## 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 Revenue Service Control of the latest information.			
Submission Identification Number (SID)			
Taxpayer's name	Social security	number	
LAL KRISHNA NAYUDU	443-87-	8722	
Spouse's name		Il security number	
Part I Tax Return Information — Tax Year Ending December 31, 2023 (E	nter year you are	e authorizing.)	
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		<b>1</b> 78,17	71.
2 Total tax		2 9,45	59.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	_	3 11,28	30.
4 Amount you want refunded to you		4 1,82	21.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a	nd keep a copy	of your return)	
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tra to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent.	r rejection of the tra ne U.S. Treasury and t indicated in the tax itution to debit the e inate the authorizat requests must be the processing of the payment. I furth	nsmission, (b) the red its designated Final preparation software thry to this account. In Torevoke (cancreceived no later the electronic paymeer acknowledge that	ason ancial re for This cel) a lan 2 ent of at the
Taxpayer's PIN: check one box only	7	8 7 2 2	
X I authorize GLOBAL TAXES LLC to enter or gener	ate mv PIN   └──┴	as	my
<b>ERO firm name</b> signature on the income tax return (original or amended) I am now authorizing.		r five digits, but t enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.			
Your signature ▶ Date	<b>&gt;</b>		
Spouse's PIN: check one box only			
	rata may DINI		
I authorize to enter or gener	-		my
signature on the income tax return (original or amended) I am now authorizing.		r five digits, but t enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.			
Spouse's signature ▶ Date	_		
Spouse's signature ► Date    Practitioner PIN Method Returns Only—continue be			
Part III Certification and Authentication — Practitioner PIN Method Only	10 44		—
			$\top$
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 2 4 9 6  Don't enter	1 - 1 - 1 - 1 -	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incompation authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am strequirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers	submitting this return	n in accordance with	now 1 the
ERO's signature ▶ Date			
ERO Must Retain This Form — See Instructions			—

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

20**23** OMB No. 1545-0074

						01112 1101 10 10	00.1	0, 50		to or otapio iii tino opacor		
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20	Se	e sep	arate instructions.		
Your first name and middle initial Last name						Yo	Your social security number					
LAL KRISHNA NAYUDU							4	43	87   8722			
If joint return, spouse's first name and middle initial			Last na						Spouse's social security numb			
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.			Apt. no.	Pre	esiden	tial Election Campaign		
2632 BEACON HILL DRIVE								ere if you, or your				
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete spaces below. State ZIP of			ZIP code		spouse if filing jointly, want \$3 to go to this fund. Checking a				
Auburn H	Hills	S		MI 4832			48326			w will not change		
Foreign country	y name			Foreign province/state/county Foreign posta		Foreign postal c	ode you	de your tax or refund.				
										You Spouse		
Filing Status	s 🗵	Single			Į	Head of he	ousehold (HOF	l)				
Check only	L	Married filing jointly (even if only or	ne had	income)		_						
one box.		Married filing separately (MFS)			ļ		surviving spou					
		you checked the MFS box, enter the			u che	cked the HOF	l or QSS box, o	enter th	e chile	d's name if the		
	qu	alifying person is a child but not you	ır depe	ndent:								
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	paym	ent for prope	rty or services)	; or (b)	sell,			
Assets	exch	nange, or otherwise dispose of a digi	ital asse	et (or a financial intere	est in	a digital asse	et)? (See instruc	ctions.)		☐ Yes ☒ No		
Standard	Som	neone can claim:   You as a de	pender	t Your spouse	e as a	a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	u were a dual-status	alien							
Age/Blindnes	s You:	: Were born before January 2, 19	959 [	Are blind Spo	ouse:	☐ Was bor	n before Janua	ary 2, 19	959	☐ Is blind		
Dependent				(2) Social security	,	(3) Relationsh	(A) Chook th			ies for (see instructions):		
If more		irst name Last name		number		to you		ax credit		Credit for other dependents		
than four							[					
dependents,												
see instruction and check	s						[					
here	]											
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	ee instructions)					1a	86,721.		
Attach Form(s)	b	Household employee wages not re	eported	on Form(s) W-2					1b			
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							1c			
attach Forms W-2G and	d	Medicaid waiver payments not rep	orted c	on Form(s) W-2 (see in	nstrud	ctions)			1d			
1099-R if tax	е	Taxable dependent care benefits f	rom Fo	rm 2441, line 26					1e			
was withheld.	f	Employer-provided adoption bene	fits fror	n Form 8839, line 29					1f			
If you did not get a Form	g								1g			
W-2, see	h	Other earned income (see instructi	,						1h	0.		
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		<u>1i</u>			_	06 701		
	z	Add lines 1a through 1h	 . i						1z	86,721.		
Attach Sch. B if required.	2a	'	2a			axable interest			2b			
	3a		3a			rdinary divide			3b			
Standard	4a		4a			axable amoun			4b			
Deduction for—	5a		5a			axable amoun axable amoun			5b			
Single or Married filing	6a	Social security benefits	6a	mothed shock here					6b			
separately, \$13,850	С 7	Capital gain or (loss). Attach Sched		•	,	,		. 📙	7			
Married filing	8	Additional income from Schedule						. Ш	8	-8,550.		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							9	78,171.		
surviving spouse, \$27,700	10	Add lines 12, 25, 35, 45, 35, 65, 7, Adjustments to income from Schel		=					10	, , , , , , , , ,		
Head of household,	11	Subtract line 10 from line 9. This is							11	78,171.		
\$20,800	12	Standard deduction or itemized	-	-					12	13,850.		
If you checked any box under	13	Qualified business income deducti				5-A			13	13,000.		
Standard Deduction,	14	Add lines 12 and 13							14	13,850.		
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter -0 This is y	our <b>t</b> a	axable incom	ie		15	64,321.		

Form 1040 (2023	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	9,459.		
Credits	17	Amount from Schedule 2, line 3				. 17			
	18	Add lines 16 and 17				. 18	9,459.		
	19	Child tax credit or credit for other 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	9,459.		
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21		. 23	0.		
	24	Add lines 22 and 23. This is your total tax				. 24	9,459.		
Payments	25	Federal income tax withheld from:							
	а	Form(s) W-2			<b>25a</b> 11,2	80.			
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c				. 25	d 11,280.		
If you have a	26	2023 estimated tax payments and amount a	pplied from 20	22 return		. 26	<b>i</b>		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)		No .	27				
attacii Scii. Lic.	28	Additional child tax credit from 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, line 15			31				
	32	Add lines 27, 28, 29, and 31. These are your	. 32						
	33	Add lines 25d, 26, and 32. These are your to	tal payments			. 33	<u> </u>		
Refund	34	If line 33 is more than line 24, subtract line 2	. 34	<u> </u>					
	35a	Amount of line 34 you want refunded to you	35	1,821.					
Direct deposit?	b	Routing number 0 1 1 9 0 0 2			Checking	ngs			
See instructions.	d	Account number 3 8 5 0 2 3 0	7 6 5 8	3 7					
	36	Amount of line 34 you want applied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24. This is the <b>amo</b> For details on how to pay, go to <i>www.irs.go</i> .	•			. 37	,		
	38	Estimated tax penalty (see instructions) .			38				
Third Party Designee		you want to allow another person to disc structions				lete belov	v. 🗵 No		
	De nar	signee's me	Phone no.		Personal number (F	identificatio PIN)	on		
Sign Here		der penalties of perjury, I declare that I have examined lief, they are true, correct, and complete. Declaration of					,		
11010	Yo	Protecti				Protection	IRS sent you an Identity ection PIN, enter it here		
Joint return?			5.	ENGINEER		(see inst.)			
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation	on		sent your spouse an otection PIN, enter it here		

Phone no. (203) 500-5846 Email address LALKRSHN05@GMAIL.COM Preparer's name Preparer's signature Date PTIN Check if: **Paid** 01/11/2024 Self-employed SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM P02082703 **Preparer** Phone no. (678) 965-9522 GLOBAL TAXES LLC Firm's name **Use Only** 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's address Firm's EIN

your records.

BAA

84-3171965

(see inst.)

### 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.

LAL	KRISHNA NAYUDU		443-87-	-8722	
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes			1	0.
2a	Alimony received		2	a	
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	-8,550.
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			
i	Activity not engaged in for profit income	8j			
k		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	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 (	)		
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:				
_		8z			
9	Total other income. Add lines 8a through 8z			9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente	r here and on	Form		

1040, 1040-SR, or 1040-NR, line 8 . . . . . .

-8**,**550.

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 govern	ment		
	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	<u> </u>	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	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l 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			
h	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 <b>adjustments to income</b> . Enter here are			
	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.)

OMB No. 1545-0074

Department of the Treasury

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

Attachment Sequence No. 13

Internal Revenue Service Go to www.irs.gov/ScheduleE for instructions and the latest information. Name(s) shown on return Your social security number 443-87-8722 TAL KRISHNA NAYUDU

עעע	MINISHNA NATODO							1440	01 0122	-	
Part	Income or Loss From Rental F Note: If you are in the business of rentir rental income or loss from Form 4835 o	g personal property			C. See	instru	ctions. If you a	are an in	dividual, rep	oort fai	m
<b>A</b> [			o filo	Farm(a) 1(	2002 C	`aa ina	tw.otiono			V	T NI a
	Did you make any payments in 2023 that w										
	f "Yes," did you or will you file required Fo								. <u> </u>	es _	No
1a	Physical address of each property (stree			·							
Α	BALAJI NAGAR MANGALAGIRI, GU	NTUR ANDHRA	A PF	RADESH	IN 52	2200	2				
В											
С											
1b	(from list below) above, report the	above, report the number of fair rental and Days					Personal Use Days			QJV	
Α		s. Check the QJ			Α		210		0		
В		equirements to filenture. See instruc			В						
С	quaimed joint ve	ntare. Occ matrac	TIONS	·.	С						
1	of Property: Single Family Residence 3 Vacation/ Multi-Family Residence 4 Commerce	Short-Term Renta ial	al	5 Land 6 Royal	ties		Self-Rental Other (desc				
							Properti	ies:			
ncon		-			Α		В			С	
3	Rents received		3		4	10.					
4	Royalties received		4								
	nses:										
5	Advertising		5								
6	Auto and travel (see instructions)	-	6								
7	Cleaning and maintenance		7		8	20.					
8	Commissions		8								
9	Insurance		9								
10	Legal and other professional fees		10								
11	Management fees		11		9	10.					
12	Mortgage interest paid to banks, etc. (see	e instructions)	12								
13	Other interest		13								
14	Repairs		14			20.					
15	Supplies		15		2,6	10.					
16	Taxes		16								
17	Utilities		17		1,9	00.					
18	Depreciation expense or depletion		18								
19	Other (list)		19								
20	Total expenses. Add lines 5 through 19		20		8,9	60.					
21	Subtract line 20 from line 3 (rents) and/or	· 4 (royalties). If									
	result is a (loss), see instructions to find										
	file <b>Form 6198</b>		21		<b>-8,</b> 5	50.					
22	Deductible rental real estate loss after lir on <b>Form 8582</b> (see instructions)	' ''	22	(	8,55	50.)	(		)(		
23a	Total of all amounts reported on line 3 fo	r all rental proper	ties			23a		410.			
b	Total of all amounts reported on line 4 fo					23b					
С	Total of all amounts reported on line 12 f					23c					
d	Total of all amounts reported on line 18 f					23d					
е	Total of all amounts reported on line 20 f					23e	8	960.			
24	Income. Add positive amounts shown or							. 24			
25	Losses. Add royalty losses from line 21 and			-		nter to	tal losses her		_	8,5	550.
26	Total rental real estate and royalty inc										
-	here. If Parts II, III, and IV, and line 40 o										
	Schedule 1 (Form 1040), line 5, Otherwis							. 26		-8	550