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 n	levellue Sel vice									
Submis	ssion Identification Number (SID)									
Taxpayer	r's name	So	cial securit	ty numb	er					
SAND	DEEP NAVULURI		386-53-6176							
Spouse's			Spouse's social security number							
Doubl	Too Debugg Information Too Very Finding December 04	2 /Ft				· \				
Part	-	3 (Enter ye	ar you a	re auti	noriz	ing.)				
	vhole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.									
	Adjusted gross income			1		32	955.			
	Total tax			2			075.			
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3						
	Amount you want refunded to you			4			170.			
	Amount you owe			5		3,	095.			
Part I		et and kee	p a cop		our r	eturi	າ)			
,	penalties of perjury, I declare that I have examined a copy of the income tax return (original or a									
for any of Agent to payment authorize payment business taxes to persona	my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason delay in processing the return or refund, and (c) the date of any refund. If applicable, I author to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution act at of my federal taxes owed on this return and/or a payment of estimated tax, and the financial action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the treation of the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancelles days prior to the payment (settlement) date. I also authorize the financial institutions involved receive confidential information necessary to answer inquiries and resolve issues related all identification number (PIN) below is my signature for the income tax return (original or ame	rize the U.S. Toount indicate institution to terminate the ation requested in the property to the payment to the payment.	Freasury a ged in the table debit the eauthorizable must be cessing of nent. I furt	nd its deax preparently to attorn. To be received the electrical transfer acknowledges and transfer acknowledges are acknowledges and transfer acknowledges acknowledges acknowledges and transfer acknowledges ackno	esigna aration this o revo ed no ctroni	ated F n softv accou oke (ca o later ic payi	inancial vare for nt. This ancel) a than 2 ment of hat the			
	nic Funds Withdrawal Consent. yer's PIN: check one box only									
X	l authorize GLOBAL TAXES LLC to enter or g	enerate my	DINI 3	6 1	7	6	as my			
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	enerate my	En	ter five o n't enter		but	as my			
	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner P below.									
Your si	ignature ▶ D	Date ►								
Spouse	e's PIN: check one box only									
Spouse	I authorize to enter or g	onorato my	DINI				00 m)/			
Ш	ERO firm name	enerate my		ter five o	ligits		as my			
	signature on the income tax return (original or amended) I am now authorizing.			n't enter						
	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner P below.									
Spouse	e's signature ▶ □	Date ▶								
орошос	Practitioner PIN Method Returns Only—continue									
Part II	_ *									
EDO!-	FEIN/DIN Follows in their FFIN followed by the distance of the state of DIN		4 0		0 6		1			
ERU'S	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2	1 - 1 - 1	6 0	8 2	2 7	1			
			Don't ent	er all Zel	US					
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual ited to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Prov	am submittin	g this retu	ırn in ad	ccord	anće v				
ERO's	signature ▶ □	oate ►								
	ERO Must Retain This Form — See Instruct									
	Don't Submit This Form to the IRS Unless Request		So							

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



£1040		eartment of the Treasury—Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.	
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, enc	ling			, 20		See se	oarate i	instructions.	
Your first name	and m	niddle initial	Last nar	me							Your so	cial sec	curity number	-
SANDEEP			NAVU	LURI							386	53	6176	
	pouse'	s first name and middle initial	Last nar								Spouse'	s social	security numb	eı
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.					pt. no.		Preside	ntial Ele	ection Campaig	an
6135 HO	LLYW	OOD DRIVE								- 1			ou, or your	
City, town, or p	ost off	ice. If you have a foreign address, also co	mplete sp	paces bel	ow.	Sta	te	ZIP c	ode		•	_	jointly, want \$3	
IRVING						ТХ		750	39	- 1	•		nd. Checking a not change	1
Foreign countr	y name		F	oreign pr	ovince/state/	count	У	Foreig	n postal c		your tax		ınd.	se
Filing Status	s 🗵	Single					Head of he	ouseh	old (HOH	<u>-</u> -				_
Check only		Married filing jointly (even if only o	ne had ir	ncome)										
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spou	use (C	QSS)			
	lf y	you checked the MFS box, enter the	name o	f your sp	oouse. If you	u che	cked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	
	qι	ualifying person is a child but not you	ır depen	dent:										
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	d. award. or	pavn	nent for prope	rtv or	services)): or (b) sell.			-
Assets		nange, or otherwise dispose of a dig										□ Ye	es 🗵 No	
Standard	Son	neone can claim: You as a de	pendent	: 🔲	Your spous	e as	a dependent							_
Deduction		Spouse itemizes on a separate retur	n or you											
Age/Rlindnes	s You	: Were born before January 2, 1	959 [Are bli	ind Sno	ouse	: Was bor	n hefr	re Janua	arv 2	1959		s blind	
	_		000 _	Ī	<u> </u>			14					(see instructions	 s):
-		s (see instructions): (1) First name Last name			(2) Social security number (3) Relationship to you			ip (Child to		1		or other dependen	
If more than four														_
dependents,	_													
see instruction and check	s —								[
here									[
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instruc	tions) .						1a		38,158.	
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	a (see ins	struction	s)						1c			_
attach Forms W-2G and	d	Medicaid waiver payments not rep		•	,	nstru	ctions)				1d			_
1099-R if tax	е	Taxable dependent care benefits f									1e			_
was withheld.	f	Employer-provided adoption bene	fits from	Form 8	839, line 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 (s	see instr	uctions)			<u>li</u>						38,158.	
		Add lines 1a through 1h			· · i	 L T.	 axable interest				1z		30,130.	_
Attach Sch. B if required.	2a 3a	· –	2a 3a				rdinary divide				2b 3b			_
	4a	· –	4a				axable amoun				4b			_
Standard	-та 5а		та 5а				axable amoun				5b			_
Deduction for— Single or	6a		6a				axable amoun				6b			_
Married filing	C	If you elect to use the lump-sum e		nethod.	check here					. Г				_
separately, \$13,850	7	Capital gain or (loss). Attach Sche		-		•	,			. $\overline{\Gamma}$	7			
 Married filing jointly or 	8	Additional income from Schedule		•							8		-5,203.	_
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	•								9		32,955.	
\$27,700	10	Adjustments to income from Sche	Adjustments to income from Schedule 1, line 26							10				
Head of household,	11	Subtract line 10 from line 9. This is	s your ac	djusted (gross incor	ne					11		32,955.	
\$20,800 If you checked	12	Standard deduction or itemized	deducti	ons (fro	m Schedule	A)					12		13,850.	
any box under Standard	13	Qualified business income deduct	ion from	Form 89	995 or Form	899	5-A				13			
Deduction,	14										14		13,850.	
see instructions.	15	Subtract line 1/1 from line 11 If zer	o or loce	antar	O This is y	Our t	avable incom				15	- 1	10 105	

Form 1040 (2023	3)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	2,075.	
Credits	17	Amount from Schedule 2, lin	ne 3					17		
	18	Add lines 16 and 17						18	2,075.	
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	ne 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	2,075.	
	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	2,075.	
Payments	25	Federal income tax withheld	from:							
-	а	Form(s) W-2				25a	5,170			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	5,170.	
If you have a	26	2023 estimated tax payment	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	8, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	ne 15			31				
	32	Add lines 27, 28, 29, and 31	32							
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	5,170.	
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	3,095.	
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	ck here	🗆	35a	3,095.	
Direct deposit?	b	Routing number 1 1 1			,, <u> </u>	Checking	Savings	s		
See instructions.	d	Account number 4 8 8	1 1 9 3	5 8 5 (0 8 0					
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe						
You Owe		For details on how to pay, go	_	-				37		
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party		you want to allow another	•			_				
Designee							Complete		⊠ No	
		esignee's me		Phone no.			sonal ider nber (PIN)			
Sign	Un	der penalties of perjury, I declare th	nat I have examine	d this return and	accompanying sche	dules and stateme	nts, and to	the best	of my knowledge and	
Here	be	lief, they are true, correct, and com	ch prepar	er has any knowledge.						
Here	Yo							nt you an Identity		
							1		IN, enter it here	
Joint return? See instructions.				SOFTWARE ENGINEER				(see inst.)		
Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.			Date	Spouse's occupati	on	lde	entity Prot	nt your spouse an ection PIN, enter it here	
your records.							(se	e inst.)		
		one no. (408)571-900		Email address	NSANDEEPVS	1				
Paid		eparer's name	Preparer's signat		_	Date	PTIN		Check if:	
Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	02/01/2024		82703	Self-employed	
Use Only		m's name GLOBAL TAX							678)965-9522	
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Fir	m's EIN	84-3171965	
^		40406 1 1 11 11 11							- 4040	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

SANDEEP NAVULURI

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.

Your social security number 386-53-6176

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	-5,203.
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		
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	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:	0-		
0	Total other income. Add lines to through to	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	nere and on Form	10	-5,203.
	10+0, 10+0-011, 01 10+0-1111, 1111 0 0		10	-5,203.

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-				
	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	,	24a			
b	Deductible expenses related to income reported on line 8l from the				
	, , , , , , , , , , , , , , , , , , , ,	24b		_	
С	Nontaxable amount of the value of Olympic and Paralympic medals	_			
	· · · · · · · · · · · · · · · · · · ·	24c			
d		24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f			
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)	24h			
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	24i			
j	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
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 Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	here and on	26	
	, - , - , - , , , , , ,		-		

SCHEDULE E (Form 1040)

Department of the Treasury

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,

Attachment

Your social security number

Internal Revenue Service Go to www.irs.gov/ScheduleE for instructions and the latest information. Name(s) shown on return

Sequence No. 13

OMB No. 1545-0074

SANDEEP NAVULURI 386-53-6176 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. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . Physical address of each property (street, city, state, ZIP code) 1a Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Davs **Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 3 420. Rents received . 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,347. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 950. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 987. 14 Repairs 14 15 Supplies 15 1,327. 16 16 Taxes 17 Utilities 17 1,012. 18 18 Depreciation expense or depletion 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 5,623. 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 -5,203. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 5,203.) 420. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 5,623. Total of all amounts reported on line 20 for all properties 23e 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 5,203. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

-5,203.

26

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