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)

Тахрау	ver's name	Social sect	urity numb	er				
ANU	ISHA KADUDULA	732-1	732-15-2375					
Spouse	s's name	Spouse's s	ocial secu	rity number				
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Ente	r year you	are aut	horizing.)				
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	72,049.				
2	Total tax		2	8,106.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	10,668.				
4	Amount you want refunded to you		4	2,562.				
5	Amount you owe		5					
Dow	Townsyler Declaration and Signature Authorization (Decurre you get and							

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of perjury, 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 7	FAXES		to enter or generate my PIN	Er
				ERO firm name		

5	2	3	7	5	as mv
			gits, all ze		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 of	or generate	my PIN

Enter five digits, but don't enter all zeros

as mv

signature on the income tax return (original or amended) I am now authorizing.

ERO firm name

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 ► D	ate 🖡								
Practitioner PIN Method Returns Only—continue 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	<u> </u>		0 all zer	 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 >			
	Retain This Form — See Form to the IRS Unless		
For Paperwork Reduction Act Notice, see your tax ret	urn instructions.	REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)

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

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545-	-0074	IRS Use On	ly—Do not v	vrite or sta	aple in this space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number
ANUSHA			KAD	UDULA						732	15	2375
lf joint return, s	pouse's	s first name and middle initial	Last r	name						Spouse	's social	l security number
										722	36	7185
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.			ection Campaign
15410 PI	LANT	ATION OAKS DRIVE						6				ou, or your
-		ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode			jointly, want \$3
TAMPA						FI	J	336	47			nd. Checking a not change
Foreign country	y name			Foreign p	rovince/state/	count	ty	Foreig	n postal code			0
											Yo	ou 🗌 Spouse
Filing Status	; [] Single					Head of ho	ouseho	old (HOH)			
Check only] Married filing jointly (even if only or	ne hac	l income)								
one box.	X	Married filing separately (MFS)					Qualifying	surviv	ing spouse	e (QSS)		
	lf y	you checked the MFS box, enter the	name	of your s	pouse. If you	u che	ecked the HOH	or QS	SS box, en	ter the ch	ild's na	me if the
	qu	alifying person is a child but not you	ır depe	endent: _	SANJAN E	BUS	SU					
Digital	Δt ar	ny time during 2023, did you: (a) rece	oivo (a	s a rowar	d award or	navr	ment for proper	tuor	envices): c	r (b) sell		
Digital Assets		hange, or otherwise dispose of a digi	,					•		. ,		es 🛛 No
Standard		neone can claim:					a dependent	.,. (00			<u> </u>	
Deduction	_	Spouse itemizes on a separate return	•		•		•					
Age/Blindnes		: Were born before January 2, 1		Are b		ouse	_	n hefo	re January	2 1959		s blind
Dependent	-		000	$\overline{}$	•			(4)	-			(see instructions):
-	(1) First name Last name		(2) 3	Social security number		(3) Relationshi to you	ip (**	Child tax		1	or other dependents	
lf more than four							,					
dependents,												<u></u>
see instruction	s —											<u> </u>
and check here	1											\square
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	see instruc	ctions) .					. 1a		83,669.
	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .					. 1t)	
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	i (see i	nstructior	ns)					. 10	;	
attach Forms	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see ii	nstru	ictions)			. 10	I	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom F	orm 2441	, line 26					. 1e		
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8	839, line 29					. 11	:	
If you did not	g	Wages from Form 8919, line 6								. 10	1	
get a Form W-2, see	h	Other earned income (see instructi	ions)							. 1ŀ	1	0.
instructions.	i	Nontaxable combat pay election (s					1 i					
	z	Add lines 1a through 1h								. 1z	:	83,669.
Attach Sch. B	2a	Tax-exempt interest	2a			bΤ	axable interest			. 2t		1.
if required.	3a	Qualified dividends	3a			b C	Ordinary divider	nds .		. 3b		0.
	4a	IRA distributions	4a			bΤ	axable amount	t		. 4t		
Standard Deduction for –	5a	Pensions and annuities	5a			bΤ	axable amount	t		. 5b		
 Single or 	6a	Social security benefits	6a			bΤ	axable amount	t		. 6b		
Married filing separately,	С	If you elect to use the lump-sum e	lectior	n method,	check here	(see	instructions)					
\$13,850 • Married filing	7	Capital gain or (loss). Attach Schee									_	
jointly or	8	Additional income from Schedule	1, line	10						. 8		-11,621.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-	our total inc	come	e			. 9	_	72,049.
\$27,700 • Head of	10	Adjustments to income from Sche	dule 1	, line 26						. 10		
household,	11	Subtract line 10 from line 9. This is	s your	adjusted	gross incor	ne				. 11		72,049.
 \$20,800 If you checked 1 	12	Standard deduction or itemized	deduc	ctions (fro	m Schedule	A)				. 12	!	13,850.
any box under Standard	13	Qualified business income deduction	ion fro	m Form 8	995 or Form	899	5-A			. 13		
Deduction,	14									. 14	-	13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	ourt	taxable incom	е.		. 15	j	58,199.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	5)								Page 2
Tax and	16	Tax (see instructions). Check in	f any from Form	(s): 1 🗌 881	4 2 4972	3		16	8,106.
Credits	17	Amount from Schedule 2, line						17	
	18	Add lines 16 and 17						18	8,106.
	19	Child tax credit or credit for o	ther dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, line						20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18.	If zero or less, e	enter -0				22	8,106.
	23	Other taxes, including self-en	nployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is y						24	8,106.
Payments	25	Federal income tax withheld t							
· · · ,	а	Form(s) W-2				25a 10),668.		
	b	Form(s) 1099				25b		-	
	с	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c						25d	10,668.
If you have a	26	2023 estimated tax payments						26	
If you have a L qualifying child,	27	Earned income credit (EIC) .				27		-	
attach Sch. EIC.	28	Additional child tax credit from				28		1	
	29	American opportunity credit f				29		-	
	30	Reserved for future use				30			
	31	Amount from Schedule 3. line				31		-	
	32	Add lines 27, 28, 29, and 31.				-		32	
	33	Add lines 25d, 26, and 32. Th		-	-			33	10,668.
Refund	34	If line 33 is more than line 24,						34	2,562.
neiuna	35a	Amount of line 34 you want r						35a	2,562.
Direct deposit?	b	Routing number 0 7 2				Checking	Savings		,
See instructions.	ď		8 7 7 5				ouvingo		
	36	Amount of line 34 you want a			d tax	36			
Amount	37								
You Owe	31	Subtract line 33 from line 24. For details on how to pay, go						37	
	38	Estimated tax penalty (see ins	-	-		38		07	
Third Party		you want to allow another							
Designee		structions					omplete k	below.	× No
Designee	De	signee's		Phone			sonal identi		
	nar			no.		num	ber (PIN)		
Sign		der penalties of perjury, I declare that							
Here	bel	ief, they are true, correct, and comp	lete. Declaration o	of preparer (other			ion of which	n prepar	er has any knowledge.
	Yo	ur signature		Date	Your occupation				nt you an Identity
laint wat wa 0					CIVIL ENG	TNEED		tection PIN, enter it here e inst.)	
Joint return? See instructions.	Sn	ouse's signature. If a joint return, be	oth must sign	Date	Spouse's occupa			,	nt your spouse an
Keep a copy for	op			Duto					ection PIN, enter it here
your records.							(see	inst.)	
	Ph	one no. (419) 450-9946		Email address	ANUSHA4RW	@GMAIL.COM			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	a ram sac	GAR GUPTA	03/19/2024	P0208	2703	Self-employed
Preparer	Firi	m's name GLOBAL TAX	ES LLC				Phor	ne no. ((678)965-9522
Use Only	Firi	m's address 245 ROONEY	CT E BRU	NSWICK N	J 08816		Firm	's EIN	
Go to www.irs.go	v/Forn	n1040 for instructions and the lates	t information.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

SCHE	DULE	1
(Form	1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 2023

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soci	al security number
ANUSHA KADUDUL	A	732-15	-2375
Dort L Additie	anal Income		

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. Att	ach Schedule E .	5	-11,621.
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		
I	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 (<u>)</u>	
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:			
•	Tatal ather income. Add lines 0s through 0s	8z		
9	Total other income. Add lines 8a through 8z.		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente 1040, 1040-SR, or 1040-NR, line 8		10	-11,621.
For Po	perwork Reduction Act Notice, see your tax return instructions.		-	le 1 (Form 1040) 2023
. vi r a	portron novaolion not noviou, see your las return instructions.		Julean	ie i (Form 1040) 2023

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b			-
	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		4a	_	
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit	4b	_	
С	Nontaxable amount of the value of Olympic and Paralympic medals	_		
		4c		
d	Reforestation amortization and expenses	1d	_	
е	Repayment of supplemental unemployment benefits under the Trade			
		4e	-	
f		4f	-	
g	, , , , , , , , , , , , , , , , , , , ,	4g	-	
h	Attorney fees and court costs for actions involving certain unlawful	41-		
	discrimination claims (see instructions)	+n	-	
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			
		4i		
:		4j	-	
J V	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	+j	-	
n	1041)	16		
7			-	
2		4z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . E			_
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
			Schedule 1 (Form 1040) 202	23

SCHEDULE E	
(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						

Name(s	shown on return						Your socia	l security r	numbe	r	
ANUS	NUSHA KADUDULA							732-15-2375			
Par				• • • • •							
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use	Schedul	e C. See	Instru	ctions. If you a	are an indiv	iduai, repo	ort tarr	n	
Α	Did you make any payments in 2023 that would require you	to file	Form(s)	1099? S	see ins	structions .		. 🗌 Ye	s 🛛	No	
В	If "Yes," did you or will you file required Form(s) 1099?						🗌 Yes 🗌 No				
1a	Physical address of each property (street, city, state, Zll	P code	e)								
Α	CHILAKA NAGAR, UPPAL HYDERABAD TELANGAN	NA II	N 5000	39							
В											
С											
1b	vpe of Property om list below) 2 For each rental real estate property listed above, report the number of fair rental and				Fa	ir Rental Days	Persona	QJV			
Α	3 personal use days. Check the Q			Α		325		0			
B	if you meet the requirements to			B		020		Ű			
C	qualified joint venture. See instru	uctions	5.	C							
-	of Property:			•							
	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Lan	d	7	Self-Rental					
	Multi-Family Residence 4 Commercial		6 Roy	•			ribe)				
							cribe)				
				-		Propert	ies:				
ncon				Α		В			С		
3		3		9	50.						
4	Royalties received	4									
	nses:	-									
5		5 6									
6	Auto and travel (see instructions)	7		1,0	65						
7	Cleaning and maintenance	-		1,0	65.						
8	Commissions	8									
9		9									
10 11	Legal and other professional fees	10		1,1	20						
12	Mortgage interest paid to banks, etc. (see instructions)	12		⊥,⊥	20.						
12	Other interest	13									
14	Repairs	14		2.8	65						
15		15		2,865.							
16		16		270							
17		17		2,4	55.						
18	Depreciation expense or depletion	18		2,5							
19	Other (list)	10		1 -							
20	Total expenses. Add lines 5 through 19	20		12,571.							
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 Form 6198	21		-11,6	21.						
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(11,62		()	
23a	Total of all amounts reported on line 3 for all rental prope				23a	\	950.)	
b	Total of all amounts reported on line 4 for all royalty prop				23b						
c	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	2	2,500.				
e	Total of all amounts reported on line 20 for all properties				23e		2,571.				
24	Income. Add positive amounts shown on line 21. Do no										
25	Losses. Add royalty losses from line 21 and rental real estat				nter to			1	1,6	21.)	
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										

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

-11,621.

26

	1562		Depreciatio	on and A	mortizati	on	(OMB No. 1545-0172		
Form 4562 Depreciation and Amortization (Including Information on Listed Property)						2023				
	Department of the Treasury							Attachment		
	Internal Revenue Service Go to www.irs.gov/Form4562 for instructions and the latest information. Name(s) shown on return Business or activity to which this form relates						Sequence No. 179			
	Name(s) shown on return Business or activity to which this form relates ANUSHA KADUDULA Sch E CHILAKA NAGAR, UPPAL							2-15-2375		
Ра		10 10/0								
			ertain Property Unc ed property, comple			mplete Part I.				
1	1	1,160,000.								
2	Total cost of secti	ion 179 property	placed in service (see	e instructions			2			
3	Threshold cost of	3	2,890,000.							
4	4									
5	Dollar limitation f	_								
	separately, see in		<u></u>				5			
6	(a)	Description of prope	rty	(b) Cost (busi	ness use only)	(c) Elected cost		-		
								-		
7	Listed property F	nter the amount	from line 29		7			-		
8			property. Add amount			7	8			
9			naller of line 5 or line 8				9			
10			n from line 13 of your :				10			
11	Business income li	mitation. Enter th	e smaller of business ir	ncome (not les	ss than zero) o	r line 5. See instructions	11			
12	Section 179 experi	nse deduction.	Add lines 9 and 10, bu	t don't enter	more than lin	e <u>11</u>	12			
13	Carryover of disal	lowed deduction	n to 2024. Add lines 9	and 10, less	line 12 .	13				
			v for listed property. In							
						nclude listed property	<u>. See</u>	instructions.)		
14	• •			•	• •	rty) placed in service				
45	during the tax yea						14			
	Other depreciation		(1) election				15 16			
Par)on't include listed j			 NS)	10			
i ai				Section A		10.1/				
17	MACRS deduction	ns for assets pla	ced in service in tax y		ng before 202	3	17			
18		•	,	•	•	o one or more general				
	asset accounts, c	heck here .				🗌				
	Section			g 2023 Tax Y	ear Using the	e General Depreciation	ı Syst	em		
(a)	Classification of property	(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery	(e) Conventio	n (f) Method	(a) [Depreciation deduction		
	-	service	only-see instructions)	period	(0)	()				
19a										
b							+			
	7-year property						+			
	15-year property									
	f 20-year property									
	25-year property			25 yrs.		S/L	-			
	Residential rental	07/23	150,000.	27.5 yrs.	MM	S/L	1	2,500.		
	property			27.5 yrs.	MM	S/L		_,		
	i Nonresidential re	al		39 yrs.	MM	S/L				
	property				MM	S/L				
	1	-Assets Place	ed in Service During	2023 Tax Ye	ar Using the	Alternative Depreciation	on Sy	stem		
	Class life					S/L				
	12-year			12 yrs.		S/L	<u> </u>			
	30-year			30 yrs.	MM	S/L	<u> </u>			
-	40-year			40 yrs.	MM	S/L				
	Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28									
					20 in onlymm	(a) and line 21 Enter	21			
22			of your return. Partne			(g), and line 21. Enter	22	2,500.		
23			ced in service during t	•	•					
		•	section 263A costs .			23				

For Paperwork Reduction Act Notice, see separate instructions.