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.....

Тахрау	er's name	Social securi	ity numb	er		
SRU	THI MALLADI	812-11	-1912			
Spouse	's name	Spouse's soo	cial secu	rity number		
Dev	Tay Datum Information Tay Vacy Ending December 21 0000 (Ente					
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r year you a	are aut	norizing.)		
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	69,828.		
2	Total tax		2	7,622.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	6,994.		
4	Amount you want refunded to you		4			
5	Amount you owe		5	628.		
Part	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

GLOBAL	TAXES	LLC	to enter or generate my PIN	L
0H0DIIH	111110			

1	1	9	1	2	
Ent don	er fiv i't er	/e di nter a	gits, all ze	but ros	as

my

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 🕨

X I authorize

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 signature ►	(Rac) E	Date	• 04	4/11/2	2024	4						
Practitioner PIN Metho	d Returns Only—continu	e bel	ow									
Part III Certification and Authentication – Practiti	oner PIN Method Only											
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your fiv	e-digit self-selected PIN.	2	2	2						2	7	1
					Don	't en	nter a	ill ze	ros			

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 🕨	
	ERO Must Retain This F Don't Submit This Form to the	 	
	A Matter and constant and and instantions	REV 00/07/04 RRO	Form 9970 (Day, 01 0001)

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545	-0074	IRS Use Only	–Do not w	rite or staple in this space.
For the year Jan	. 1–Dec	a. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	parate instructions.
Your first name	and mi	iddle initial	Last na	ime						Your so	cial security number
SRUTHI			MALI	ADI						812	11 1912
	oouse's	s first name and middle initial	Last na								's social security number
										737	91 6437
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ons.				A	pt. no.		ntial Election Campaign
8229 TOF	PAZ (COURT								1	here if you, or your
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	paces be	low.	Sta	te	ZIP co	ode		if filing jointly, want \$3 this fund. Checking a
WEST CHE	STER	2				OF	ł	452	41	, v	ow will not change
Foreign country	name		1	Foreign p	rovince/state/o	count	ty	Foreig	n postal code	your tax	k or refund.
											You Spouse
Filing Status		Single					Head of h	ouseh	old (HOH)		
Check only		Married filing jointly (even if only o	ne had i	income)			_				
one box.		Married filing separately (MFS)							ring spouse		
		you checked the MFS box, enter the					ecked the HOF	l or QS	SS box, ente	er the chi	ld's name if the
	qu	alifying person is a child but not you	ir deper	naent: H	RAJU JAI	DT					
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward	d, award, or	payr	nent for prope	rty or :	services); or	(b) sell,	
Assets	exch	ange, or otherwise dispose of a dig	ital asse	et (or a fii	nancial intere	est ir	n a digital asse	et)? (Se	e instructio	ns.)	🗌 Yes 🛛 No
Standard	Som	eone can claim: 🗌 You as a de	penden	t 🗌	Your spouse	e as	a dependent				
Deduction	<u> </u>	Spouse itemizes on a separate retur	n or you	u were a	dual-status a	alien	l				
Age/Blindness	You:	Were born before January 2, 1	959	Are b	lind Spo	use	: 🗌 Was bor	n befc	ore January 2	2, 1959	Is blind
Dependents	s (see	instructions):		(2) \$	Social security		(3) Relationsh	ip (4) Check the b	ox if quali	ifies for (see instructions):
If more		irst name Last name			number		to you		Child tax c	redit	Credit for other dependents
than four											
dependents, see instructions											
and check	·										
here 🗌											
Income	1a	Total amount from Form(s) W-2, b	•		,					. 1a	
Attach Form(s)	b	Household employee wages not re	•		. ,	•		• •		. 1b	
W-2 here. Also	c	Tip income not reported on line 1a			,			• •		. <u>1</u> c	
attach Forms W-2G and	d	Medicaid waiver payments not rep			, ,			• •		. 1d	
1099-R if tax	e	Taxable dependent care benefits f						• •	• • •	. 1e	
was withheld. If you did not	f	Employer-provided adoption bene						• •		. 1f	
get a Form	y h	Wages from Form 8919, line 6 . Other earned income (see instruct		· · ·		•		• •		. <u>1g</u> . 1h	
W-2, see instructions.	i	Nontaxable combat pay election (see	,			•	· · · · ·				
	z	Add lines 1a through 1h								. 1z	79,675.
Attach Sch. B	2a		2a			bТ	axable interest	t.		. 2b	
if required.	3a		3a				ordinary divide			. 3b	,
	4a	IRA distributions	4a				axable amoun			. 4b	,
Standard Deduction for—	5a	Pensions and annuities	5a			bТ	axable amoun	t		. 5b)
 Single or 	6a	Social security benefits	6a			bΤ	axable amoun	t		. 6b)
Married filing separately,	с	If you elect to use the lump-sum e	lection r	method,	check here	(see	instructions)		[
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche	dule D i	f require	d. If not requ	ired	, check here		[7	
jointly or	8	Additional income from Schedule	·							. 8	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is y	our total inc	ome	e			. 9	69,828.
\$27,700 • Head of	10	Adjustments to income from Sche								. 10	
household,	11	Subtract line 10 from line 9. This is	-							. 11	,
\$20,800 If you checked _T	12	Standard deduction or itemized								. 12	
any box under Standard	13	Qualified business income deduct		1 Form 8	995 or Form	899	5-A	• •		. 13	
Deduction, see instructions.	14	Add lines 12 and 13		· · ·	· · · ·		· · · ·			. 14	
	15	Subtract line 14 from line 11. If zer	o or les	s, enter	-u This is y	our	axable incom	ie .		. 15	55,978.

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	(s): 1 🗌 881	4 2 4972	3 🗌		16	7,622.
Credits	17	Amount from Schedule 2, lin	e3				[17	
	18	Add lines 16 and 17					[18	7,622.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8				[20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	7,622.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is					[24	7,622.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 6	,994.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c	,					25d	6,994.
If you have a	26	2023 estimated tax payment					1	26	
qualifying child,	27	Earned income credit (EIC)				27	Ī	-	
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit				29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31				-		32	
	33	Add lines 25d, 26, and 32. T	•		-			33	6,994.
Refund	34	If line 33 is more than line 24						34	
neruna	35a	Amount of line 34 you want						35a	
Direct deposit?	b	Routing number X X X					Savings		
See instructions.	ď	Account number X X X					carnige		
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24	•••••						
You Owe	57	For details on how to pay, g						37	628.
	38	Estimated tax penalty (see in				38		•	0101
Third Party		you want to allow another	,						
Designee		structions	•				omplete be	elow.	× No
200.9.100	De	signee's		Phone			, onal identific		
	nai	ne		no.		num	oer (PIN)		
Sign		der penalties of perjury, I declare the							
Here	Dei	ief, they are true, correct, and com	piete. Declaration	i preparer (ourie	,				, ,
	Yo	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?				(see in					
See instructions.	Sp	Spouse's signature. If a joint return, both must sign		Date	Spouse's occupat		If the I	RS ser	nt your spouse an
Keep a copy for	-1-						Identit	y Prote	ection PIN, enter it here
your records.							(see in	st.)	
	Ph	one no. (510) 598-761	7	Email address	RAJU.JAID	I@GMAIL.COM	Ι		
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN	7	Check if:
Preparer	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAG	GAR GUPTA	04/12/2024	P02082	703	Self-employed
Use Only	Fir	m's name GLOBAL TAX	XES LLC				Phone	e no. (678)965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's	EIN	84-3171965
Go to www.irs.go	ov/Form	n1040 for instructions and the late	st information.		BAA	REV 03/07/24 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 2

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	al security number
SRUTHI MALLADI		812-11	-1912
Part I Additio	onal Income		

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	-9,847.
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	_	
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:	~		
~	Tatal athen income. Add lines On through On	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		10	-9,847.
Ear De	1040, 1040-SR, or 1040-NR, line 8		10 Cabadala	
FOI Fa	perwork neuronon Activolice, see your lak return instructions.		schedule	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 24d		
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:		
05	Tatal athen adjustments. Add lines 04a through 04a	05	
25 06	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 and on Form 1040, 1040-SR, or 1040-NR, line 10	06	
		26	
	BAA REV 03/07/24 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.)

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information.

2023
Attachment Sequence No. 13

Name(s	ame(s) shown on return							Your social security number		
SRUI							812-1	812-11-1912		
Part	I Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	n d Roy rty, use	valties Schedule	C . See	instruc	tions. If you a	ire an ind	vidual, rep	oort farm	
	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions							🗌 Yes 🖄 No		
BI	If "Yes," did you or will you file required Form(s) 1099?								es 🗌 No	
1 a	Physical address of each property (street, city, state, ZIP code)									
Α	4-118/3 KOTHAPALLY NIZAMABAD TELANGANA	A IN	50321	.8						
B										
C					1				1	
1b		above, report the number of fair rental			Fair Rental Days		Personal Use Days		QJV	
Α	3 personal use days. Check the Q			nly A		365	0			
В		if you meet the requirements to file as qualified joint venture. See instructions								
С	quained joint venture. See insite			С						
	of Property:									
	Single Family Residence3 Vacation/Short-Term RenMulti-Family Residence4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (desci	ribe)			
						Properti	es:			
Incon	ne:			Α		В	С			
3	Rents received	3		4	85.					
4	Royalties received	4								
Exper										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,4	28.					
8		8								
9		9								
10	Legal and other professional fees	10			0.0					
11	Management fees	11		1,1	89.					
12 13	Mortgage interest paid to banks, etc. (see instructions)Other interest	12								
13	Other interest	13		2,5	85					
15		14		2,2						
16		16		212	55.					
17		17		2,8	91.					
18	Depreciation expense or depletion	18		_, -						
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		10,3	32.					
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			~ ~ ~	, -					
00	file Form 6198	21		-9,8	4/.					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(9,84	7.)(,	()	
23a	Total of all amounts reported on line 3 for all rental prope				23a		485.		,	
b	Total of all amounts reported on line 4 for all royalty prop				23b					
c	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties				23d					
е	Total of all amounts reported on line 20 for all properties				23e	10	,332.			
24	Income. Add positive amounts shown on line 21. Do not include any losses									
25	Losses. Add royalty losses from line 21 and rental real estat	e losse	s from lin	e 22. Ei	nter tot	al losses her	e 25	(9,847.)	
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this a						n . 26		-9,847.	