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

Subm	nission Identification Number (SID)					
Taxpay	yer's name	Social securit	y number			
LAK	538-93-	-6635				
Spouse	Spouse's name Spouse's social					
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r year you a	re author	rizing.)		
	whole dollars only on lines 1 through 5.	, ,		<u> </u>		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	66,501		
2	Total tax		2	6 , 896		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	10,804		
4	Amount you want refunded to you		4	3,908		
5	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of you	r return)		
return to sen for an Agent payme author payme busine taxes persor	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I about (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmind my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudely 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 indent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution rization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation request days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I applied to the payment (PIN) below is my signature for the income tax return (original or amended) I applied to the payment (PIN) below is my signature for the income tax return (original or amended) I applied to the payment (PIN) below is my signature for the income tax return (original or amended) I applied to the payment (PIN) below is my signature for the income tax return (original or amended) I applied to the payment (PIN) below is my signature for the income tax return (original or amended) I applied to the payment (PIN) below is my signature for the income tax return (original or amended) I applied to the payment (PIN) t	itter, or electro- ection of the tr. S. Treasury are icated in the ta- on to debit the the authoriza- uests must be processing of payment. I furt	onic return cansmission d its design x preparate entry to the stion. To re received the electro her ackno	originator (ERG), (b) the reason and		
	ayer's PIN: check one box only					
	▼ I authorize GLOBAL TAXES LLC to enter or generate	my PIN 3	6 6 3	3 5 as m		
٠	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digit n't enter all	s, but		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Your	signature ▶ Date ▶					
Casu	one's DINL shook and have anly					
Spou	se's PIN: check one box only I authorize to enter or generate	my DINI				
L	I authorize to enter or generate to enter or generate		er five diait	as m		
	signature on the income tax return (original or amended) I am now authorizing.		i't enter all			
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Spou	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part	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		6 0 8 er all zeros	2 7 1		
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income to rized 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 Pub. 1345, Handbook for Authorized IRS e-file Providers of In	itting this retu	rn in acco	rdance with th		
EDO'	s signature ▶ Date ▶					
ENU	s signature ► Date ► ERO Must Retain This Form — See Instructions					
	Lito must liciali illis i villi — dec ilisti uctiviis					

Don't Submit This Form to the IRS Unless Requested To Do So

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



1040		artment of the Treasury—Internal Revenue Serv		ırn 20	023	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		, 20	23, ending		,	20	S	ee sep	oarate	instructions.
Your first name	and m	iddle initial	Last nan	ne					Y	our so	cial sec	curity number
LAKSHMI	VEN	KATA DURG	VEMU	LAPALLI						538	93	6635
If joint return, s	pouse's	s first name and middle initial	Last nan	ne					s	pouse'	s social	security number
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ns.			Ap	t. no.	P	reside	itial Ele	ection Campaign
9105 DI	CKEY	DR MECHANICSVILLE										ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete sp	aces below.	Sta	ate	ZIP co	de				jointly, want \$3 nd. Checking a
MECHANI (CSVI	LLE			V	P	2311	. 6	- 1	•		not change
Foreign countr	y name		F	oreign province	e/state/coun	ty	Foreign	postal co	ode y	our tax	or refu	
Filing Status	s X	Single				☐ Head of ho	useho	ld (HOH)			
Check only		Married filing jointly (even if only o	ne had in	icome)				`	,			
one box.		Married filing separately (MFS)		,		Qualifying	survivii	ng spou	se (Q	SS)		
	If y	you checked the MFS box, enter the	name of	your spouse	. If you che	ecked the HOH	or QS	S box, e	enter t	he chi	ld's na	me if the
	qu	alifying person is a child but not you	ur depend	dent:								
Digital	At a	ny time during 2023, did you: (a) rec	eive (as a	reward, awa	ırd. or pavı	ment for proper	tv or s	ervices):	or (b) sell.		
Assets		nange, or otherwise dispose of a dig									□ Ye	es 🗵 No
Standard	Som	neone can claim:	pendent	Your	spouse as	a dependent				-		
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-s	tatus alier	1						
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind	Spouse	: Was born	n befor	e Janua	rv 2	1959		s blind
Dependent					•	(3) Relationshi	(4)					(see instructions):
-		(2) Social security (3) Relationship (4) Child tax on the first name Last name number to you Child tax on								or other dependents		
If more than four												
dependents,	_											
see instruction and check	s —											
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	instructions)						1a		76 , 502.
Attach Form(s)	b	Household employee wages not re	eported o	on Form(s) W-	-2					1b		
W-2 here. Also	С	Tip income not reported on line 1a	•							1c		
attach Forms W-2G and	d	Medicaid waiver payments not rep				uctions)				1d		
1099-R if tax	е	Taxable dependent care benefits								1e		
was withheld.	f	Employer-provided adoption bene	efits from	Form 8839, li	ine 29 .					1f		
If you did not get a Form	g	Wages from Form 8919, line 6 .								1g		
W-2, see	h	Other earned income (see instruct	•				i .			1h		0.
instructions.	i	Nontaxable combat pay election (see instri	uctions)		<u>1i</u>				-		76 502
A# C 5	<u>z</u>	Add lines 1a through 1h	20		 L	axable interest				1z		76,502.
Attach Sch. B if required.	2a		2a							2b 3b		
	<u>3a</u> 4a		3a 4a			Ordinary dividen axable amount				3b 4b		
Standard	4 а 5а		ч а 5а			axable amount				5b		
Deduction for— Single or	6a	_	6a			axable amount				6b		
Married filing	C	If you elect to use the lump-sum e		nethod, check					. 🗀	0.0		
separately, \$13,850	7	Capital gain or (loss). Attach Sche		•	`	,			. 🗇	7		
Married filing jointly or	8	Additional income from Schedule		•	•					8		-10,001.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	•							9		66,501.
surviving spouse, \$27,700	10	Adjustments to income from Sche		-						10		
 Head of household, 	11	Subtract line 10 from line 9. This is								11	_	66,501.
\$20,800	12	Standard deduction or itemized	•	-						12		13,850.
If you checked any box under	13	Qualified business income deduct				95-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 loce	ontor O Th	io io vour	tavabla incom	^			15		52 651

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	6,896.	
Credits	17	Amount from Schedule 2, lir	те 3				[17		
	18	Add lines 16 and 17					[18	6,896.	
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812		[19		
	20	Amount from Schedule 3, lir	ne 8				[20		
	21	Add lines 19 and 20					[21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	6,896.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		[23	0.	
	24	Add lines 22 and 23. This is	your total tax				[24	6,896.	
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25a 10	,804.			
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	10,804.	
If you have a	26	2023 estimated tax paymen	ts 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	m 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, lir	ne 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	10,804.	
Refund	34	If line 33 is more than line 24						34	3,908.	
	35a	Amount of line 34 you want	refunded to you	ی. If Form 8888	s is attached, che	ck here	. 🗆 [35a	3,908.	
Direct deposit?	b	Routing number 0 4 4	0 0 0 0	3 7	c Type:	Checking	Savings			
See instructions.	d	Account number 9 0 8	3 6 1 2	1 2			-			
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the am o	ount vou owe.						
You Owe		For details on how to pay, g						37		
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party	Do	you want to allow another				? See				
Designee		structions				🗌 Yes. Co	omplete be	low.	⋈ No	
_		signee's		Phone			onal identific	ation		
	naı			no.			per (PIN)		.f	
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com								
Here								•	t you an Identity	
	10								N, enter it here	
Joint return?				SOFTWARE	ENGINEER	(see in				
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupa	tion		f the IRS sent your spouse an		
Keep a copy for your records.								•	ction PIN, enter it here	
your rooordo.							(see in	St.)		
		one no.	I	Email address	PRASANTH.VLV	D.USA@GMAIL.CO			01 1 15	
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:	
Preparer	SYA	M PRIYA RAM SAGAR GUPTA		A RAM SAC	GAR GUPTA	04/03/2024	P02082		Self-employed	
Use Only								none no. (678) 965-9522		
			Y CT E BRU	NSWICK N	J 08816		Firm's	EIN		
Go to www.irs.g	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/07/24 PRO			Form 1040 (2023)	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Your social security number

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.

LAKS	LAKSHMI VENKATA DURG VEMULAPALLI 538-9						
Par	t I 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. Attach Schedu	ule E .	5	-10,001.			
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 8g						
h	Jury duty pay						
i	Prizes and awards						
j	Activity not engaged in for profit income						
k	Stock options						
ı	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 8I						
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)						
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		4				
t	Pension or annuity from a nonqualifed deferred compensation plan or						
	a nongovernmental section 457 plan						
u	Wages earned while incarcerated						
Z	Other income. List type and amount:						
0	Tatal athor in agence. Add lines On the sound On						
9	Total other income. Add lines 8a through 8z		9				
10	Combine lines 1 through 7 and 9. This is your additional income. Enter here and	on Form					

10

-10,001.

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.

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

Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name	ne(s) shown on return							Your social security number			
LAK	SHMI VENKATA DURG VEMULAPALLI						538-9	3-6635			
Pa	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.			e C . See	e instruc	ctions. If you	are an indi	vidual, rep	oort farm		
A B	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions										
1a								<u></u>			
A	2-111, GEETHA MANDHIR STRET PASIVEDALA,		·	AST G	ODAVA	ART, ANDE	HRA PRA	DESH T	N 534342		
В									1, 001012		
С											
1b	(from list below) above, report the number of fair	rental and			Fa	ir Rental Days	Persor Da	QJV			
Α	g personal use days. Check the Q			Α		365		0			
В	if you meet the requirements to find a qualified joint venture. See instru			В							
C	qualified joint venture. See instite	iotioi i	J.	С							
	of Property:		5 1		-	0 1(D					
	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tai	5 Land 6 Roya		-	Self-Rental Other (desc	ribe)				
						Propert	ies:				
Inco	me:			Α		В			С		
3	Rents received	3		4	80.						
4	Royalties received	4									
Expe	enses:										
5	Advertising	5									
6	Auto and travel (see instructions)	6									
7	Cleaning and maintenance	7		8	89.						
8	Commissions	8									
9	Insurance	9									
10	Legal and other professional fees	10									
11	Management fees	11		2,1	14.						
12	Mortgage interest paid to banks, etc. (see instructions)	12									
13	Other interest	13									
14	Repairs	14			17.						
15	Supplies	15		3,5	18.						
16	Taxes	16		1 0	112						
17 18	Utilities	17 18		⊥, 8	43.						
19	Other (list)	19									
20	Total expenses. Add lines 5 through 19	20		10,4	Q 1						
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	20		10,1	01.						
21	result is a (loss), see instructions to find out if you must file Form 6198	21		-10,0	01						
22	Deductible rental real estate loss after limitation, if any,	-1									
	on Form 8582 (see instructions)	22	(10,00	01.)	()	()		
23a		rties			23a		480.				
b					23b						
С	Total of all amounts reported on line 12 for all properties				23c						
d					23d						
е	' ' '				23e	10	7,481.				
24	Income. Add positive amounts shown on line 21. Do not		-				. 24				
25	Losses. Add royalty losses from line 21 and rental real estat							(10,001.)		
26	Total rental real estate and royalty income or (loss).	Comb	oine lines	24 and	25. E	nter the res	ult				

here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

26

-10,001.