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

internal nevertue Service									
Submission Identification Number (SID)									
Taxpayer's name	Social securi	Social security number							
VENKATASNAD GADDAMANUGU	838-21	838-21-3696							
Spouse's name	Spouse's soo	ial security	number						
Death Too Determine the Too Very Finding December 04	o / [t		.:						
	3 (Enter year you a	re autnor	izing.)						
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		11	63.	153.					
2 Total tax		2		159.					
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		705.					
4 Amount you want refunded to you		4		546.					
5 Amount you owe		5							
Part II Taxpayer Declaration and Signature Authorization (Be sure you g	et and keep a cop	y of you	returi	n)					
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in F return (original or amended) I am now authorizing. I consent to allow my intermediate service provide to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reas for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I autho Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution ac payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financia authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancell business days prior to the payment (settlement) date. I also authorize the financial institutions involvates to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or ame Electronic Funds Withdrawal Consent.	er, transmitter, or electron for rejection of the trize the U.S. Treasury a count indicated in the trail institution to debit the terminate the authorization requests must breed in the processing of to the payment. I fur	onic return or ansmission and its design ax preparate entry to the ation. To received the electrosther acknowns	originaton, (b) the gnated F ion software country of the country o	or (ERO) reason inancial ware for int. This ancel) a than 2 ment of that the					
Taxpayer's PIN: check one box only									
	generate my PIN $\frac{1}{2}$	3 6 9		as my					
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	En En	ter five digit n't enter all	s, but	a.c,					
I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN and your return is filed using the Practitioner F below.									
Your signature ▶	Date ▶								
Spouse's PIN: check one box only									
· _	jenerate my PIN			as my					
ERO firm name	·	ter five digit		as my					
signature on the income tax return (original or amended) I am now authorizing.		n't enter all							
I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN and your return is filed using the Practitioner F below.									
Spouse's signature ► [Date ►								
Practitioner PIN Method Returns Only—continu	e below								
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 4 9	6 6 1	9 8	9					
		er all zeros							
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Proventies.	am submitting this reti	ırn in acco	rdanće ν						
ERO's signature ► [Date ►								
ERO Must Retain This Form — See Instruc	tions								
Don't Submit This Form to the IRS Unless Request									

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



£1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		turn	202	3	OMB No. 1545-	-0074	IRS Use Only	∕—Do not v	vrite or sta	aple in this space.
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 20						See separate instructions.						
Your first name and middle initial Last name							Your social security number					
VENKATA:	SNAD		GAD	DAMANU	JGU					838	21	3696
If joint return, s	pouse's	s first name and middle initial	Last r	name						Spouse	's social	l security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				А	pt. no.	Preside	ntial Ele	ection Campaigr
		CREEK DR					1		15			ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	elow.	Sta	te	ZIP co	IP code spouse if filing jointly, to go to this fund. Che			
_IRVING					TX 7			750	75020			not change
Foreign country name			Foreign p	Foreign province/state/county For				n postal code	your ta	x or refu		
Filing Status	s 🗵	Single					Head of ho	ouseho	old (HOH)			
Check only		Married filing jointly (even if only o	ne had	l income)								
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spouse	(QSS)		
	If y	you checked the MFS box, enter the	name	of your s	pouse. If you	ı che	ecked the HOH	or QS	SS box, ente	er the ch	ild's na	me if the
	qu	alifying person is a child but not you	ır depe	endent:								
Digital	At a	ny time during 2023, did you: (a) rec	eive (a	s a rewar								
Assets		nange, or otherwise dispose of a dig									□ Ye	es 🛛 No
Standard	Som	neone 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	l					
Age/Blindnes	s You	: Were born before January 2, 1	959	Are b	lind Sp o	ouse	: Was bor	n befo	re January 2	2, 1959		s blind
Dependent	s (see	instructions):		(2)	Social security	,	(3) Relationshi	ip (4)	Check the b	ox if qual	ifies for ((see instructions):
If more	(1) F	(1) First name Last name			number to you			Child tax cre		Credit fo	or other dependents	
than four												
dependents, see instruction	c											
and check												
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instrud	ctions)					. 18	1	63,153.
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2					. 1t)	
W-2 here. Also	С	Tip income not reported on line 1a	a (see i	nstructior	ns)					. 10	;	
attach Forms W-2G and	d	Medicaid waiver payments not rep	orted	on Form(s) W-2 (see ir	nstru	ictions)			. 10	i	
1099-R if tax	е	Taxable dependent care benefits f			•					. 16	•	
was withheld.	f	Employer-provided adoption bene	m Form 8839, line 29						. 11			
If you did not get a Form	g	Wages from Form 8919, line 6								. 10	j	
W-2, see	h	Other earned income (see instruct	,					· ·		. <u>1</u>	1	0.
instructions. i Nontaxable combat pay election (see instructions)										62 152		
	<u>z</u>	Add lines 1a through 1h	· ·		· · · ·					. 12		63,153.
Attach Sch. B if required.	2a	· –	2a				axable interest			. 2t		
	3a_		3a				ordinary divider					
Standard	4a	-	4a				axable amount					
Deduction for—	5a	-	5a				axable amount					
 Single or Married filing 	6a		b Taxable amount						. 6t)		
separately, \$13,850	C	If you elect to use the lump-sum election method, check here (see instructions) L							╡┞ ၞ			
Married filing						L	- 7 0 0					
jointly or Qualifying	ualifying 0 Add lines 17 2h 3h 4h 5h 6h 7 and 8 This is your total income						. 8		63,153.			
surviving spouse, \$27,700	iving spouse, 9 Add lines 12, 2b, 3b, 4b, 3b, 6b, 7, and 6. This is your total income							03,133.				
 Head of 	Head of lousehold, 210 Subtract line 10 from line 9. This is your adjusted gross income 11 Subtract line 10 from line 9. This is your adjusted gross income 11 Standard deduction or itemized deductions (from Schedule A) 12 Standard deduction or itemized deductions (from Schedule A) 12							62 152				
household, \$20,800									63,153. 13,850.			
If you checked any box under									13,050.			
Standard								13,850.				
Deduction, see instructions. 14 Add lines 12 and 13							49,303.					
					2 y						- 1	, 505.

Form 1040 (2023	3)								Page 2		
Tax and Credits	16	Tax (see instructions). Check if	any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		. 16	6,159.		
	17	Amount from Schedule 2, line					- .	. 17			
	18	Add lines 16 and 17						. 18	6,159.		
	19	Child tax credit or credit for o	ther dependent	ts 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	6,159.		
	23	Other taxes, including self-em	nployment tax,	from Schedule	e 2, line 21			. 23	0.		
	24	Add lines 22 and 23. This is y	our total tax					. 24	6,159.		
Payments	25	Federal income tax withheld f									
	а	Form(s) W-2	5.								
	b	Form(s) 1099				25b					
	С	Other forms (see instructions)				25c					
	d	Add lines 25a through 25c .						. 25d	7,705.		
If you have a	26	2023 estimated tax payments						. 26			
qualifying child,	27	Earned income credit (EIC) .				27					
attach Sch. EIC.	28	Additional child tax credit from			_	28					
	29	American opportunity credit for	rom Form 8863	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 your total other payments and refundable credits									
	33	Add lines 25d, 26, and 32. Th						. 33	7,705.		
Refund	34	If line 33 is more than line 24,	•					. 34	1,546.		
	35a	·							1,546.		
Direct deposit?	b										
See instructions.	d	Account number 4 8 8 1 1 0 0 6 1 9 5 9									
	36	Amount of line 34 you want a	oplied to your	2024 estimate	ed tax	36					
Amount	37	, , , , ,									
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions						. 37			
	38	Estimated tax penalty (see ins	structions) .			38					
Third Party	Do	you want to allow another	person to disc	cuss this retur	n with the IRS?	See					
Designee	ins	tructions				. 🗌 Yes	. Comple	te below.	⋈ No		
		signee's		Phone				entification			
<u></u>	naı	der penalties of perjury, I declare that	at I baya ayamina	no.			umber (Pl		of my lenguage and		
Sign		ief, they are true, correct, and comp							, ,		
Here	Vο	ur signature		Date	Your occupation		Li	the IRS se	nt you an Identity		
	10	ai signature		Date Four occupation				If the IRS sent you an Identity Protection PIN, enter it here			
Joint return?			SOFTWARE EN			ENGINEER (see		see inst.)			
See instructions.	Sp	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupati	on		If the IRS sent your spouse an			
Keep a copy for your records.								Identity Protection PIN, enter it here (see inst.)			
•				Consil address		ANTIGUICANA TI					
		one no.	Preparer's signat	Email address	DEEPU.GADDAMA	ANUGU@GMAIL Date	.COM PTIN		Check if:		
Paid		•			ייייעתיתוות מגו	Date		470833	Self-employed		
Preparer				NKATA SAI PAVAN KUMAR DUDIPALLI							
Use Only				MCMTOK N	J 08816				one no. (678)965-9522		
Co to warm im m		n's address 245 ROONEY		TADMICK INC	00010			Firm's EIN	88-2145487		