IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

T.....

Taxpayer's name	Social secu	urity number	r
MURALI KALAVAKURI	823-6	2-5215	
Spouse's name	Spouse's s	ocial securi	ty number
Part I Tax Return Information – Tax Year Ending December 31, 2023 (E	Enter year you	are auth	orizing.)
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	70,712.
2 Total tax		2	7,820.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	11,241.
4 Amount you want refunded to you		4	3,421.
5 Amount you owe		5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your 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		E
X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	Ľ

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Ent dor	er fiv n't er	/e 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 si	gnature 🕨 Da	ate 🕨	•				 				
	Practitioner PIN Method Returns Only—continue	bel	ow								
Part III	Certification and Authentication – Practitioner PIN Method Only										
ERO's EFIN	J/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2	 _	6 nter a	 	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 🕨		Date 🕨	
Don't	ERO Must Retain This F Submit This Form to the		
For Denerwork Deduction Act Nation		 DEV 02/22/24 DDO	Earm 8879 (Bay, 01 2021)

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

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Attach Sch. B 2a Tax-exempt interest 2a b Taxable interest 2b if required. 3a Qualified dividends 3a b Ordinary dividends 3b Standard Deduction for- 5a Pensions and annuities 5a b Taxable amount 4b Single or Married filing separately, \$13,850 F C apital gain or (loss). Attach Schedule D if required. If not required, check here (see instructions) 6b Married filing surving spouse, \$27,700 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 70, 712. 14 Add lines 12 and 13 11 70, 712. 13 Deduction for 14 13, 850. 4a Income from Schedule 1, line 10 9 70, 712. <td>instructions.</td> <td></td> <td></td> <td>see ins</td> <td>structions)</td> <td>)</td> <td>• •</td> <td> 11</td> <td></td> <td></td> <td>-</td> <td></td> <td>00 E0E</td>	instructions.			see ins	structions))	• •	11			-		00 E0E
if required. 3a Qualified dividends 3a b Ordinary dividends 3b Standard Deduction for- Deduction for- Single or Married filing separately, \$13,850 4a b Taxable amount 4b Standard Deduction for- Single or Married filing separately, \$13,850 5a Pensions and annuities 5a b Taxable amount 5b 6a Social security benefits 6a b Taxable amount 5b 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here 7 7 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 70, 712. 10 Adjustments to income from Schedule 1, line 26 11 70, 712. 10 Adjustments to income from Schedule 1, line 26 11 70, 712. 10 Adjustments to income from Schedule 1, line 26 11 70, 712. 11 70, 712. 11 70, 712. 12 13 Qualified business income deductions (from Schedule A) 12 13, 850. 14 Add lines 12 and 13 14 13, 850. 14			-			· · · ·	ьт	· · · · ·		• • •		-	02,505.
Standard Ga												-	
Standard Deduction for- 5a Pensions and annuities										· · ·		_	
Single or Married filing separately, \$13,850 6a b Taxable amount	Standard											-	
Married filing separately, \$13,850 c If you elect to use the lump-sum election method, check here (see instructions) .												_	
Separately,	Married filing				method								
Married filling jointly or Qualifying surviving spouse, \$27,700 8 -11,793. 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 70,712. 9 70,712. 9 70,712. 10 Adjustments to income from Schedule 1, line 26 10 Head of household, \$20,800 11 Subtract line 10 from line 9. This is your adjusted gross income 11 70,712. \$20,800 12 Standard deduction or itemized deductions (from Schedule A) 12 13,850. 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 14 13,850.			· ·		,		`	,			7		
Qualifying surving spouse, \$27,7009Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income970,712.10Adjustments to income from Schedule 1, line 2610Head of household, \$20,80011Subtract line 10 from line 9. This is your adjusted gross income1170,712.12Standard deduction or itemized deductions (from Schedule A)1213,850.13Qualified business income deduction from Form 8995 or Form 8995-A13141413,850.14	 Married filing iointly or 				•	•							-11,793.
Summing spouse, servicing spouse, servicing spouse, servicing spouse, servicing spouse, servicing spouse, servicing spouse, service ser	Qualifying			,				e					
Head of household, \$20,80011Subtract line 10 from line 9. This is your adjusted gross income1170,712.12Standard deduction or itemized deductions (from Schedule A)1213,850.13Qualified business income deduction from Form 8995 or Form 8995-A1314Add lines 12 and 131413,850.	\$27,700											-	
\$20,800 12 Standard deduction or itemized deductions (from Schedule A) 12 13,850. If you checked any box under Standard Deduction, 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 13 Add lines 12 and 13 13 14 13,850.			•			gross incon	ne						70,712.
13Qualified business income deduction from Form 8995 or Form 8995-A133344	\$20,800	12									. 12	2	
Deduction, 14 Add lines 12 and 13 14 13,850	any box under	13	Qualified business income deduct	ion fro	m Form 8	995 or Form	899	95-A			. 13	;	
see instructions. 15 Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income 15 56,862.	Deduction,	14	Add lines 12 and 13								. 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	e.		. 15	5	56,862.

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 if any from Form	n(s): 1 🗌 881	4 2 4972	3 🗌	1	6 7,820.
Credits	17	Amount from Schedule 2, line 3				1	7
	18	Add lines 16 and 17				1	8 7,820.
	19	Child tax credit or credit for other dependen	its from Sched	ule 8812		1	9
	20	Amount from Schedule 3, line 8				2	20
	21	Add lines 19 and 20				2	1
	22	Subtract line 21 from line 18. If zero or less,	enter -0			2	7,820.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21 .		2	. 0.
	24	Add lines 22 and 23. This is your total tax				2	7,820.
Payments	25	Federal income tax withheld from:					
-	а	Form(s) W-2			25a 11	,241.	
	b	Form(s) 1099			25b		
	с	Other forms (see instructions)			25c		
	d	Add lines 25a through 25c				2	5d 11,241.
If you have a	26	2023 estimated tax payments and amount a	pplied from 20)22 return		2	26
qualifying child,	27	Earned income credit (EIC)		No .	27		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812	2		28		
	29	American opportunity credit from Form 886	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	total other pa	ayments and ref	undable credits	3	2
	33	Add lines 25d, 26, and 32. These are your to	otal payments			3	3 11,241.
Refund	34	If line 33 is more than line 24, subtract line 2	4 from line 33.	This is the amou	nt you overpaid	3	3,421.
	35a	Amount of line 34 you want refunded to you		3 is attached, che	ck here	. 🗌 🛛	5a 3,421.
Direct deposit?	b	Routing number 1 1 1 0 0 0 0			Checking	Savings	
See instructions.	d	Account number 4 8 8 1 1 5 7	9 1 2 8	3 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	ount you owe				
You Owe		For details on how to pay, go to www.irs.go	v/Payments or	see instructions		3	57
	38	Estimated tax penalty (see instructions) .			38		
Third Party	Do	you want to allow another person to dis	cuss this retu	rn with the IRS?			_
Designee	ins	tructions			🗌 Yes. Co	omplete belo	w. 🗙 No
	De na	signee's	Phone no.			onal identificati per (PIN)	ion
0:		der penalties of perjury, I declare that I have examine		accompanying sch			est of my knowledge and
Sign		ief, they are true, correct, and complete. Declaration		1 2 0		,	, ,
Here	Yo	ur signature	Date	Your occupation		If the IRS	sent you an Identity
			Date			Protectio	on PIN, enter it here
Joint return?				SOFTWARE	ENGINEER	(see inst.)
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupat	ion		sent your spouse an
your records.						(see inst.	Protection PIN, enter it here)
	Dh		Email addross		AVIIDTACMATI CO	,	,
		parer's name Preparer's signa	Email address	MUKALI.KALAV	AKURI@GMAIL.CC		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA				P0208270	
Preparer			KAM SAGAR	GUPIA IALLAM	03/00/2024		
Use Only		n's name GLOBAL TAXES LLC n's address 245 ROONEY CT E BRU	INCWICK N	J 08816		Phone no	
			NI JJTMOWICK IN			Firm's El	N 84-3171965 Form 1040 (2023)
GO to www.irs.go	ov/Forn	1040 for instructions and the latest information.		BAA	REV 02/23/24 PRO		Form 1040 (2023)

SCHEDULE	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 20 23

Department of the Treasury Internal Revenue Service		Attachment Sequence No. 01			
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soc	ial security number		
MURALI KALAVAKURI 823-62-					

Par	t 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	-11,793.
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	_	
_	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	-	
	Section 951(a) inclusion (see instructions)	8n	-	
0	Section 951A(a) inclusion (see instructions)	80	-	
p	Section 461(I) excess business loss adjustment	8p	-	
q		8q 8r	-	
r	Scholarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form		-	
S	1040, line 1a or 1d	8s (
t	Pension or annuity from a nonqualifed deferred compensation plan or		4	
Ľ	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 additional income . Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-11,793.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedule	e 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	government		
	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	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			
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 adjustments to income. Enter			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV 02/	/23/24 PRO	Schedule 1 (Form 1040) 2023

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

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

	Allacii lu Fuili	11 1040, 104	0-3n, 104	0-Nn, C
Go to www.	irs.aov/Schedu	uleE for ins	tructions	and the

20 23
Attachment Sequence No. 13

Department of the Treasury Ν

Internal	Go to www.irs.gov/ScheduleE for instant					nstructions and the latest information.					Sequence No. 13		
Name(s)	ne(s) shown on return										Your social security number		
MURA	LI KALAVAK	JRI							823-6	2-5215			
Part			ss From Rental Real Estate a						,				
	Note: If yo	u are ii	n the business of renting personal prop oss from Form 4835 on page 2, line 40	erty, use	e Schedule	C . See	e instru	ctions. If you	are an indi	vidual, rep	ort farm		
A [nents in 2023 that would require yo		Eorm(s) 1	0002 0	Soo in	structions					
			l you file required Form(s) 1099?										
1a	Physical addr	ess of	each property (street, city, state, Z		e)								
Α													
B													
С							1		1				
1b	Type of Proper		2 For each rental real estate prop				Fa	air Rental	Personal Use Days		QJV		
-	(from list below	/)	above, report the number of fai personal use days. Check the 0					Days	Da	-			
	3		if you meet the requirements to			<u>A</u>		365		0			
<u>В</u> С			qualified joint venture. See inst			B C							
	of Property:					C							
	Single Family R	ncidor	ce 3 Vacation/Short-Term Re	ntal	5 Land		7	Self-Rental					
	Multi-Family Re			inai	6 Roya				vribo)				
		sideric				lities	0	Other (desc					
								Propert	ies:				
Incom						Α		В			С		
3				3		4	139.						
4		ved.		4						L			
Exper	ises:												
5				5									
6		-	instructions)	6									
7	-		nance	7		1,3	386.						
8				8									
9				9									
10	-	-	essional fees	10									
11				11		1,0)17.						
12			id to banks, etc. (see instructions)	12						ļ			
13				13									
14				14		1,876.							
15		• •		15		2,2	214.						
16				16		0.0	1.0						
17							216.			<u> </u>			
18			e or depletion	18		3,5	523.						
19 20	Utner (list)	∧ ما حا	linco E through 10	. 19		10 0	120						
20	•		lines 5 through 19	20		12,2	53 4 .						
21			I line 3 (rents) and/or 4 (royalties). It instructions to find out if you must										
				21	_	-11,7	793						
22			I estate loss after limitation, if any			±±,/							
"			nstructions)	, 22	(11,79	93.1	()	(
23a		•	reported on line 3 for all rental prop				23a	1	439.	\ 			
b			reported on line 4 for all royalty pro				23b						
c			reported on line 12 for all properties	•			23c						
d			reported on line 18 for all properties				23d		3,523.				
e			reported on line 20 for all properties				23e		2,232.				
24			e amounts shown on line 21. Do n e						. 24				
25			osses from line 21 and rental real esta		-					(-	11,793.		
26			tate and royalty income or (loss)								-, 200		
_•			nd IV, and line 40 on page 2 do n										

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

-11,793.

26