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.

Submission Identification Number (SID)

Taxpayer's name	Social security number
VIJAYA LAKSHMI THALUKULA	520-89-2965
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2023 (En	ter 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.	
1 Adjusted gross income	1 73,773.
2 Total tax	2 8,491.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 12,406.
4 Amount you want refunded to you	4 3,915.
5 Amount you owe	5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	d 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 amend	led) 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 I authorize

		T T O	
GLOBAL T	AXES	LLC	to enter or generate my PIN

Ent	er fiv n't er	/e di	gits, all ze	but	as
9	2	9	6	5	

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 Vijaya Lakshmi Thalukula

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date

				as my
er fiv i't er				

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 ►	D	ate 🕨									
	Practitioner PIN Method Returns Only—continue	bel	ow								
Part III Certification and	Authentication – Practitioner PIN Method Only										
ERO's EFIN/PIN. Enter your six-	-digit EFIN followed by your five-digit self-selected PIN.	2	2						2	7	1
				Dor	rτei	nter a	an 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 🕨		
Don	ERO Must Retain This F t Submit This Form to the I	-			
For Donomucul: Deduction Act Nation	and warm tax waterer instructions		DEV/ 02/07/24 DBO	Earm 8879 (Bay, 01.20	1011

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/07/24 PRO

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta >		turn	202	3	OMB No. 1545	-0074	IRS Use Only	–Do not w	vrite or sta	aple in this space.
For the year Jan	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	urity number
VIJAYA I	AKSI	НМТ	ТНА	LUKULA	Ą					520	89	2965
		s first name and middle initial	Last r									security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.	Preside	ntial Ele	ection Campaigr
5469 GUE	ENOC	VALLEY LANE										ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode			jointly, want \$3 nd. Checking a
ANTIOCH						CZ	7	945		box bel	ow will	not change
Foreign country	/ name			Foreign p	rovince/state/o	coun	ty	Foreig	n postal code	your tax		_
											∐ Yo	ou Spouse
Filing Status	; 🗵	Single					Head of h	ouseh	old (HOH)			
Check only		Married filing jointly (even if only or	ne hac	l income)						(0.0.0)		
one box.	L	Married filing separately (MFS)		-f					ring spouse	. ,		
		you checked the MFS box, enter the alifying person is a child but not you									lid's na	me if the
		anying person is a child but not you										
Digital		ny time during 2023, did you: (a) rece									_	
Assets		nange, or otherwise dispose of a digi		<u> </u>				et)? (Se	e instructio	ns.)		es 🛛 No
Standard		neone can claim: 🗌 You as a de	•				a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	1					
Age/Blindness	s You	: 🗌 Were born before January 2, 1	959	Are bl	lind Spc	ouse	: 🗌 Was bor	n befo	ore January	2, 1959		s blind
Dependents	s (see	instructions):		(2) 5	Social security	,	(3) Relationsh	_{ip} (4) Check the b	ox if quali	fies for ((see instructions):
lf more	(1) F	irst name Last name			number		to you		Child tax c	redit	Credit fo	or other dependents
than four												
dependents, see instructions	s ——											
and check	. —											
here 🗆												
Income	1a	Total amount from Form(s) W-2, b	•		,						-	87,236.
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2							. 1b			
W-2 here. Also attach Forms	c d		•							. 1c . 1d	-	
W-2G and	e u	Medicaid waiver payments not rep Taxable dependent care benefits f			, ,			• •	• • •	. 1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene						• •		. 1f		
If you did not	a	Wages from Form 8919, line 6 .								. 1g		
get a Form	h	Other earned income (see instructi								. 1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,	structions)			1i					
	z	Add lines 1a through 1h								. 1z		87,236.
Attach Sch. B	2a	Tax-exempt interest	2a			bТ	axable interest	t.		. 2b)	
if required.	3a	Qualified dividends	3a			b C	Ordinary divide	nds .		. 3b	1	
Chanadanad	4a	IRA distributions	4a				axable amoun			. 4b)	
Standard Deduction for—	5a	Pensions and annuities	5a				axable amoun			. 5b)	
 Single or Married filing 	6a	, _	6a				axable amoun	t		. 6b		
separately,	С	If you elect to use the lump-sum e						• •	l			
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche						• •	l		_	10 400
jointly or Qualifying	8	Additional income from Schedule								. 8		-13,463.
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-				• •		. 9		73,773.
 Head of 	10 11	Adjustments to income from Sche						• •		. 10		73 773
household, [\$20,800	<u>11</u> 12	Subtract line 10 from line 9. This is Standard deduction or itemized	-					• •		. <u>11</u> . 12		73,773. 13,850.
 If you checked any box under 	13	Qualified business income deduction						• •		· 12 · 13	-	13,000.
Standard	14	Add lines 12 and 13				. 055		•••		. 14		13,850.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ss. enter	-0 This is v	our t	taxable incom	ie .				59,923.
									· · ·			

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	8,491.
Credits	17	Amount from Schedule 2, lir	ne3					. 17	
	18	Add lines 16 and 17						. 18	8,491.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			. 19	
	20	Amount from Schedule 3, lir	ne8					. 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-e	mployment tax,	from Schedule	e 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	12,4	06.	
	b	Form(s) 1099				25b			
	с	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						. 25d	12,406.
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)			No	27			
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable cred	lits .	. 32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				. 33	12,406.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	int you overp	aid.	. 34	3,915.
	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attached, che	ck here .		35a	3,915.
Direct deposit?	b	Routing number 1 2 1				Checking	Savi	ings	
See instructions.	d	Account number 3 2 5	1 8 0 1	2 3 1 3	3 9				
	36	Amount of line 34 you want	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						. 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	· · · · ·			🗌 Ye	s. Comp	lete below.	🗙 No
		signee's		Phone				identification	
<u></u>	na		hat I have averaine	no.			number (l	,	of my knowledge and
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com							
Here	Vo	ur signature		Date	Your occupation			If the IBS se	nt you an Identity
	10	ul signature		Date					IN, enter it here
Joint return?					SOFTWARE	DEVELOPE	R	(see inst.)	
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupat	tion			nt your spouse an
Keep a copy for your records.								Identity Prote (see inst.)	ection PIN, enter it here
,									
		one no. (964) 226-334		Email address	TALUKULAVIJAY				Check if:
Paid		eparer's name	Preparer's signat			Date	PT		Check if:
Preparer			SYAM PRIY	A RAM SAG	JAR GUPTA	04/15/20	24 PO	2082703	Self-employed
Use Only		m's name GLOBAL TAX							678)965-9522
			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 F	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.

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

OMB No. 1545-0074 2023

Attachment Sequence No. **01**

Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number

VIJA	IARSHMI THALUKULA		520-8	9-296	65
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	Ε.	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 ()		
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				
	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	<u>8u</u>			
Z	Other income. List type and amount:	0-			
0	Tatal other income. Add lines to through 97	8z		9	
9 10	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.
	perwork Reduction Act Notice, see your tax return instructions.				
For Pa	perwork Reduction ACT NOTICE, see your tax return instructions.		e e	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 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

	DULE E		Supplementa							OMB No. 1545-0074			
(Form	1040)	(Fron	n rental real estate, royalties, partner	ships, S	6 corporat	ions, es	tates,	trusts, REMI	Cs, etc.)	20	93		
Departm	ent of the Treasury		Attach to Form 1040							Attachm			
Internal	Revenue Service		Go to www.irs.gov/ScheduleE f	or instr	uctions an	d the la	test in	formation.		Sequen	ce No. 13		
Name(s)	shown on return								Your soci	al security	number		
	YA LAKSHMI								520-8	9-2965			
Part			oss From Rental Real Estate a										
	Note: If yo	ou are ir	n the business of renting personal prope loss from Form 4835 on page 2, line 40	erty, use	Schedule	e C. See	instruc	ctions. If you a	are an indi	vidual, rep	ort farm		
Α			ments in 2023 that would require you		Form(s)	10002 5	oo ine	tructions			e X No		
			I you file required Form(s) 1099?		. ,								
										10			
1a			each property (street, city, state, Z		,								
Α	6-49, HITE	СН ТУ	YRE RETRADING KOTHAVALAS	A ANI	DHRA PI	RADES	H IN	535183					
B													
С							1						
1b	Type of Prope		2 For each rental real estate prop				Fai	ir Rental	Persor		QJV		
	(from list below	<i>N</i>)	above, report the number of fail					Days	Da	ys			
A	3		personal use days. Check the C if you meet the requirements to			A		365		0			
В			qualified joint venture. See instr			В							
С			. ,			С							
•••	of Property:												
	Single Family R			ntal	5 Lanc			Self-Rental	、				
2	Multi-Family Re	sidenc	ce 4 Commercial		6 Roya	alties	8	Other (desc	ribe)				
								Properti	es:				
Incom	ne:					Α		В			С		
3	Rents received	1. L		3		6	42.						
4	Royalties rece	ived.		4									
Exper													
5	Advertising .			5									
6	Auto and trave	el (see i	instructions)	6									
7	Cleaning and r	mainte	mance	7		2,5	13.						
8	Commissions			8									
9	Insurance			9									
10	Legal and othe	er profe	essional fees	10									
11	Management f	ees .		11		2,1	50.						
12			aid to banks, etc. (see instructions)	12									
13	Other interest			13									
14	Repairs			14			97.						
15				15		2,4	51.						
16				16									
17				17		2,0							
18		expense	e or depletion	18		2,2	46.						
19	Other (list)			19									
20			lines 5 through 19	20		14,1	05.						
21			n line 3 (rents) and/or 4 (royalties). If										
			instructions to find out if you must			10.4	c 0						
~~				21		-13,4	63.						
22			al estate loss after limitation, if any,		/	10 44			```	/			
			nstructions)	22	(13,46)	(
23a			reported on line 3 for all rental prop			•	23a		642.				
b			reported on line 4 for all royalty pro				23b						
C C			reported on line 12 for all properties				23c	~	2,246.				
d			reported on line 18 for all properties				23d		,246. ,105.				
е 24			reported on line 20 for all properties e amounts shown on line 21. Do no				23e	14	. 24				
24 25			osses from line 21 and rental real esta		-		· ·	· · · · ·		(-	13,463.		
			tate and royalty income or (loss).								10,403.		
26			and 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 . NPA For Paperwork Reduction Act Notice, see the separate instructions.

26

-13,463.

-13,463.