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

Submission Identification Number (SID) Taxpayer's name Social security number VAMSHI KRISHNA TATA 755-67-1250 Spouse's name Spouse's social security number HARIKA SAMINENI 989-92-1286 Tax Return Information - Tax Year Ending December 31, 2023 (Enter year you are 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. Adjusted gross income 2 2 6,553. Federal income tax withheld from Form(s) W-2 and Form(s) 1099 . 3 13,429 Amount you want refunded to you 4 6,876. Amount you owe Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, 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 X lauthorize GLOBAL TAXES LLC to enter or generate my PIN as my 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. Your signature ▶ Spouse's PIN: check one box only ▼ I authorize GLOBAL TAXES LLC 2 to enter or generate my PIN 2 8 as my **ERO firm name** Enter five digits, but don't enter all zeros 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 signature ▶ Practitioner PIN Method Returns Only—continue below Certification and Authentication — Practitioner PIN Method Only Part III ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 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 ▶

ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 2023

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.lrs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No. 01

Your social security number

Name(s) shown on Form 1040, 1040-SR, or 1040-NR VAMSHI KRISHNA TATA & HARIKA SAMINENI 755-67-1250 Part I Additional Income Taxable refunds, credits, or offsets of state and local income taxes . . . 1 1 2a b Date of original divorce or separation agreement (see instructions): _ 3 3 4 -9,974. Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E . 5 5 6 6 7 Unemployment compensation 7 8 Other income: 8a 8b 8c 8d d Foreign earned income exclusion from Form 2555 8e Income from Form 8853 8f Alaska Permanent Fund dividends 8g 8h 81 8 8k 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 8m 8n 80 8p Taxable distributions from an ABLE account (see instructions) . . . 8q Scholarship and fellowship grants not reported on Form W-2 . . . Nontaxable amount of Medicaid waiver payments included on Form 88 Pension or annuity from a nonqualifed deferred compensation plan or 8t 8u Other income. List type and amount: 82 9 9 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 10

-9,974.

Pal	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-	basis government	1.	
	officials. Attach Form 2106		12	the state of the state of
13	Health savings account deduction. Attach Form 8889	1. 16. 17. (20.2)	13	Telephone Company
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	estable and the second
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	The Purchase M
17	Self-employed health insurance deduction		17	17 07 17 40
18	Penalty on early withdrawal of savings		18	7 3 A M 1
19a			19a	
b	Recipient's SSN	•		
C	Date of original divorce or separation agreement (see instructions):	and the second second		
20	IRA deduction		20	,
21	Student loan interest deduction	and the second second	21	
22	Reserved for future use	page gazata i	22	
23	Archer MSA deduction		23	
24	Other adjustments:			
a	Jury duty pay (see instructions)	24a	-	
b		THE STATE OF THE S		
	rental of personal property engaged in for profit	24b		
C		and the second second second second second		
		24c		
d	Tieroreotation amortization and expenses	24d		
е				
	Mot of forth a first a	24e		
f	Contributions to occiton of (o)(10)(b) ponsion plane	24f		
g	Continue to the continue to th	24g		
h	Attorney fees and court costs for actions involving certain unlawful	Filed Struggle Site		
	GIOGINI III IGGIOTI CIGINI CONTROL CON	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		
ı	Housing acadonom norm zooo	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	y and see the page?		
	1041)	24k		
z	Other adjustments. List type and amount:			
		24z	18 J. 19 H	
25	Total other adjustments. Add lines 24a through 24z		25	TOTAL BY
26	Add lines 11 through 23 and 25. These are your adjustments to income.	Enter here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	一、四位即即1386 16 6 6 日	26	