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.

Submission Identification Number (SID)

Taxpay	er s name	Social secur	Social security number						
VEN	KATASAI HARITHUS MUDDU	808-83-8507							
Spouse	's name	Spouse's so	Spouse's social security number						
Par	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	er year you a	are aut	horizing.)					
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	79,538.					
2	Total tax		2	9,756.					
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12,798.					
4	Amount you want refunded to you		4	3,042.					
5	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

X	I authorize	GLOBAL	TAXES	ERO firm name	to enter or generate my PIN	Er
$\overline{\mathbf{v}}$	Louthorizo	CTODAT	mavec	TTC	to optor or concrete my DIN	13

l	3 8 5 0 7 Enter five digits, but don't enter all zeros									
	3	8	5	0	7					

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 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

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	Date 🕨										
Practitioner PIN Method Returns Only—continue below											
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			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.

RO's signature ► Date ►											
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So											
For Paperwork Reduction Act Notice, see your tax return	instructions. DAA	REV 02/05/24 PRO	Form 8879 (Rev. 01-2021)								

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use Only	–Do not w	vrite or sta	aple in this space.
For the year Jar	n. 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
VENKATAS	SAI I	HARITHUS	MUD	וזמסו						808	83	8507
		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
<u>15105 AN</u>												ou, or your
City, town, or p	ost offi	ice. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP c	ode		0	jointly, want \$3 nd. Checking a
FRANKLIN						TN		370	67	box bel	ow will	not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your tax		_
												ou Spouse
Filing Status	; 🗵	Single					Head of he	ouseh	old (HOH)			
Check only		Married filing jointly (even if only or	ne hac	l income)						(0.0.0)		
one box.		Married filing separately (MFS)							ring spouse	. ,		
		you checked the MFS box, enter the alifying person is a child but not you			pouse. If you	l che	ecked the HOH	l or Q	55 box, ente	er the ch	lid's na	me if the
	- qu	anying person is a child but not you	i uepe									
Digital		ny time during 2023, did you: (a) rece									_	F
Assets		hange, or otherwise dispose of a digi					-	t)? (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 b	lind Spo	ouse	: 🗌 Was bor	n befo	ore January 2	2, 1959		s blind
Dependent	s (see	instructions):		(2) \$	Social security	,	(3) Relationsh	ip (4) Check the b	ox if qual	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 instruction:	s ——											
and check	. —											
here												
Income	1a	Total amount from Form(s) W-2, b	•		,							93,959.
Attach Form(s)	b		•	d on Form(s) W-2						. 1b		
W-2 here. Also attach Forms	C L	Tip income not reported on line 1a	•							. 10		
W-2G and	d e	Medicaid waiver payments not rep Taxable dependent care benefits f		•	, ,		,	• •		. 1d . 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	9 h	Other earned income (see instructi								. 1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,				1i			-		
	z	Add lines 1a through 1h			·					. 1z		93,959.
Attach Sch. B	2a	Tax-exempt interest	2a			bΤ	axable interest	t.		. 2b)	
if required.	3a	Qualified dividends	3a			b C	Ordinary divider	nds .		. 3b)	
	4a	IRA distributions	4a			bΤ	axable amount	t		. 4b		
Standard Deduction for—	5a	Pensions and annuities	5a			bΤ	axable amount	t		. 5b)	
 Single or 	6a	,	6a				axable amount	t		. 6b		
Married filing separately,	С	If you elect to use the lump-sum e							[
\$13,850 Married filing	7	Capital gain or (loss). Attach Schee							[7	_	
jointly or Qualifying	8	Additional income from Schedule								. 8	_	-14,421.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						• •		. 9	_	79,538.
\$27,700 • Head of	10	Adjustments to income from Sche								. 10		70 500
household, \$20,800	11	Subtract line 10 from line 9. This is	-					• •		. 11	-	79,538.
If you checked	12	Standard deduction or itemized					 	• •		. 12	-	13,850.
any box under Standard	13 14	Qualified business income deducti Add lines 12 and 13			sso or form	099	ю-А	• •		. 13		13 050
Deduction, see instructions.	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer	· ·		-0- This is y		taxahle incom	 e		. <u>14</u> . 15		<u>13,850.</u> 65,688.
	15			, enter	0 1115 15 y	Jui		. 5		. 10	<u> </u>	00,000.

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	9,756.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17					[18	9,756.
	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	9,756.
	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	9,756.
Payments	25	Federal income tax withheld							
· · · , · · · · · ·	а	Form(s) W-2				25a 12	2,798.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction:	s)			25c			
	d	Add lines 25a through 25c	<i>.</i>					25d	12,798.
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)			No	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				undable credits		32	
	33	Add lines 25d, 26, and 32. T	•		-			33	12,798.
Refund	34	If line 33 is more than line 24						34	3,042.
	35a	Amount of line 34 you want				•	🗆 İ	35a	3,042.
Direct deposit?	b	Routing number 0 1 1					Savings		
See instructions.	d	Account number 0 0 3							
	36	Amount of line 34 you want a	applied 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, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	uss this retu	rn with the IRS?	' See			
Designee		tructions					omplete be	elow.	🗙 No
_		signee's		Phone			onal identific	cation	
<u></u>	nai			no.			ber (PIN)		- f l
Sign		der penalties of perjury, I declare tl ief, they are true, correct, and com							
Here		· · · · ·		Date	Your occupation				nt you an Identity
	10	ur signature		Dale	Four occupation				IN, enter it here
Joint return?					SPECIALTY	DEVELOPER	(see in	ist.)	
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	tion			nt your spouse an
Keep a copy for your records.							Identit (see in		ection PIN, enter it here
your rooordor							,	51.)	
		one no. (224) 817-282		Email address	MUDDU.HARI1	THUS@GMAIL.CO			
Paid		parer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	02/09/2024	P02082		Self-employed
Use Only		m's name GLOBAL TAX			- 00011				678)965-9522
			Y CT E BRU	NSWICK N			Firm's	EIN	84-3171965
Go to www.irs.go	ov/Forn	1040 for instructions and the late	st information.		BAA	REV 02/05/24 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.

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

OMB No. 1545-0074 2023

Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR VENKATASAI HARITHUS MUDDU

	Attachment Sequence No. 01								
Your social security number									
808-83	-8507								

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	ch Schedule E .	5	-14,421.
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			
		<u>8m</u>	_	
	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	80 (
	Pension or annuity from a nonqualifed deferred compensation plan or	<u>8s (</u>	/	
L	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u	-	
z	Other income. List type and amount:	<u>ou</u>	-	
2		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	-14,421.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedul	e 1 (Form 1040) 2023

1	Educator expenses					11	
2	Certain business expenses of reservists, performing artists, and fee				nont		
2	officials. Attach Form 2106	-Dasi	s go	venin	lent	12	
3	Health savings account deduction. Attach Form 8889	• •	• •	•••	•	13	
4	Moving expenses for members of the Armed Forces. Attach Form 3903					14	
- 5	Deductible part of self-employment tax. Attach Schedule SE					15	
6	Self-employed SEP, SIMPLE, and qualified plans					16	
7	Self-employed bealth insurance deduction					17	
8	Penalty on early withdrawal of savings					18	
9a						19a	
b	Recipient's SSN						
C	Date of original divorce or separation agreement (see instructions):					00	
20	IRA deduction					20	
1	Student loan interest deduction					21	
2	Reserved for future use					22	
3	Archer MSA deduction	• •	• •	• • •	•	23	
24	Other adjustments:						
а		24a				-	
b	Deductible expenses related to income reported on line 8l from the						
		24b					
С	Nontaxable amount of the value of Olympic and Paralympic medals						
		24c					
d		24d					
е	Repayment of supplemental unemployment benefits under the Trade						
		24e					
f	Contributions to section 501(c)(18)(D) pension plans	24f					
g		24g					
h	Attorney fees and court costs for actions involving certain unlawful						
	discrimination claims (see instructions)	24h					
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	24i					
j	Housing deduction from Form 2555	24j					
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form						
		24k					
z	Other adjustments. List type and amount:						
		24z					
5	Total other adjustments. Add lines 24a through 24z					25	
6	Add lines 11 through 23 and 25. These are your adjustments to income				don		
-	Form 1040, 1040-SR, or 1040-NR, line 10					26	

SCHE (Form	DULE E	(Erom	rontal roal c	Supplement estate, royalties, partner					tructo DEMIC	a ata)	OMB No. 1545-0074			
•	,	(FIOII	i rentai real e	Attach to Form 104	• •	•	-		ITUSIS, NEMIC	s, etc.)	20) 23		
	ent of the Treasury Revenue Service		Go to w	ww.irs.gov/ScheduleE f					nformation.		Attachm Sequen	nent ce No. 13		
Name(s)	shown on return			-						Your soci	al security			
VENK	ATASAI HAR	ITHUS	S MUDDU							808-8	3-8507			
Part				ental Real Estate a			• •							
	Note: If yo rental inco	ou are in me or lo	n the business oss from Forr	of renting personal prop n 4835 on page 2, line 40	erty, use).	e Schedule	e C . See	e instru	ctions. If you ar	e an indi	vidual, rep	ort farm		
A D				3 that would require yo		Form(s) 1	099? 3	See ins	structions		. 🗌 Ye	s 🛛 No		
B If	"Yes," did you	or will	you file requ	uired Form(s) 1099?							. 🗌 Ye	s 🗌 No		
1a	Physical addr	ess of	each propei	rty (street, city, state, Z	IP code	e)								
Α	3-7-339,	VAVII	ALAPALLY	NEAR GOPI	KRISH	HNA F	ARIM	NAGA	R, TELANG	ANA II	N 50500)1		
В														
С														
1b	Type of Prope			rental real estate prop				Fa	ir Rental	Persor	nal Use	QJV		
	(from list below	v)		eport the number of fai					Days	Da	ays			
	3			use days. Check the C eet the requirements to			Α		365		0			
				joint venture. See insti			B							
	of Property:						С							
	Single Family R	esiden	ce 3.Va	acation/Short-Term Re	ntal	5 Lanc	1	7	Self-Rental					
	Multi-Family Re			ommercial	in tea	6 Roya			Other (descri	be)				
						1		-						
Incom							Α		Propertie	es:		С		
Incom 3		4			3			548.	D			0		
4				· · · · · · · · ·	4			,10.						
Expen														
5					5									
6	-				6									
7					7		2,4	35.						
8					8									
9					9									
10					10									
11	0				11		1,9	966.						
12 13	Other interest		id to banks,	etc. (see instructions)	12									
14					14		2.7	45.						
15					15			310.						
16	• •				16		, -							
17	Utilities				17		2,6	531.						
18	Depreciation e	xpense	e or depletio	n	18		2,4	82.						
19					19									
20	•			ugh 19	20		15,0	69.						
21				s) and/or 4 (royalties). If										
	· ·			to find out if you must	21		-14,4	.21						
22				after limitation, if any,				•						
~~				· · · · · · · · · ·	22	(14,42	21.)	()	()		
23a			-	line 3 for all rental prop				23a	· · · · · · · · · · · · · · · · · · ·	648.		/		
b			-	line 4 for all royalty pro				23b						
с			•	line 12 for all properties				23c						
d			•	line 18 for all properties				23d		,482.				
е			•	line 20 for all properties				23e		,069.				
24				hown on line 21. Do no							1	14 401 \		
25				e 21 and rental real esta							(14,421.)		
26				/alty income or (loss) ine 40 on page 2 do n										
				therwise, include this						26		-14,421.		
For Pa				the separate instruction		NE			-14,421			1040 2023		

Schedule E (Form 1040) 2023