a, 2b, and 2c									
Part VI	Use This Part if an Amour		Part II,	, Line 9. S	ee instruc	tions.				
	Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss		(b) Ra	atio	(c) Special allowance		(d) Subtract column (c) from column (a).	
		E Ln 22	14,085.		1.0000	0000	0 14,085		0.	
Total Part VII	Allocation of Unallowed L	 . osses. See instr		14,085. s.	1.00	0	14,08	85.	0.	
	Name of activity	Form or sch and line nur to be reporte (see instruct	nber ed on (a) l		_oss		(b) Ratio (c		(c) Unallowed loss	
Total	Allowed Losses. See instr						1.00			
Part VIII	Allowed Losses. See instr		ll							
	Name of activity	Form or sch and line nur to be reporte (see instruct	nber ed on	(a) L	Loss	(b) Unallowed los		(c) Allowed loss		
Total .										

REV 01/12/24 PRO

Form **8582** (2023)