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)

Taxpaye	er's name	Social security num	ber
SAM	ATHA REDDY BURRI	705-43-843	4
Spouse'	's name	Spouse's social sec	urity number
Part	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	er year you are au	ithorizing.)
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	77,372.
2	Total tax	2	9,283.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	11,800.
4	Amount you want refunded to you	4	2,517.
5	Amount you owe	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		Ē
<u>~</u>	I authorize	GLUDAL	IAVEO		to enter or generate my PIN	_
$\overline{\mathbf{v}}$	l authorize	CTODAT		TTC	to optox or concrete my DIN	3

3	8	4	3	4	as my
Ent don	aomy				

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 mv Enter five digits, but don't enter all zeros

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 >	Date 🕨	
Practitioner PIN Method Returns Onl	ily—continue below	
Part III Certification and Authentication – Practitioner PIN Me	ethod Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-sele	Plected PIN. 2 2 2 4 9 6 0 8 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 Fo Don't Submit This Form to the II			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 02/05/24 PRO	Form 8879 (Rev. 01-2021)

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use Only	∕—Do not v	rite or sta	aple in this space.
For the year Jan	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, enc	ding			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	urity number
SAMATHA	RED	DY	BUR	RI						705	43	8434
-		s first name and middle initial	Last r									security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	Apt. no.	Preside	ntial Ele	ection Campaigr
<u>103 BALI</u>												ou, or your
City, town, or p	ost offi	ice. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP co	ode			jointly, want \$3 nd. Checking a
CARY						NC	-	275	19	box bel	ow will	not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your ta		_
											∐ Yo	ou Spouse
Filing Status				、			Head of he	ouseh	old (HOH)			
Check only		Married filing jointly (even if only or	ne hac	i income)								
one box.	L.	Married filing separately (MFS) you checked the MFS box, enter the	nomo	ofvouro	nouna lf voi	. obc			ing spouse	. ,	ild'e ne	ma if tha
		alifying person is a child but not you									nu s na	
Digital		ny time during 2023, did you: (a) rece						-				
Assets		hange, or otherwise dispose of a digi		· · ·				et)? (Se	ee instructio	ns.)		es 🛛 No
Standard Deduction		neone can claim: You as a de	•		•		a dependent					
Deduction		Spouse itemizes on a separate return	n or ye	ou were a	dual-status	allen	I					
		: Were born before January 2, 1	959	Are b	lind Spo	ouse	: 📋 Was bor		ore January			s blind
Dependents				(2) 5	Social security number	/	(3) Relationsh to you	ip (4	Check the b Child tax c	•		(see instructions): or other dependents
If more	(1) F	(1) First name Last name			number		to you					
than four dependents,												
see instructions	s ——											
and check here												\Box
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	see instruc	ctions) .					. 1a		88,170.
	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .					. 1b)	
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	a (see i	nstructior	ıs)					. 10	;	
attach Forms	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see i	nstru	uctions)			. 10	I	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom F	orm 2441	, line 26					. 16	,	
was withheld.	f	Employer-provided adoption bene								. 1f		
lf you did not get a Form	g	Wages from Form 8919, line 6 .	· ·							. 10		
W-2, see	h	Other earned income (see instructi	,			• •	· · · ·			. <u>1</u> h	<u>ا</u>	0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions))	• •	1 i					00 170
	z 2a	Add lines 1a through 1h Tax-exempt interest			· · ·	 ьт	axable interest	· ·	· · ·	. 1z . 2b		88,170.
Attach Sch. B if required.	2a 3a		2a 3a				Ordinary divider			. 21. . 31:		
<i>_</i>	<u> </u>		4a				axable amoun			. 4t		
Standard	ч а 5а		та 5а				axable amoun		•••			
Deduction for— • Single or	6a		6a				axable amoun			. 6b		
Married filing separately,	c	If you elect to use the lump-sum e		n method.	check here				[
\$13,850	7	Capital gain or (loss). Attach Sche				•			[7		
 Married filing jointly or 	8	Additional income from Schedule								. 8		-10,798.
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,								. 9		77,372.
\$27,700	10	Adjustments to income from Sche		-						. 10		
 Head of household, 	11	Subtract line 10 from line 9. This is	syour	adjusted	gross incor	me				. 11		77 , 372.
\$20,800 • If you checked	12	Standard deduction or itemized	deduc	tions (fro	m Schedule	A)				. 12	2	13,850.
any box under Standard	13	Qualified business income deduction	ion fro	m Form 8	995 or Form	n 899	95-A			. 13		
Deduction,	14	Add lines 12 and 13								. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	our t	taxable incom	ie .		. 15	j	63,522.

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	9,283.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	9,283.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	9,283.
	23	Other taxes, including self-e						23	0.
	24	Add lines 22 and 23. This is						24	9,283.
Payments	25	Federal income tax withheld							,
. aymente	а	Form(s) W-2				25a 1	1,800.		
	b	Form(s) 1099				25b	•	1	
	С	Other forms (see instructions				25c		-	
	d	Add lines 25a through 25c	,					25d	11,800.
	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		4	
	32	Add lines 27, 28, 29, and 31						32	
	33	Add lines 25d, 26, and 32. T		-	•		• •	33	11,800.
Defined	34	If line 33 is more than line 24						34	2,517.
Refund	34 35a	Amount of line 34 you want	,			, .	· ·	34 35a	2,517.
Direct deposit?	b 35a	Routing number $\begin{bmatrix} 0 & 2 & 1 \end{bmatrix}$		1. 11 FUITH 0000		_		358	2,017.
See instructions.		Account number 8 2 5				Checking	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						07	
rou Owe						1 1		37	
	38	Estimated tax penalty (see in	,			38			
Third Party		you want to allow another	•				complete l	bolow	🔀 No
Designee							•		INO NO
	nai	signee's ne		Phone no.			sonal identi 1ber (PIN)	lication	
Sign	Un	der penalties of perjury, I declare th	nat I have examined	d this return and	accompanying sche	edules and stateme	nts, and to t	the 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 informat	ion of whicl	n prepar	er has any knowledge.
пеге	Yo	ur signature		Date	Your occupation		If the	e IRS se	nt you an Identity
								PIN, enter it here	
Joint return?					SOFTWARE 1		`	inst.)	
See instructions. Keep a copy for				Date	Spouse's occupat	tion			nt your spouse an ection PIN, enter it here
your records.									socion i in, encer ichere
	Ph	one no. (419) 705-148	6	Email address	ВПББІ СУМУДНУ	.REDDY@GMAIL.C	- M		
		eparer's name	Preparer's signat		DUNNISAMAINA	Date	PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM					P0208	2703	Self-employed
Preparer		n's name GLOBAL TAX		ITTU DUGUL	GOLIN INDAM	102/11/2024			
Use Only			Y CT E BRU	NOWICK N	J 08816			i's EIN	(678) 965-9522
Go to warne in a		1040 for instructions and the late		TIONICI IN				3 LIN	84-3171965 Form 1040 (2023)
GO IO WWW.IIS.go	JVIPOM	no40 for instructions and the late	st mornation.		BAA	REV 02/05/24 PRO			Form IUHU (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

Attachment Sequence No. 01 Your social security number

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security num
SAMATHA REDDY BURRI	705-43-8434

Par	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. Attac	ch Schedule E .	5	-10,798.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b		8b		
С		8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е		8e		
f		8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i		8i		
j	Activity not engaged in for profit income	8j		
k		8k		
I	Income from the rental of personal property if you engaged in the rental			
		81		
m	Olympic and Paralympic medals and USOC prize money (see			
	· · · · · · · · · · · · · · · · · · ·	8m		
n		8n		
0		80		
р		8р		
q		8q		
r		8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
		8s (2	
t	Pension or annuity from a nonqualifed deferred compensation plan or	_		
	•	8t	- 1	
u		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 1040, 1040-SR, or 1040-NR, line 8		10	-10,798.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedul	e 1 (Form 1040) 2023

1	Educator expenses					11	
2	Certain business expenses of reservists, performing artists, and fee				nont		
2	officials. Attach Form 2106	-Dasi	s go	venin	lent	12	
3	Health savings account deduction. Attach Form 8889	• •	• •	•••	•	13	
4	Moving expenses for members of the Armed Forces. Attach Form 3903					14	
- 5	Deductible part of self-employment tax. Attach Schedule SE					15	
6	Self-employed SEP, SIMPLE, and qualified plans					16	
7	Self-employed bealth insurance deduction					17	
8	Penalty on early withdrawal of savings					18	
9a						19a	
b	Recipient's SSN						
C	Date of original divorce or separation agreement (see instructions):					00	
20	IRA deduction					20	
1	Student loan interest deduction					21	
2	Reserved for future use					22	
3	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						
		24e					
f	Contributions to section 501(c)(18)(D) pension plans	24f					
g		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					
5	Total other adjustments. Add lines 24a through 24z					25	
6	Add lines 11 through 23 and 25. These are your adjustments to income				don		
-	Form 1040, 1040-SR, or 1040-NR, line 10					26	

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

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

Department of the Treasury Internal Revenue Service

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

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

2023	
Attachment Sequence No. 13	

								al security		я г	
	ATHA REDDY BURRI						/05-4	3-8434			
Part	Income or Loss From Rental Real Est Note: If you are in the business of renting persona rental income or loss from Form 4835 on page 2,	al property, us	e Schedule	e C. See	instru	ctions. If you a	are an indi	vidual, rep	oort far	m	
A [Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions							. 🗌 Ye	es X	No	
	If "Yes," did you or will you file required Form(s) 1099?										
1a										<u> </u>	
	PALAKALURU ROAD GUNTUR ANDHRA PRA	ADESH IN	522004								
B											
<u>C</u>											
1b		2 For each rental real estate property listed above, report the number of fair rental and				ir Rental	Personal Use Days		Q	QJV	
		personal use days. Check the QJV box of			Days				r		
		3 personal use days. Check the QUV box of if you meet the requirements to file as a qualified joint venture. See instructions.				365		0			
B C											
	- (Duranta			С					[
	of Property:	D	- I		-						
	Single Family Residence 3 Vacation/Short-Te	erm Rental	5 Land			Self-Rental					
2	Multi-Family Residence 4 Commercial		6 Roya	aities	8	Other (desc	ribe)				
						Propert	ies:				
Incom	ne:			Α		В			С		
3	Rents received	3		7	56.						
4	Royalties received	4									
Exper											
5	Advertising	5									
6	Auto and travel (see instructions)										
7	Cleaning and maintenance				40.						
8	Commissions										
9	Insurance										
10	Legal and other professional fees										
11	Management fees			1,4	40.						
12	Mortgage interest paid to banks, etc. (see instruc										
13	Other interest										
14	Repairs			2,965.							
15	Supplies			3,425.							
16	Taxes										
17	Utilities			1,9	84.						
18	Depreciation expense or depletion										
19		10									
20	Total expenses. Add lines 5 through 19	20		11,554.							
21	Subtract line 20 from line 3 (rents) and/or 4 (royal										
	result is a (loss), see instructions to find out if you										
	file Form 6198	21		-10,7	98.						
22	Deductible rental real estate loss after limitation,	if any,								_	
	on Form 8582 (see instructions)	22	(10,79	98.)	()	(
23a	Total of all amounts reported on line 3 for all renta	al properties			23a		756.				
b	Total of all amounts reported on line 4 for all roya	Ity properties	s		23b						
С	Total of all amounts reported on line 12 for all pro	perties .			23c						
d	Total of all amounts reported on line 18 for all pro	perties .			23d						
е	Total of all amounts reported on line 20 for all pro	perties .			23e	11	L,554.				
24	Income. Add positive amounts shown on line 21.	Do not inclu	ude any lo	sses			. 24				
25	Losses. Add royalty losses from line 21 and rental re	eal estate loss	ses from lin	ie 22. E	nter to	tal losses hei	re 25	(10,7	98.	
26	Total rental real estate and royalty income or										
	here. If Parts II, III, and IV, and line 40 on page 2						on				
	Schedule 1 (Form 1040), line 5. Otherwise, includ	e this amour	nt in the to	tal on li	ne 41	on page 2	. 26		-10,	798.	