Form 8879
(Rev. January 2021)
Department of the Treesure

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)

Taxpay	ver's name	Social	I securit	y numb	er
VEN	IKATA SAI JYOTHISH ATLURI	85	4-40-	-1436	5
Spouse	's name	Spous	se's soci	ial secu	rity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	r year	you a	re 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	107,991.
2	Total tax			2	16,015.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	16,348.
4	Amount you want refunded to you			4	333.
5	Amount you owe			5	
Par	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a	a copy	y of y	our return)

Under penalties of periury. 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

				FBO firm name	0 ,	Ēr
X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	

0	1	4	3	6	
Ent don	er fiv i't er	ve di Iter a	gits, all ze	but ros	as my

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	or	generate	my	PIN

as mv Enter five digits, but

don't enter all zeros

ERO firm name 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.

Spouse's s	ignature D	ate 🖡					 		
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III	Certification and Authentication – Practitioner PIN Method Only								
ERO's EFII	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2	 	 0 all zei	 2	7 1	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 >		Date 🕨	
_	lust Retain This Form — See Instru This Form to the IRS Unless Reque		
For Denerwork Reduction Act Nation and your to		V 01/27/24 BBO	Earm 8879 (Pov. 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 01/27/24 PRO

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use Only	∕−Do not w	rite or sta	aple in this space.
For the year Jan	. 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
VENKATA	SAI	JYOTHISH	ATI	URI						854	40	1436
		s first name and middle initial	Last r									
										You Sp OH) ouse (QSS) s, enter the child's name if the uary 2, 1959 Is blind sthe box if qualifies for (see instruct Ita credit Credit for other deper Image: Ima		
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				Α	pt. no.	Preside	ntial Ele	ection Campaigr
<u>1662 BRC</u>	OKD	ALE RD						2	4		,	· ·
City, town, or p	ost offi	ice. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode			
NAPERVII						II		605	63	box bel	ow will	not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your tax	_	_
		a										ou Spouse
Filing Status		Single		、			Head of ho	buseh	old (HOH)			
Check only		Married filing jointly (even if only or	ne nac	i income)								
one box.	L If \	Married filing separately (MFS)	name	of your s	nouse If you	ı che	, ,		0 1	. ,	ild'e na	me if the
		alifying person is a child but not you									iu 5 11a	
			•									
Digital		ny time during 2023, did you: (a) rece										
Assets		nange, or otherwise dispose of a digi					-	t)? (Se	e instructio	ns.)		es 🔼 No
Standard	_	neone can claim: Vou as a de	•				a dependent					
Deduction		Spouse itemizes on a separate return	noryc	bu were a	dual-status	allen	I					
		: Were born before January 2, 1	959	Are b	lind Spo	ouse	: 🗌 Was bor	-	,			
Dependents				(2) \$	Social security	'	(3) Relationsh	ip (4	•	· ·		,
If more	(1) ⊦	irst name Last name			number		to you			realt	Credit to	or other dependents
than four dependents,												
see instructions	s ——											
and check here	ı ——											
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	ee instruc	ctions) .					. 1a		124,109.
	b	Household employee wages not re			,							
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	(see i	nstructior	is)					. 1c	:	
attach Forms	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see ii	nstru	uctions)			. 1d		
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								. 1f		
If you did not	g	Wages from Form 8919, line 6 .								. 1g		
get a Form W-2, see	h	Other earned income (see instructi	,				· · · · ·	· ·		. 1h		0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			1 i					104 100
		Add lines 1a through 1h	· ·		· · · ·	 . –	· · · · ·	• •			-	124,109.
Attach Sch. B if required.	2a	· · -	2a				axable interest Irdinary divider				-	
	<u>3a</u> 4a	-	3a 4a				axable amount					
Standard	ч а 5а		та 5а				axable amount				-	
 Deduction for — Single or 	6a		6a				axable amount				-	
Married filing	c	If you elect to use the lump-sum elect		method.	check here				[
separately, \$13,850	7	Capital gain or (loss). Attach Sched				•	,		[7		
 Married filing jointly or 	8	Additional income from Schedule										-16,118.
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,								. 9		107,991.
\$27,700	10	Adjustments to income from Sche								. 10		
 Head of household, 	11	Subtract line 10 from line 9. This is	s your	adjusted	gross incor	ne				. 11		107,991.
\$20,800 • If you checked	12	Standard deduction or itemized	deduo	ctions (fro	m Schedule	A)				. 12		13,850.
any box under Standard	13	Qualified business income deducti	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		94,141.

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

Form **1040** (2023)

Form 1040 (2023	3)							Page 2
Tax and	16	Tax (see instructions). Check i	f any from Form	(s): 1 🗌 881	4 2 4972	3 🗌	16	16,015.
Credits	17	Amount from Schedule 2, line	e3				17	,
	18	Add lines 16 and 17					18	16,015.
	19	Child tax credit or credit for c	ther dependent	ts from Sched	ule 8812		19	
	20	Amount from Schedule 3, line	e8				20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18.	If zero or less,	enter -0			22	16,015.
	23	Other taxes, including self-er	nployment tax,	from Schedule	e 2, line 21 .		23	0.
	24	Add lines 22 and 23. This is y	our total tax				2 4	16,015.
Payments	25	Federal income tax withheld	from:					
-	а	Form(s) W-2				25a 16	,348.	
	b	Form(s) 1099				25b		
	с	Other forms (see instructions)			25c		
	d	Add lines 25a through 25c .					25	16,348.
If you have a	26	2023 estimated tax payments	s and amount a	pplied from 20)22 return		26	;
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC) .			No .	27		
attach Sch. ElC.	28	Additional child tax credit from	n Schedule 8812			28		
	29	American opportunity credit	from Form 8863	8, line 8		29		
	30	Reserved for future use				30		
	31	Amount from Schedule 3, line	ə15			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. Th	nese are your to	tal payments			33	16,348.
Refund	34	If line 33 is more than line 24	, subtract line 24	4 from line 33.	This is the amou	nt you overpaid	34	. 333.
	35a	Amount of line 34 you want r			3 is attached, che	ck here	. 🗌 35	a 333.
Direct deposit?	b	Routing number 1 1 1			c Type: 🛛 🗙	Checking	Savings	
See instructions.	d	Account number 3 1 2	6 9 2 9	96				
	36	Amount of line 34 you want a	pplied to your :	2024 estimate	ed tax	36		
Amount	37	Subtract line 33 from line 24.						
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	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See		_
Designee	ins	tructions					omplete belov	
	De nai	signee's ne		Phone no.			onal identificatio per (PIN)	n
Cian		der penalties of perjury, I declare th	at I have examined		accompanying sche		. ,	st of my knowledge and
Sign		ief, they are true, correct, and comp						, ,
Here	Yo	ur signature		Date	Your occupation		If the IRS	sent you an Identity
		5						PIN, enter it here
Joint return?					SOFTWARE 1		(see inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occupat	ion		sent your spouse an otection PIN, enter it here
your records.							(see inst.)	olection Fin, enter it here
	Ph	one no. (682)256-4874	L	Email address	Ι .τνοτητου λτ	LURI@GMAIL.CC	M	
		eparer's name	r Preparer's signat		0 IOIIIISH,AI	Date		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM	, ,				P0208270	
Preparer		n's name GLOBAL TAX		TATH DAGAN	SOLIA INDAM	02/00/2024		(678)965-9522
Use Only		n's address 245 ROONEY		NSWICK N	J 08816		Firm's EIN	
Go to www.irs.cr		1040 for instructions and the lates		TIONICIC IN				Form 1040 (2023)
GO 10 W WW.115.90	5V/1 0/1	noto initiatiuotions and the lates	a mornation.		BAA	REV 01/27/24 PRO		10m IUTU (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074 2023

Attachment Sequence No. **01** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number VENKATA SAI JYOTHISH ATLURI 854-40-1436

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. Atta	ach Schedule E .	5	-16,118.
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			
		<u>8m</u>	-	
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 Nontaxable amount of Medicaid waiver payments included on Form	8r	-	
S	1040, line 1a or 1d	8s (
	Pension or annuity from a nonqualifed deferred compensation plan or	05 (4	
t	a nongovernmental section 457 plan	8t		
	Wages earned while incarcerated	8u	-	
u z	Other income. List type and amount:			
2		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-16,118.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	ıle 1 (Form 1040) 2023

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		17	
18	Penalty on early withdrawal of savings		18	
19a			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 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			
ĥ	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 ar	nd on		
	Form 1040, 1040-ŠR, or 1040-NR, line 10		26	
	BAA REV 01/27/24 PRO		Schedule 1 (F	orm 1040) 202:

SCHEDULE E		Supplemental Income and Loss									OMB N	o. 1545-0074				
(Form	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)									2023						
bepartment of the frededay						040-SR, 1040-NR, or 1041.					Attachment					
Internal Revenue Service Go to www.irs.gov/ScheduleE for Name(s) shown on return						rinstru	instructions and the latest information.					Sequence No. 13 cial security number				
Name(s) snown on return VENKATA SAI JYOTHISH ATLURI										0-1436						
										0-1430						
rait	Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.										oort farm					
Α	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions									. 🗌 Ye	es 🛛 No					
B It	"Yes," did you or will you file required Form(s) 1099?									. 🗌 Ye	es 🗌 No					
1a	Physical addr	ress	of e	each pr	operty (street, ci	ity, state, ZII	⊃ code	e)							
Α	IN															
В																
С																
1b	Type of Prope (from list below							Fa		ir Rental Days			QJV			
Α	3	personal use days. Check the Quif you meet the requirements to f qualified joint venture. See instru			JV bo>	k only	Α		365		0					
В							В									
С				quai	ified joir	it venture	e. See instru	Ictions	5.	С						
Туре	of Property:												•			
	Single Family R				3 Vaca	tion/Shor	rt-Term Ren	tal	5 Lanc	ł		Self-Rental				
2	Multi-Family Re	eside	ence	Э	4 Com	mercial			6 Roya	alties	8	Other (deso	cribe)			
												Proper	ties:			
Incom	ne:									Α		В				
3	Rents received	. b						3	600		00.					
4	Royalties rece	ived			<u> </u>	<u></u>		4								
Expen																
5	Advertising						5									
6	Auto and travel (see instructions)						6		1 4	0.5						
7	Cleaning and maintenance						7	1,425.								
8 9	Commissions						8 9									
9 10							10									
11	Legal and other professional fees						11		1.2	00.						
12	Mortgage interest paid to banks, etc. (see instructions)							12		- / 4						
13	Other interest						13									
14	Repairs						14		4,2	79.						
15	Supplies						15	2,871.								
16	Taxes					16										
17	Utilities						17	4,321.								
18	Depreciation expense or depletion					18	2,622.									
19	Other (list)	Other (list) Total expenses. Add lines 5 through 19					19			1.0						
20								20		16,7	18.					
21	Subtract line 2															
	result is a (loss file Form 6198							21		-16,1	18.					
22	Deductible rer									.,-						
	on Form 8582							22	(16,11	. 8.)	()	(
23a	Total of all am	ount	ts re	eported	on line	3 for all	rental prope				23a		600.			
b		Total of all amounts reported on line 4 for all royalty prope					erties			23b						
С		Total of all amounts reported on line 12 for all properties														
d									2,622.							
e									23e	1	6,718.					
24	Income. Add positive amounts shown on line 21. Do not include any losses 24 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25								(16 110						
25			-											(16,118.	
26	Total rental re here. If Parts I															

26

-16,118.

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

Form 4562 Depreciation and Amortization								OMB No. 1545-0172				
Form	HJUZ		(Including Information on Listed Property)									
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form4562 for instructions a								Attachment				
								Sequence No. 179				
	le(s) shown on return Business or activity to which this form relates NKATA SAI JYOTHISH ATLURI Sch E Schedule E, Page 1, Copy 1, Property A								Identifying number 854-40-1436			
	Part I Election To Expense Certain Property Under Section 179											
	Note: If you have any listed property, complete Part V before you complete Part I.											
1	Maximum amount	(see instruction	s)					1	1,160,000.			
2	Total cost of section	2										
	Threshold cost of	3	2,890,000.									
	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0											
5		-										
6	separately, see ins	Description of proper	•••••		ness use only)		(c) Elected cost	5				
	(a) 1		ty		ness use only		(c) Elected Cost					
7	Listed property. E	nter the amount	from line 29		7							
	Total elected cost		8									
9	Tentative deduction	on. Enter the sm	aller of line 5 or line 8	3				9				
10	Carryover of disall	owed deduction	from line 13 of your 2	2022 Form 4	562			10				
	Business income lir		11									
	Section 179 exper	12										
			to 2024. Add lines 9			13						
			for listed property. In			aduda	listed property	<u> </u>	instructions)			
			owance and Other					See				
14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions											
15	5 Property subject to section 168(f)(1) election											
	Other depreciation	.,.	,					15 16				
Par			on't include listed p									
				Section A								
		•	ced in service in tax y	•	•			17				
18 If you are electing to group any assets placed in service during the tax year into one or more general												
	asset accounts, cl		· · · · · · · ·					<u> </u>				
	Section		ced in Service During (c) Basis for depreciation		-	e Gene	ral Depreciation	Syst	em			
(a) 🤇	Classification of property	/ placed in	(business/investment use	(d) Recovery period	(e) Conventio	n	(f) Method	(g) Depreciation deduct				
19a	3-year property	service	only-see instructions)									
b												
C												
d	10-year property											
е	15-year property											
f	20-year property											
	25-year property			25 yrs.			S/L					
h	Residential rental	01/23	75,231.	27.5 yrs.	MM		S/L		2,622.			
	property	-1		27.5 yrs.	MM		S/L					
I	Nonresidential rea			39 yrs.	MM		5/L 5/L					
	property Section C	 LΔssets Place	d in Service During	2023 Tax Ve		Alterna		n Sve	stem			
20a	Class life						S/L		stem			
	12-year			12 yrs.			5/L					
	30-year			30 yrs.	MM		S/L					
	40-year			40 yrs.	MM		S/L					
Par	Part IV Summary (See instructions.)											
21	Listed property. E	21										
22	Total. Add amou		-									
• -	-		of your return. Partner	-	-	-see in	structions .	22	2,622.			
23			ed in service during the section 263A costs .			23						

For Paperwork Reduction Act Notice, see separate instructions.