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

- Internal n	levellue del vice										
Submis	ssion Identification Number (SID)										
Taxpayer's name Social security number											
SUNE	EEL BUDDULA	578-6	578-65-3848								
Spouse's				Spouse's social security number							
Part		023 (Ente	r year you	ı are au	thoriz	<u>zing.)</u>					
	whole dollars only on lines 1 through 5.										
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			1.4	ı	1.0	004				
	Adjusted gross income				-		024.				
	Total tax						418.				
					_		229.				
	Amount you want refunded to you				-		811.				
Part I	Amount you owe	uget and	keen a co	onv of v	/OUR	retur	n)				
	penalties of perjury, I declare that I have examined a copy of the income tax return (original										
to send for any of Agent to payment authoriza payment business taxes to persona	original or amended) I am now authorizing. I consent to allow my intermediate service promy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or redelay in processing the return or refund, and (c) the date of any refund. If applicable, I auto initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution to form federal taxes owed on this return and/or a payment of estimated tax, and the finatiation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment can be receive confidential information necessary to answer inquiries and resolve issues reliated information in the receive confidential information necessary to answer inquiries and resolve issues reliated information number (PIN) below is my signature for the income tax return (original or an	eason for reithorize the Unaccount inconcial institution to terminate cellation recovolved in the ated to the	ection of the J.S. Treasury dicated in the ion to debit the author quests must e processing payment. I	e transmisy and its of e tax prepthe entry rization. The receing of the elfurther ac	ssion, design caratic to this To rev ved neter to the care to the	(b) the nated Fon software (can be continued to be continued t	e reason inancial ware for int. This ancel) a than 2 ment of that the				
	yer's PIN: check one box only		Г								
X		or generate	my DINI	5 3 8	8 4	8	ac my				
	ERO firm name	•	IIIy I IIV	Enter five don't ente		, but	as my				
	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 amer if you are entering your own PIN and your return is filed using the Practition below.										
Your si	ignature ▶	Date ► _									
Spouse	e's PIN: check one box only		_								
		or generate	my PIN				as my				
	ERO firm name		Enter five digits, but								
	signature on the income tax return (original or amended) I am now authorizing			don't ente	r all ze	eros					
	I will enter my PIN as my signature on the income tax return (original or amer if you are entering your own PIN and your return is filed using the Practition below.										
Spouse	e's signature ►	Date ►									
	Practitioner PIN Method Returns Only—cont	inue belov	/								
Part I	Certification and Authentication — Practitioner PIN Method Or	ıly									
FRO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN	ı. 22	2 4 9	6 6		9 8	9				
	ET 1147 1141 Enter your one digit Et 114 followed by your 1140 digit oon oblocted 1 if	. [-]-		enter all ze	L L						
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individued to file for tax year indicated above for the taxpayer(s) indicated above. I confirm the ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file in the practic of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file in the practic of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file in the practic of the	at I am subr	nitting this r	eturn in a	accord	danće v					
ERO's	signature >	Date ▶									
	ERO Must Retain This Form — See Instr	uctions									
	Don't Submit This Form to the IRS Unless Requ		Do So								

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



1040		artment of the Treasury—Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.	
For the year Jan. 1–Dec. 31, 2023, or other tax year beginning					, 2023, ending , 20					See separate instructions.				
Your first name and middle initial Last na					 name						Your social security number			
SUNEEL BUDD											578	65	3848	
If joint return, spouse's first name and middle initial Last na													security numbe	
Home address	(numbe	er and street). If you have a P.O. box, see	inetructio	one				1	Apt. no.		Duosido	ntial Ele	ation Composit	
816 W R	•		HISTIUCIIC	JI15.					154	1			ection Campaigi ou, or your	
		ice. If you have a foreign address, also co	mplete si	spaces below. State Z			1 2 2					jointly, want \$3		
IRVING		,		TX			175020 1			•		nd. Checking a		
Foreign country	v name		F	oreign pr	rovince/state/				n postal c		your tax		not change ınd.	
	,			0 1			•	,	'		,			
Filing Status	s 🗵	☐ Head of household (HOH)												
Check only		Married filing jointly (even if only o	ne had i	ncome)			_							
one box.		Married filing separately (MFS)					☐ Qualifying	survi	ing spo	use (0	QSS)			
		you checked the MFS box, enter the			pouse. If you	u che	ecked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	
	qu	ıalifying person is a child but not you	ır depen	dent:										
Digital		ny time during 2023, did you: (a) rec												
Assets	exch	nange, or otherwise dispose of a dig	ital asse					et)? (Se	ee instru	ction	s.)	Y	es 🗵 No	
Standard	Som	neone can claim: 🔲 You as a de	pendent	t 🗌	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-status	alien								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bl	ind Sp	ouse	: Was bor	rn befo	ore Janua	ary 2,	, 1959		s blind	
Dependent	s (see	see instructions):			(2) Social security (3) Relationsh		ship (4) Check the be			x if quali	fies for ((see instructions)		
If more	(1) F	irst name Last name		number to you			to you	Child ta		ax cre	edit	Credit fo	or other dependents	
than four														
dependents, see instruction	s ——													
and check	, —													
here L]													
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		18,024.	
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2								1b				
W-2 here. Also	С.									1c				
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d				
1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26							1e					
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29							1f	_				
If you did not get a Form	g	Wages from Form 8919, line 6							1g					
W-2, see	h :	Other earned income (see instructions)								1h		0.		
instructions.	i		see instr	uctions)			11						10 024	
AII 1 2 : -	Z	Add lines 1a through 1h			· · i	 					1z		18,024.	
Attach Sch. B if required.	2a	· —	2a				axable interes				2b			
	3a_		3a				ordinary divide				3b			
Standard	4a	-	4a 5a				axable amoun axable amoun				4b 5b			
Deduction for—	5a										6b			
Single or Married filing	6a	,							· .	7 00				
separately, \$13,850	С 7	If you elect to use the lump-sum election method, check here (see instructions)								7				
Married filing	8	Additional income from Schedule 1, line 10								8				
jointly or Qualifying	9		7, and 8. This is your total income						9		18,024.			
surviving spouse, \$27,700	10	Adjustments to income from Schedule 1, line 26								10		10,021.		
Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								11	_	18,024.		
household, \$20,800	12	Standard deduction or itemized	-	-	_						12		13,850.	
If you checked any box under	13	Qualified business income deduct				-					13		±3,030.	
Standard	14										14		13,850.	
Deduction, see instructions.	15	Add lines 12 and 13									15		4 174	

Form 1040 (2023)									Page 2		
Tax and	16	Tax (see instructions). Check if ar	ny from Form	(s): 1 881	4 2 4972	3 🗌			. 16	418.		
Credits	17	Amount from Schedule 2, line 3										
	18	Add lines 16 and 17								418.		
	19	Child tax credit or credit for other dependents from Schedule 8812										
	20	Amount from Schedule 3, line 8										
	21	Add lines 19 and 20				. 21						
	22	Subtract line 21 from line 18. If z	zero or less,	enter -0	. 22	418.						
	23	Other taxes, including self-empl	oyment tax,	from Schedule	. 23	0.						
	24	Add lines 22 and 23. This is you	d 23. This is your total tax									
Payments	25	Federal income tax withheld from	m:									
-	а	Form(s) W-2										
	b	Form(s) 1099				25b						
	С	Other forms (see instructions)				25c						
	d	Add lines 25a through 25c							. 25d	1,229.		
If you have a	26	2023 estimated tax payments ar	nd 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 So	chedule 8812			28						
	29	American opportunity credit from	m Form 8863	3, line 8		29						
	30	Reserved for future use				30						
	31	Amount from Schedule 3, line 15										
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits										
	33	Add lines 25d, 26, and 32. These are your total payments							. 33	1,229.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid						. 34	811.			
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here								811.		
Direct deposit?	b	Routing number										
See instructions.	d	Account number 4 8 8 1 1 9 7 3 5 6 8 4										
	36	Amount of line 34 you want appl	lied to your	2024 estimate	ed tax	36						
Amount	37 Subtract line 33 from line 24. This is the amount you owe.											
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions										
	38	Estimated tax penalty (see instructions)										
Third Party	Do	you want to allow another pe	rson to disc	cuss this retur	n with the IRS?	See						
Designee	ins	tructions			.	Yes. Co	omple	te below.	⋉ No			
		signee's	Phone					identification				
	name no. number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the											
Sign		ief, they are true, correct, and complete										
Here	Your signature			Date Your occupation				- 1	If the IRS sent you an Identity			
	10	ui signature	Date	Tour occupation					IN, enter it here			
Joint return?					SOFTWARE DEVELOPER				(see inst.)			
See instructions.	opouco o oignaturoi ir a joint rotarri, zour muot oigin			Date Spouse's occupation					the IRS sent your spouse an			
Keep a copy for your records.								- 1	Identity Protection PIN, enter it here (see inst.)			
,		(50)244 (50)		- "			~					
		Phone no. (763)344-6530 Preparer's name Preparer's signa		Email address SUNEELBUDDULA@GM. ture Date			MAIL.CC	PTIN		Check if:		
Paid		'										
Preparer						470833	70000 = 7					
Use Only				MOUT OF M	T 00016			-	<u>-</u>	none no. (678)965-9522		
		m's address 245 ROONEY (NSWICK No				F	irm's EIN			
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest in	tormation.		BAA	REV 03	/07/24 PRO			Form 1040 (2023)		