## 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

IIIGIIIai	nevertue Setvice							
Subm	ission Identification Number (SID)							
Taxpay	er's name	Social secur	ty numb	er				
DOR	A SAI KUMAR BHATTIPROLU	130-69-2223						
Spouse	's name	Spouse's social security number						
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re aut	thorizing.	)			
	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.			ı				
1	Adjusted gross income		1		,482.			
2	Total tax		2		<u>,815.</u>			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		<u>,565.</u>			
4 5	Amount you want refunded to you		5	3	<u>,750.</u>			
Part	Amount you owe	een a cor		our retu	rn)			
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)							
to send for any Agent payme authori payme busine taxes in person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmed my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected lay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indit of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution zation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ont, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the correceive confidential information necessary to answer inquiries and resolve issues related to the pall identification number (PIN) below is my signature for the income tax return (original or amended) I and the With the With the transfer of the income tax return (original or amended) I are a supplementation.	ection of the t S. Treasury a cated in the t on to debit the the authorizates must b processing of ayment. I fur	ransmis and its c ax prep e entry t ation. T e receive f the ele ther ac	ssion, (b) the designated paration soft to this according to revoke (eved no late ectronic parknowledge	ne reason Financial tware for bunt. This cancel) a er than 2 syment of that the			
	nic Funds Withdrawal Consent.  yer's PIN: check one box only							
  X		my PIN	2 2	2 2 3	as my			
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Er		digits, but r all zeros	asiny			
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.							
Your	signature ▶ Date ▶							
Snous	se's PIN: check one box only							
- Срои	I authorize to enter or generate	my PINI			as my			
_	ERO firm name	_	ter five	digits, but	aomy			
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros				
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.							
Spous	se's signature ▶ Date ▶							
	Practitioner PIN Method Returns Only—continue below							
Part	Certification and Authentication — Practitioner PIN Method Only							
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't en	6 0 ter all ze	8 2 7 eros	1			
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Ir	itting this ret	urn in a	ccordance				
ERO's	s signature ► Date ►							
	ERO Must Retain This Form — See Instructions							
	Don't Submit This Form to the IRS Unless Requested To I	o 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 Servi		urn	20 <b>2</b>	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20		See se	oarate	instructions.
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	curity number
DORA SA	I KU	MAR	BHAT	TIPROI	LU						130	69	2223
If joint return, s	pouse's	s first name and middle initial	Last na	me								•	security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				A	Apt. no.		Preside	ntial Ele	ection Campaign
505 CHA	THAM	AVE						6	514				ou, or your
City, town, or p	oost offi	ice. If you have a foreign address, also co	mplete s	paces belo	w.	Stat	te	ZIP c	ode		•	•	jointly, want \$3 nd. Checking a
ORLANDO						FL	ı	328	01		•		not change
Foreign countr	y name		F	oreign pro	vince/state/o	count	у	Foreig	gn postal c	ode	your tax	or refu	
Filing Status	s 🗵	Single	I				☐ Head of h	ouseh	old (HOI	<del>-</del> 1)			
Check only	L	Married filing jointly (even if only o	ne had ii	ncome)									
one box.	L	Married filing separately (MFS)		_			☐ Qualifying		0 1	,	,		
		you checked the MFS box, enter the			ouse. If you	ı che	cked the HOF	l or Q	SS box,	enter	the chi	ld's na	me if the
	qu	ialifying person is a child but not you	ur aepen	ident:									
Digital		ny time during 2023, did you: (a) rec											
Assets	exch	nange, or otherwise dispose of a dig			ancial intere	est in	a digital asse	et)? (Se	ee instru	ction	s.)	Y	es 🗵 No
Standard		neone can claim:   You as a de	pendent	t $\square$ Y	our spouse	e as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	were a d	ual-status a	alien							
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blin	nd <b>Spo</b>	use:	: Was bor	n befo	ore Janua	ary 2	, 1959		s blind
Dependent	s (see	instructions):		(2) Sc	cial security		(3) Relationsh	ip (4	l) Check t	he bo	x if quali	fies for	(see instructions):
If more		irst name Last name			number		to you		Child t	ax cre	edit	Credit fo	or other dependents
than four													
dependents, see instruction													
and check	- —												
here													
Income	1a	Total amount from Form(s) W-2, b	,		,						1a		54,152.
Attach Form(s)	b	Household employee wages not re	•	,	,						1b		
W-2 here. Also	С	Tip income not reported on line 1a									10		
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d				
1099-R if tax	e	Taxable dependent care benefits f									1e		
was withheld.	f	Employer-provided adoption bene	etits from	1 Form 88	39, line 29	•					1f		
If you did not get a Form	<b>g</b>	Wages from Form 8919, line 6 .				•					1g	- 1	
W-2, see	h	Other earned income (see instruct	,			•		· ·			1h	-	0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		•	<u>1i</u>						5/1 152
AH! 0 : 5		Add lines 1a through 1h	2a		· · · ·	ьт	 axable interest				1z		54,152.
Attach Sch. B if required.	2a 3a	· –	2a 3a				axable interest Irdinary dividel						
·	3a_ 4a		4a				axable amoun						
Standard	5a		5a				axable amoun						
Deduction for— Single or	6a	_	6a				axable amoun				6b		
Married filing	C	If you elect to use the lump-sum e		nethod. c						Ċ	7		
separately, \$13,850	7	Capital gain or (loss). Attach Sche		•		`	,			. Ē	7		
Married filing jointly or	8	Additional income from Schedule									8		-6,670.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7									9		47,482.
\$27,700	10	Adjustments to income from Sche		•							10		-
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is									11		47,482.
\$20,800	12		r itemized deductions (from Schedule A)					12		13,850.			
If you checked any box under	13	Qualified business income deduct					5-A				13		
Standard Deduction,	14	Add lines 12 and 13									14		13,850.
see instructions.	15	Subtract line 1/1 from line 11. If zer	ro or loca	s ontor C	This is w	011r <b>+</b>	avabla incom				15		33 632

Form 1040 (202	3)								Page <b>2</b>		
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 4972	3 🗌		16	3,815.		
Credits	17	Amount from Schedule 2, lin						17			
	18	Add lines 16 and 17						18	3,815.		
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19			
	20	Amount from Schedule 3, lin	e8					20			
	21	·						21			
	22	Subtract line 21 from line 18.						22	3,815.		
	23	Other taxes, including self-er	mployment tax,	from Schedule	e 2, line 21			23	0.		
	24	Add lines 22 and 23. This is			·			24	3,815.		
Payments	25	Federal income tax withheld							,		
,	а	Form(s) W-2				<b>25a</b> 7	,565.				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c						25d	7,565.		
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20	22 return			26			
qualifying child,	27	Earned income credit (EIC)			No	27					
attach Sch. EIC.	28	Additional child tax credit from	n 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	e 15			31					
	32	Add lines 27, 28, 29, and 31.				ındable credits		32			
	33	Add lines 25d, 26, and 32. Tl						33	7,565.		
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amour	nt you <b>overpaid</b>		34	3,750.		
	35a	Amount of line 34 you want	efunded to you	ی. If Form 8888	s is attached, chec	ck here	. 🗆	35a	3,750.		
Direct deposit?	b	Routing number 0 2 1					Savings				
See instructions	d	Account number 3 8 1	0 5 4 1	9 6 6 9	9 2   1						
	36	Amount of line 34 you want a	pplied to your	2024 estimate	ed tax	36					
Amount	37	Subtract line 33 from line 24.	This is the <b>amo</b>	ount you owe.							
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions					37				
	38	Estimated tax penalty (see in	structions) .			38					
Third Party		you want to allow another	•						₩.		
Designee		structions					omplete k		⊠ No		
		signee's me		Phone no.			onal identit ber (PIN)	rication			
Sign		der penalties of perjury, I declare thief, they are true, correct, and com									
Here			piete. Deciaration (		, , , I	ised on all lillornatio			, ,		
	Yo	ur signature					the IRS sent you an Identity rotection PIN, enter it here				
Joint return?			POWER BI DE			DEVELOPER	<b>I</b>	ee inst.)			
See instructions. Keep a copy for		ouse's signature. If a joint return, b	ooth must sign.	Date	Spouse's occupati				nt your spouse an		
your records.								Identity Protection PIN, enter it here (see inst.)			
	Ph	one no. (201) 884-0025	5	Email address	Dorasaidsk	@Gmail.Com					
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:		
Paid	_SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAC	GAR GUPTA	03/27/2024	P02082	2703	Self-employed		
Preparer Use Only	Fin	m's name GLOBAL TAX	KES LLC				Phor	ne no.	eno. (678) 965-9522		
OSE OIIIY	Fin	m's address 245 ROONE	CT E BRU	NSWICK N	J 08816		Firm	's EIN			
Go to www irs o	ov/Forn	n1040 for instructions and the lates	st information		DAA	DEV 02/07/24 DDO			Form <b>1040</b> (2023)		

#### **SCHEDULE 1** (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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. Attachment Sequence No. **01** 

Your social security number

DORA	SAI KUMAR BHATTIPROLU			130-69-2	2223	i	
Par	Additional Income						
1	Taxable refunds, credits, or offsets of state and local income taxes			1			
	Alimony received			<b>2</b> a	1		
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 S	Schedule E	5 . 5		-6 <b>,</b> 670	
6	Farm income or (loss). Attach Schedule F						
7	Unemployment compensation						
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	(	)			
e	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					
i	Activity not engaged in for profit income	8j					
k	Stock options	8k					
- 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)	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	8р					
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					
	Other income. List type and amount:						
	Tatal ather income Add lines On through On	8z					
9	Total other income. Add lines 8a through 8z	<u> </u>		9			
10	Combine lines 1 through 7 and 9. This is your additional income. Ente						
	1040, 1040-SR, or 1040-NR, line 8				)	-6 <b>,</b> 670	

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-basis governr	nent		
	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		9a	
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	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			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses	-		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
_	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
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			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
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 adjustments to income. Enter here and			
	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.

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

DORA	A SAI KUMAR BHATTIPROLU						130-6	9-2223			
Part	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rtv. use		e C. See	instru	ctions. If you	are an indiv	vidual, repo	ort farm		
	Did you make any payments in 2023 that would require you										
В	If "Yes," did you or will you file required Form(s) 1099? .								s No		
1a	Physical address of each property (street, city, state, ZII	IP code	)								
Α	H N:11-5-559/19, ROAD NO 18 NEW VENKATESHWA	ARA CO	DLONY, S	SAROOR	NAGA	R, HYDERAE	BAD, TELA	NGANA I	N 500035		
В											
С											
1b	Type of Property (from list below)  2 For each rental real estate properation above, report the number of fair	rental a	and	Fair Rental Days			Person Da		QJV		
Α	personal use days. Check the Q			Α		365		0			
В	if you meet the requirements to qualified joint venture. See instru			В							
С	quamica joint vontarer ees meas	401101101		С							
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (desc	cribe)				
						Propert	ies:				
ncon	ne:			Α		В			С		
3	Rents received	3		5	80.						
4	Royalties received	4									
Expe	nses:										
5	Advertising	5									
6	Auto and travel (see instructions)	6									
7	Cleaning and maintenance	7		5	80.						
8	Commissions	8									
9	Insurance	9									
10	Legal and other professional fees	10									
11	Management fees	11		1,0	50.						
12	Mortgage interest paid to banks, etc. (see instructions)	12									
13	Other interest	13									
14	Repairs	14			60.						
15	Supplies	15		2,5	00.						
16	Taxes	16									
17	Utilities	17		1,2	60.						
18	Depreciation expense or depletion	18									
19	Other (list)				<b>-</b> 0						
20	Total expenses. Add lines 5 through 19	20		7,2	50.						
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>			-6,6	70.						
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22		6 <b>,</b> 67	0.)	(	)	(			
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		580.				
b	Total of all amounts reported on line 4 for all royalty prop	perties			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		7,250.				
24	Income. Add positive amounts shown on line 21. Do no	t includ	le any lo	sses			. 24				
25	Losses. Add royalty losses from line 21 and rental real estat	te losse	s from lin	ne 22. Er	nter to	tal losses he	re <b>25</b>	(	6,670.		
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 Schedule 1 (Form 1040), line 5. Otherwise, include this a						on 26		-6,670.		