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 secur	ity number	
VIJAYA LAKSHMI THALUKULA	520-89	-2965	
Spouse's name		cial security number	
Dart Land Determine the Land Land Land Land Land Land Land Land	2000 /Fretonico		
	2023 (Enter year you a	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.			
1 Adjusted gross income		1 73,	773.
2 Total tax			491 .
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		<u> </u>	406.
4 Amount you want refunded to you			915.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure yo	u get and keep a cor	y of your return	1)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original my knowledge and belief, it is true, correct, and complete. I further declare that the amounts return (original or amended) I am now authorizing. I consent to allow my intermediate service properto send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I and Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution payment of my federal taxes owed on this return and/or a payment of estimated tax, and the finanthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent at 1-888-353-4537. Payment can business days prior to the payment (settlement) date. I also authorize the financial institutions in taxes to receive confidential information necessary to answer inquiries and resolve issues repersonal identification number (PIN) below is my signature for the income tax return (original or Electronic Funds Withdrawal Canada.	in Part I above are the amovider, transmitter, or electroason for rejection of the tuthorize the U.S. Treasury an account indicated in the fancial institution to debit the to terminate the authorizencellation requests must be nvolved in the processing collated to the payment. I further transmitters are the authorizencellation requests must be now the factor of the payment. I further transmitters are the authorized to the payment.	counts from the inco- conic return originator ransmission, (b) the and its designated Fi cax preparation softwater e entry to this account action. To revoke (can e received no later of the electronic paynether acknowledge the total paynether acknowledge the control or the section of the control or the section of the sec	me tax r (ERO) reason nancial vare for nt. This incel) a than 2 ment of hat the
Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only			
	or generate my PIN		ac my
ERO firm name	Er de	nter five digits, but on't enter all zeros	as my
signature on the income tax return (original or amended) I am now authorizing	-	Ob I - #l-! - I	
I will enter my PIN as my signature on the income tax return (original or ame if you are entering your own PIN and your return is filed using the Practition below.			
Your signature ▶	Date ►		
Spouse's PIN: check one box only	_		
• —	or generate my PIN		as my
ERO firm name	• -	nter five digits, but	ao my
signature on the income tax return (original or amended) I am now authorizing	g. do	on't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or ame if you are entering your own PIN and your return is filed using the Practition below.			
Spouse's signature ▶	Date ►		
Practitioner PIN Method Returns Only—conf	tinue below		
Part III Certification and Authentication — Practitioner PIN Method O	nly		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PI		6 0 8 2 7 ter all zeros	1
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm the requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file	nat I am submitting this ret	urn in accordance w	
ERO's signature ▶	Date ►		
ERO Must Retain This Form — See Inst			
Don't Submit This Form to the IRS Unless Requ	uested To Do So		

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



£104 (artment of the Treasury-Internal Revenue Serv S. Individual Income Tax		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.
For the year Ja	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	parate	instructions.
Your first name	e and m	iddle initial	Last na	me							Your so	cial sec	curity number
VIJAYA :	LAKS	HMI	THAL	UKULA							520	89	2965
If joint return, s	pouse's	s first name and middle initial	Last na	me							Spouse'	s social	security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				A	pt. no.		Preside	ntial Ele	ection Campaig
5469 GU	ENOC	VALLEY LANE											
City, town, or p	oost offi	ice. If you have a foreign address, also co	omplete s	paces belo	ow.	Stat	te	ZIP c	ode		•	_	
ANTIOCH						CA	Δ	945	31		•		•
Foreign countr	y name		F	Foreign pro	ovince/state/	count	у	Foreig	ın postal c	ode	your tax		
Filing Status	s X	Single					Head of he	ouseh	old (HOH	 -)			
-		Married filing jointly (even if only o	ne had i	ncome)									
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spot	use (C	QSS)		
	If y	you checked the MFS box, enter the	name c	of your sp	ouse. If you	ı che	cked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the
	qu	ıalifying person is a child but not you	ur depen	ident:									
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	award or	navn	nent for prope	rtv or	services): or (h) sell		
												□ Ye	es 🗵 No
								, ,					
			•				•						
A ma /Dlindnaa								n bofe	wa lanu	a.m O	1050		a blind
			959 _	Ī	<u> </u>			14					
(1) First name Last name number						ip (
	(.,.												
dependents,													
	s —								[_			
here]												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruct	tions) .						1a		87,236.
	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	structions	s)						1c	:	
attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s)	W-2 (see ii	nstru	ctions)				1d		
1099-R if tax	е	Taxable dependent care benefits t	from For	m 2441,	line 26						1e		
was withheld.	f		efits from	Form 88	339, line 29						-		
If you did not	g	=									1g	4	
W-2, see	h	,	,					· ·			1h		0.
instructions.			see instr	ructions)			<u>l 1i</u>						07 006
	<u>z</u>				· · · · ·	 . . -							87,236.
Attach Sch. B if required		· –											
							-						
Standard)	_											
Deduction for—	A LAKSHMI THALIKULA 520 89 2956 ms, spouse's first name and middle initial Last name Spouse's coid security name first name and middle initial Last name Spouse's coid security name first name and middle initial Last name Spouse's coid security name first name at several, if you have a foreign address, also complete spaces below. State ZIP code Spouse if filing jountly, or you shall not not your description of the province/state/countly Foreign postal code in your last or refund. You will not of the province/state/countly Pountly name first name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a clipital asset (or a financial interest in a clipital asset) (see instructions) A Someone can claim: Vou as a dependent: You say suppose as a dependent of the control of the property or services); or (b) sell, exchange, or otherwise dispose of a clipital asset (or a financial interest in a clipital asset) (see instructions) A Someone can claim: Vou as a dependent: You say suppose as a dependent or property or services); or (b) sell, exchange, or otherwise dispose of a clipital asset (or a financial interest in a digital asset) (see instructions) (b) Household employee vages on terported on Form(s) W-2 (c) Social security (c) Prestoment (c) Prest												
Filing Status Check only one box. Single Married filing jointly (even if only one had income) Married filing separately (MFS) If you checked the MFS box, enter the name of your spouse. If you qualifying person is a child but not your dependent: Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or exchange, or otherwise dispose of a digital asset (or a financial interd poduction Someone can claim: Someone can cla					· ·]							
		•		•		`	,			:	7		
Married filing										. –			-13,463.
Qualifying			•										73,773.
				•							_		
		•										_	73 , 773.
\$20,800			•	-	-								13,850.
any box under	_												,
Standard Deduction,													13,850.
see instructions.													59 923

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 🗌		. 16	8,491.	
Credits	17	Amount from Schedule 2, lin						. 17		
	18	Add lines 16 and 17						. 18	8,491.	
	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	8,491.	
	23	Other taxes, including self-er	mployment tax,	from Schedule	2, line 21			. 23	0.	
	24	Add lines 22 and 23. This is	your total tax					. 24	8,491.	
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				25a	12,40	6.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions				25c				
	d	Add lines 25a through 25c						. 25d	12,406.	
If you have a	26	2023 estimated tax payment	s 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	n Schedule 8812	2		28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	e 15			31				
	32	Add lines 27, 28, 29, and 31.	These are your	total other pa	ayments and refu	ındable credi	ts .	. 32	1	
	33	Add lines 25d, 26, and 32. T	-					. 33	12,406.	
Refund	34	If line 33 is more than line 24						. 34	3,915.	
	35a	Amount of line 34 you want I				•		□ 35a	3,915.	
Direct deposit?	b	Routing number 1 2 1				Checking	Savir			
See instructions.	d	Account number 3 2 5								
	36	Amount of line 34 you want a	pplied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount vou owe.						
You Owe		For details on how to pay, go						. 37		
	38	Estimated tax penalty (see in	structions) .			38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	n with the IRS?	See				
Designee	ins	structions				. LYes	. Compl	ete below.	⊠ No	
		signee's me		Phone no.			Personal id umber (P	dentification		
Cian		der penalties of perjury, I declare th	at I have examined		accompanying sche		•		of my knowledge and	
Sign		lief, they are true, correct, and com								
Here	Yo	ur signature		Date	Your occupation		1	If the IRS se	ent you an Identity	
		· ·			·			Protection F	PIN, enter it here	
Joint return?					SOFTWARE I		,	(see inst.)		
See instructions. Keep a copy for your records.		Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupati	on		If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Ph	one no. (964) 226-334	5	Email address	TALUKULAVIJAYA	ALAXMI@GMAII	.COM			
Daid	Pre	eparer's name	Preparer's signat	ture		Date	PTII	٧	Check if:	
Paid	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAC	GAR GUPTA	04/15/202	24 P02	2082703	Self-employed	
Preparer							(678) 965-9522			
Use Only		m's address 245 ROONE		NSWICK N	J 08816			Firm's EIN	84-3171965	
Go to wave ire a		n1040 for instructions and the later							Form 1040 (2022)	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

VIJAYA LAKSHMI THALUKULA

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

•		Sequence No. 01
	Your soc	ial security number
	520-89	-2965

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	-13,463.
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 ($\overline{)}$	
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		
- 1	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 ()	
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:			
		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	-13 , 463.

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-basis government	nent	
	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		
15	Deductible part of self-employment tax. Attach Schedule SE		
16	Self-employed SEP, SIMPLE, and qualified plans		
17	Self-employed health insurance deduction	. 17	
18	Penalty on early withdrawal of savings		
19a	Alimony paid		a
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction		
21	Student loan interest deduction		
22	Reserved for future use		
23	Archer MSA deduction	. 23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l 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		
_	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		
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and		
	Form 1040, 1040-SR, or 1040-NR, line 10	. 26	

SCHEDULE E (Form 1040)

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

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/ScheduleE for instructions and the latest information.

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number VIJAYA LAKSHMI THALUKULA 520-89-2965 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 . В If "Yes," did you or will you file required Form(s) 1099? ☐ Yes 1a Physical address of each property (street, city, state, ZIP code) 6-49, HITECH TYRE RETRADING KOTHAVALASA ANDHRA PRADESH IN 535183 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 **Days 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. C C

Type of Property:

Income:		Α	В	С
			Properties:	
2 Multi-Family Residence	4 Commercial	6 Royalties	8 Other (describe)	
1 Single Family Residence	3 Vacation/Short-Term Rental	5 Land	/ Self-Rental	

Incon	ne:		Α		В	С	
3	Rents received	3	6	42.			
4	Royalties received	4					
Expe							
5	Advertising	5					
6	Auto and travel (see instructions)	6					
7	Cleaning and maintenance	7	2,5	13.			
8	Commissions	8					
9	Insurance	9					
10	Legal and other professional fees	10					
11	Management fees	11	2,1	50.			
12	Mortgage interest paid to banks, etc. (see instructions)	12					
13	Other interest	13					
14	Repairs	14	2,6	97.			
15	Supplies	15	2,4	51.			
16	Taxes	16					
17	Utilities	17	2,0	48.			
18	Depreciation expense or depletion	18	2,2	46.			
19	Other (list)	19					
20	Total expenses. Add lines 5 through 19	20	14,1	05.			
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	-13,4	63.			
22	Deductible rental real estate loss after limitation, if any,						
	on Form 8582 (see instructions)	22	,		•)()
23a	Total of all amounts reported on line 3 for all rental proper			23a	642.		
b	Total of all amounts reported on line 4 for all royalty properties.			23b			
С	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	2,246.		
е	Total of all amounts reported on line 20 for all properties			23e	14,105.		
24	Income. Add positive amounts shown on line 21. Do not		•		24		
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from line 22. Er	nter to	tal losses here 25	(13,463	3.)

26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 -13**,**463.