#### Department of the Treasury Internal Revenue Service

## **IRS e-file Signature Authorization**

OMB No. 1545-0074

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

Submission Identification Number (SID)

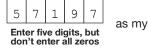
Taxpayer's name	Social security number			
SAI KRISHNA THANIPARTHI	154-85-719	7		
Spouse's name		Spouse's social sec	urity number	
SHRAVYA THUMUNURI		989-94-962	6	
Part I Tax Return Information – Tax Year Ending December 31,	2023 (Enter	year you are au	thorizing.)	
Enter whole dollars only on lines 1 through 5.	·			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1 Adjusted gross income		1	73,165.	
<b>2</b> Total tax		2	5,017.	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	8,026.	
4 Amount you want refunded to you		4	3,009.	
<b>5</b> Amount you owe		5	,	

#### Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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

				EBO firm name		E	ŗ
X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN		Э —



2 6

as mv

6

Enter five digits, but don't enter all zeros

9 4

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

X lauthorize GLOBAL TAXES LLC to enter or generate my PIN 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 signature 🕨	Da	te 🕨	•									
Practitioner PIN Method Returns Only—continue below												
Part III Certification and Authentication	<ul> <li>Practitioner PIN Method Only</li> </ul>											
ERO's EFIN/PIN. Enter your six-digit EFIN followed	by your five-digit self-selected PIN.	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 Form — Submit This Form to the IRS Unl		
			F 0070 (D 01 0001)

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

<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Ta</b>		turn	202	3	OMB No. 1545	-0074	IRS Use Only	/—Do not w	rite or sta	ple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate i	nstructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	urity number
SAI KRIS	SHNA		тна	NIPARI	ГНІ					154	85	7197
		s first name and middle initial	Last r								· · ·	security number
SHRAVYA			тни	MUNURI	г					989	94	9626
	(numbe	er and street). If you have a P.O. box, see			<b>-</b>			A	pt. no.		• •	ction Campaign
1800 KTI		N LAKES DR						F	305			ou, or your
		ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP c				jointly, want \$3
COLUMBIA	4					sc		292	0.3	· · ·		nd. Checking a not change
Foreign country				Foreign p	rovince/state/		-		n postal code			0
							-				🗌 Yo	
Filing Status	. [	] Single					Head of h	ouseh	old (HOH)			
-		Married filing jointly (even if only o	ne hac	l income)								
Check only one box.		] Married filing separately (MFS)										
	lf v	ou checked the MFS box, enter the	name	of vour s	pouse. If vou	ı che					ld's nai	me if the
		alifying person is a child but not you										
Digital		ny time during 2023, did you: (a) rec						-				
Assets	-	hange, or otherwise dispose of a dig						et) ? (Se	e instructio	ns.)	∐ Ye	es 🛛 No
Standard	_	eone can claim: You as a de	•		•		a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	allen						
		: Were born before January 2, 1	959	Are b	lind Spo	ouse	: 🗌 Was bor		ore January			s blind
Dependents				(2) \$	Social security	,	(3) Relationsh	ip <b>(4</b>	-	· · ·		see instructions):
If more	(1) F	irst name Last name			number		to you		Child tax c	redit	Credit to	r other dependents
than four dependents,												
see instructions	s ——											
and check												
here		<b>.</b>										
Income	1a	Total amount from Form(s) W-2, b	•		,							83,520.
Attach Form(s)	b	Household employee wages not re	•		. ,							
W-2 here. Also attach Forms	C	Tip income not reported on line 1a	•				· · · ·		• • •			
W-2G and	d			on Form(s) W-2 (see instructions)						. 1d		
1099-R if tax	e	Taxable dependent care benefits f			-	• •		• •		. 1e		
was withheld.	t	Employer-provided adoption bene						• •		. <u>1</u> f		
lf you did not get a Form	g	Wages from Form 8919, line 6 .				• •		• •		. <u>1g</u>		0.
W-2, see	h	Other earned income (see instruct	,			• •		···		. 1h		0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)	)	• •	<u>1</u> i			_		02 520
		Add lines 1a through 1h	••••		· · · ·	 ьт			• • •	. 1z		83,520.
Attach Sch. B if required.	2a	· · -	2a				axable interest		• • •	. 2b		
	<u>3a</u>		3a				Ordinary divide			. 3b		
Standard	4a		4a				axable amoun		• • •	. 4b		
Deduction for—	5a		5a				axable amoun		• • •	. 5b		
<ul> <li>Single or Married filing</li> </ul>	6a	, _	6a	mathad			axable amoun	ι	· · ·	. 6b		
separately, \$13,850	c -	If you elect to use the lump-sum e				`	,	• •	l			
<ul> <li>Married filing</li> </ul>	7	Capital gain or (loss). Attach Sche						• •	l			_10 255
jointly or Qualifying	8	Additional income from Schedule						• •	· · ·	. 8		-10,355.
surviving spouse, \$27,700	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		•				• •	· · ·	. 9		73,165.
<ul> <li>Head of</li> </ul>	10	Adjustments to income from Sche							· · ·	. 10		
household, [ \$20,800	11	Subtract line 10 from line 9. This is	•	-	-					. 11	-	73,165.
• If you checked	12	Standard deduction or itemized					 	• •		. 12		27,700.
any box under Standard	13	Qualified business income deduct	ion fro	m ⊢orm 8	995 or Form	899	ъ-А	• •		. 13		07 700
Deduction, see instructions.	14 15	Add lines 12 and 13	•••			· ·				. 14		27,700.
	15	Subtract line 14 from line 11. If zer	U Or IE	ss, enter	-u This is y	our	axable incom	ie .		. 15		45,465.

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

Form **1040** (2023)

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	5,017.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17					[	18	5,017.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ie8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	5,017.
	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 <b>total tax</b>					24	5,017.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				<b>25a</b> 8	,026.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	8,026.
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)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin							
	32	Add lines 27, 28, 29, and 31	32						
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	8,026.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	3,009.
	35a	Amount of line 34 you want			3 is attached, che	ck here	. 🗆	35a	3,009.
Direct deposit?	b	Routing number 0 1 1				] Checking	Savings		
See instructions.	d	Account number 3 8 8	0 0 3 9	4 8 7 6	6 8				
	36	Amount of line 34 you want a	applied to your	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe.					
You Owe		For details on how to pay, g	o to <i>www.irs.go</i> v	//Payments or	see instructions			37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			_
Designee	ins	structions				🗌 <b>Yes.</b> Co	omplete be	elow.	× No
	De nai	signee's		Phone no.			onal identific oer (PIN)	cation	
Ciara		der penalties of perjury, I declare tl	nat I have examined		accompanying sch		. ,	e hest	of my knowledge and
Sign		ief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the I	IRS ser	nt you an Identity
							Protec	ction P	IN, enter it here
Joint return?					SOFTWARE :	ENGINEER	(see ir	ıst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an ection PIN, enter it here
your records.					STUDENT		(see in		ection Pin, enter it here
	Ph	one no. (603) 943-697	9	Email address		NIPARTHI1@GMAIL.C	` OM		
		one no. (603) 943-697 eparer's name	9 Preparer's signat		ΟΑΙΛΛΙΟΠΝΑ, ΓΗΑΓ	Date	PTIN		Check if:
Paid		M PRIYA RAM SAGAR GUPTA			CIIDUA	04/07/2024	P02082	703	Self-employed
Preparer	-	m's name GLOBAL TAX			JUIN GUEIA	101/2024			(678) 965-9522
Use Only			Y CT E BRU	NOWICK N	J 08816		Firm's		
Go to warne in an		1040 for instructions and the late		TADATCI/ IN					84-3171965 Form <b>1040</b> (2023)
GO TO WWW.IIS.go	JVIPOM	no40 for instructions and the late	scimornation.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

# 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** 

Your social security number

154-85-7197

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR

SAI	KRISHNA	THANIPARTHI	&	SHRAVYA	THUMUNURI

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	-10,355.
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			
		8m	-	
	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 (		
	Pension or annuity from a nongualifed deferred compensation plan or	os (	4	
t	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u	-	
z		ou	-	
2	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> . Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-10,355.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	ule 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 <b>adjustments to income</b> . Enter here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	26	
	BAA REV 03/07/24 PRO	Schedule	1 (Form 1040) 2023

	EDULE E		Supplementa							OMB No	o. 1545-0074
(Form	1040)	(From r	ental real estate, royalties, partners	• •				trusts, REMI	Cs, etc.)	20	23
	nent of the Treasury Revenue Service		Attach to Form 1040 Go to www.irs.gov/ScheduleE fo					nformation.		Attachm	nent ce No. <b>13</b>
	) shown on return								Your soci	al security	
SAI	KRISHNA TH	ANIPAR	THI & SHRAVYA THUMUNU	RI					154-8	5-7197	
Part			From Rental Real Estate ar								
	Note: If yo	ou are in th	ne business of renting personal prope s from <b>Form 4835</b> on page 2, line 40.	rty, use	Schedul	e <b>C</b> . See	e instru	ctions. If you a	are an indi	vidual, rep	ort farm
Α			nts in 2023 that would require you	to file	Form(s)	10992 5	See in	structions			s X No
			ou file required Form(s) 1099?		• • •						
<b>1</b> a			ach property (street, city, state, Zl								
Α	H NO.2-75	, MALL	APUR, GANGADHARA, KAR	IMNAC	GAR, TI	ELANG	ANA	IN 505445	5		
В			· · ·								
С											
1b	Type of Prope		For each rental real estate prope				Fa	air Rental		nal Use	QJV
	(from list below	w)	above, report the number of fair					Days	Da	iys	
	3		personal use days. Check the Q if you meet the requirements to			A		365		0	
B C			qualified joint venture. See instru			B C					
	of Property:										
	Single Family R	lesidence	a 3 Vacation/Short-Term Ren	ntal	5 Land	4	7	Self-Rental			
	Multi-Family Re		4 Commercial		6 Roya			Other (desc	ribe)		
	,				,						
Incom						Α		Properti B	ies:		С
3		Ч		3			50.				0
4				4							
Exper											
5	Advertising			5							
6	Auto and trave	el (see ins	structions)	6							
7	•		nce	7		7	90.				
8				8							
9				9							
10 11	•		sional fees	10		1 5	10				
12	-		to banks, etc. (see instructions)	12		, ~	40.				
13	Other interest	•		13							
14	Repairs			14		3,2	.05.				
15				15			50.				
16	Taxes			16							
17				17		1,5	20.				
18	•	expense o	pr depletion	18							
19	Other (list)			19		11 0					
20			nes 5 through 19	20		11,0	05.				
21			ne 3 (rents) and/or 4 (royalties). If structions to find out if you must								
	file <b>Form 6198</b>		· · · · · · · · · · · · · · ·	21		-10,3	55.				
22	Deductible rer	ntal real e	estate loss after limitation, if any,								
		-	ructions)	22	(	10,35	-	(	)	(	)
<b>23</b> a			ported on line 3 for all rental prope				23a		650.		
b			ported on line 4 for all royalty prop				23b				
c c			ported on line 12 for all properties				23c				
d e			ported on line 18 for all properties ported on line 20 for all properties		· · · ·		23d 23e	11	,005.		
24			amounts shown on line 21. Do no				200	<u>+</u>	. 24		
25		-	ses from line 21 and rental real estat		-		nter to	tal losses her		(	10,355.)
26			e and royalty income or (loss).								.,,
	here. If Parts I	II, III, and	I IV, and line 40 on page 2 do no	ot appl	ly to you	, also e	enter t	his amount o			
	Schedule 1 (Fo	orm 1040	), line 5. Otherwise, include this a	mount			ine 41		· 26	-	-10,355.
For Pa	perwork Reduct	tion Act N	otice, see the separate instructions	<b>.</b>	NI	PA		-10,355	)• Sc	hedule E (F	orm 1040) 2023