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	ver s name	Social security number								
VEN	IKATASAI HARITHUS MUDDU	808-83-8507								
Spous	o's name	Spouse's social security number								
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	year you	are auth	orizing.)						
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							
Par	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
------------	------	-------	-----	-----	------

X lauthorize GLOBAL TAXES LLC to enter or generate my PIN

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

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

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date

02/18/2024

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 sig	nature 🕨 🛛 🗖 Da	ate 🕨									
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.

ERO's signature 🕨									
Don't S									
an Benerical Deduction Act Nation and manual instructions DEV 00/05/04 DDO									

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 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	st name						Your social security number			
VENKATAS			MUD	חח								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	
15105 AM	1BIAI	NCE WAY										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	
FRANKLIN	1					TN	J	370	67			not change	
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your tax	k or refu	nd	
											Yo	ou Spouse	
Filing Status	; 🛛	Single					Head of he	ouseh	old (HOH)				
Check only		Married filing jointly (even if only o	ne hac	l income)			_						
one box.		Married filing separately (MFS)							ing spouse				
		ou checked the MFS box, enter the			pouse. If you	u che	ecked the HOF	l or Q	SS box, ente	er the ch	ild's na	me if the	
	qu	alifying person is a child but not you	ur depe	endent:									
Digital	At ar	ny time during 2023, did you: (a) rec	eive (a	s a reward	d, award, or	payr	ment for prope	rty or :	services); or	(b) sell,			
Assets	exch	hange, or otherwise dispose of a dig	ital ass	set (or a fi	nancial inter	est ir	n a digital asse	et)? (Se	e instructio	ns.)	□ Ye	es 🛛 No	
Standard	Som	eone can claim: 🗌 You as a de	pende	nt 🗌	Your spous	e as	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 Spo	ouse	: 🗌 Was bor	n befo	re January	2, 1959		s blind	
Dependents		· · · · · ·		(2) 5	Social security	,	(3) Relationsh	14			fies for ((see instructions):	
If more		irst name Last name			number		to you		Child tax c	redit	Credit fo	or other dependents	
than four													
dependents,													
see instructions and check	s												
here 🗌													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	ctions) .					. 1a		93,959.	
Attach Form(s)	b									. 1b)		
W-2 here. Also	С			structions)					. 10				
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 10				
1099-R if tax	e	Taxable dependent care benefits f		,						. 1e			
was withheld.	f	Employer-provided adoption bene						• •		. <u>1</u> f			
lf you did not get a Form	g	Wages from Form 8919, line 6 .			• • •			• •	· · ·	. 1g		0.	
W-2, see	h	Other earned income (see instruct	,	· · ·	• • •		· · · ·	· ·	• • •	. 1h		0.	
instructions.	i -	Nontaxable combat pay election (s Add lines 1a through 1h	see ms	structions)		• •	1 i			. 1z		93,959.	
Attack Sak D	z 2a	-	2a		· · · ·	 ьт	axable interest	• •	• • •	. 12 . 2b	-		
Attach Sch. B if required.	2a 3a		3a				Ordinary divider			. <u>26</u>	-		
	<u> </u>		4a				axable amoun			. 4b	-		
Standard	-та 5а		та 5а				axable amoun			. 5b	-		
 Deduction for — Single or 	6a		6a				axable amoun			. 6b	-		
Married filing separately,	c	If you elect to use the lump-sum e		method.	check here				[
\$13,850	7	Capital gain or (loss). Attach Sche				`	,		[7			
 Married filing jointly or 	8	Additional income from Schedule		•	•					. 8		-14,421.	
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	,				e			. 9		79 , 538.	
\$27,700	10	Adjustments to income from Sche		-						. 10			
 Head of household, 	11	Subtract line 10 from line 9. This is			gross incor	ne				. 11		79,538.	
\$20,800 • If you checked	12	Standard deduction or itemized	-							. 12		13,850.	
any box under	13	Qualified business income deduct	ion fro	m Form 8	995 or Form	899	5-A			. 13			
Standard Deduction,	14	Add lines 12 and 13								. 14		13,850.	
see instructions.	15	Subtract line 14 from line 11. If zer	ro or le	ss, enter	-0 This is y	our t	taxable incom	ie .		. 15		65,688.	

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

21 Add lines 19 and 20 </th <th>16 17 18 19 20 21 22 23 24 25d 26</th> <th>9,756. 9,756. 9,756. 0. 9,756. 12,798.</th>	16 17 18 19 20 21 22 23 24 25d 26	9,756. 9,756. 9,756. 0. 9,756. 12,798.
18 Add lines 16 and 17	18 19 20 21 22 23 24 24 25d	9,756. 0. 9,756.
19 Child tax credit or credit for other dependents from Schedule 8812	19 20 21 22 23 24 25d	9,756. 0. 9,756.
20 Amount from Schedule 3, line 8	20 21 22 23 24 24 25d	0. 9,756.
21 Add lines 19 and 20	21 22 23 24 25d	0. 9,756.
22 Subtract line 21 from line 18. If zero or less, enter -0-	22 23 24 24	0. 9,756.
23 Other taxes, including self-employment tax, from Schedule 2, line 21	23 24 24 25d	0. 9,756.
24 Add lines 22 and 23. This is your total tax	24 25d	9,756.
Payments 25 Federal income tax withheld from: a Form(s) W-2 25a 12,798. b Form(s) 1099 25b 25b c Other forms (see instructions) 25c 25c d Add lines 25a through 25c 2023 estimated tax payments and amount applied from 2022 return 27 If you have a qualifying child, attach Sch. ElC. 27 27 Additional child tax credit from Schedule 8812 28 28	25d	
a Form(s) W-2 25a 12,798. b Form(s) 1099 25b 25b c Other forms (see instructions) 25c 25c d Add lines 25a through 25c 25c 25c If you have a qualifying child, attach Sch. EIC. 27 27 27 Additional child tax credit from Schedule 8812 28 28		12,798.
a Form(s) W-2 25a 12,798. b Form(s) 1099 25b 25b c Other forms (see instructions) 25c 25c d Add lines 25a through 25c 25c 25c If you have a qualifying child, attach Sch. EIC. 27 27 Additional child tax credit from Schedule 8812 No 27		12,798.
c Other forms (see instructions) 25c d Add lines 25a through 25c 25c If you have a qualifying child, attach Sch. EIC. 27 28 Additional child tax credit from Schedule 8812 No		12,798.
d Add lines 25a through 25c .<		12,798.
If you have a qualifying child, attach Sch. ElC. 2023 estimated tax payments and amount applied from 2022 return		12,798.
gualifying child, attach Sch. EIC. 27 28 Additional child tax credit from Schedule 8812	26	
qualifying child, attach Sch. EIC. 28 Earned income credit (EIC)		
28 Additional child tax credit from Schedule 8812		
29 American opportunity credit from Form 8863, line 8		
30 Reserved for future use		
31 Amount from Schedule 3, line 15		
32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
33 Add lines 25d, 26, and 32. These are your total payments	33	12,798.
Refund 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,042.
	35a	3,042.
Direct deposit? b Routing number 0 1 1 4 0 0 4 9 5 c Type: X Checking Savings		
See instructions. d Account number 0 0 3 8 1 1 2 3 1 3 2 1		
36 Amount of line 34 you want applied to your 2024 estimated tax 36		
Amount37Subtract 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	37	
38 Estimated tax penalty (see instructions)		
Third Party Do you want to allow another person to discuss this return with the IRS? See		E1 • •
Designee instructions		× No
Designee's Phone Personal identifica name no. number (PIN)	ation	
Sign Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the	e best of	my knowledge and
belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which p	preparer	has any knowledge.
Your signature Date Your occupation If the IF	RS sent	you an Identity
		l, enter it here
Joint return? SPECIALTY DEVELOPER (see instructions, see instructins, see instructions, see instructions, see instruc		
opouse s signature. In a joint retain, both must sign. Date popuse s occupation in the in		your spouse an tion PIN, enter it here
your records.		
Phone no. (224) 817-2823 Email address MUDDU.HARITHUS@GMAIL.COM		
Preparer's name Preparer's signature Date PTIN	(Check if:
Paid SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/09/2024 P020827	703	Self-employed
Preparer Fim's name GLOBAL TAYES LLC Phone		78)965-9522
Use Only Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816		84-3171965
Go to www.irs.gov/Form1040 for instructions and the latest 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

Attachment Sequence No. **01**

Your social security number

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

VENK	ATASAI HARITHUS MUDDU		808-	83-850)7
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. Att			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			
ĥ	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			
ο	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	-14,421.
For Pa	perwork Reduction Act Notice, see your tax return instructions.			Schedule	1 (Form 1040) 2023

1	Educator expenses					11	
2	Certain business expenses of reservists, performing artists, and fee						
2	officials. Attach Form 2106	-Dasi	s yo	vennn	ent	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 health 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	
21	Student loan interest deduction					21	
22	Reserved for future use					22	
23	Archer MSA deduction	• •	• •	• •	•	23	
24	Other adjustments:						
а		24a					
b	Deductible expenses related to income reported on line 8I 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	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)	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					
i	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					
25	Total other adjustments. Add lines 24a through 24z					25	
26	Add lines 11 through 23 and 25. These are your adjustments to income				on	20	
	Form 1040, 1040-SR, or 1040-NR, line 10					26	
			02/05/24			-	1 (Form 10

	SCHEDULE E Form 1040) (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)											0. 1545-0074	
	,	(FIOI	nrenta		Attach to Form 104	• •				trusts, neivito	s, etc.)	20) 23
	ent of the Treasury Revenue Service		G		rs.gov/ScheduleE1					formation.		Attachm Sequen	nent ce No. 13
Name(s)	shown on return				-						Your soc	ial security	
VENK	ATASAI HAR	ITHUS	S MUI	DDU							808-8	3-8507	
Part					al Real Estate a			• •					
	Note: If yo rental inco	ou are ir ome or l	in the bu loss fro	usiness of re m Form 483	nting personal prop 35 on page 2, line 40	erty, use).	e Schedule	e C . See	e instru	ctions. If you ar	e an indi	ividual, rep	ort farm
Α					t would require yo		Form(s)	1099? \$	See ins	structions .		. 🗌 Ye	s 🛛 No
B li	"Yes," did you	or will	ll you fi	le required	Form(s) 1099?							. 🗌 Ye	es 🗌 No
1a	Physical addr	ess of	feach	property (s	treet, city, state, Z	ZIP cod	e)						
A	3-7-339,	VAVII	LALAE	PALLY	NEAR GOPI	KRIS	HNA I	KARIM	NAGA	R, TELANG	ANA I	N 50500)1
B													
С													
1b	Type of Property 2 For each rental real estate property listed Fair Rental Person										Perso	nal Use	0.11/
	(from list below	N)	ab	ove, report	the number of fa	ir rental	and			Days	Da	ays	QJV
Α	3				days. Check the one requirements to			Α		365		0	
В					venture. See inst			В					
C			99			action		С					
	of Property:												
	Single Family R				on/Short-Term Re	ental	5 Lanc			Self-Rental			
2	Multi-Family Re	sidenc	се	4 Comm	iercial		6 Roya	alties	8	Other (descri	be)		
										Propertie	es:		
Incom	ie:							Α		В			С
3						3		6	548.				
4	Royalties rece	ived .				4							
Expen													
5	-					5							
6		•		,		6							
7						7		2,4	135.				
8						8							
9						9							
10						10							
11	0					11		1,9	966.				
12	00		aid to D	anks, etc.	(see instructions)	12							
13	Other interest		• •			13			7.4 5				
14 15						14			745. 310.				
16	• •					16		2,0	<u>, , , , , , , , , , , , , , , , , , , </u>				
17						17		2.6	531.				
18						18			182.				
19	Othor (ligt)			-		10							
20					9	20		15,0)69.				
21	•			0	d/or 4 (royalties). I			- , 0					
					nd out if you mus								
	file Form 6198	Ś				21		-14,4	21.				
22	Deductible ren	ital rea	al estat	te loss afte	r limitation, if any	,							
	on Form 8582	(see ir	nstruct	tions)		22	(14,42	21.)	()	()
23a	Total of all am	ounts i	reporte	ed on line 3	3 for all rental prop	oerties			23a		648.		
b					for all royalty pro				23b				
С			•		2 for all propertie				23c				
d			•		8 for all propertie				23d		,482.		
е			•		20 for all propertie				23e		,069.		
24					n on line 21. Do n					• • • • • •		1	14 407 \
25					and rental real est							(14,421.)
26					income or (loss)								
					0 on page 2 do r wise, include this						n 26		-14,421.
For Do					eparate instruction				1	-14,421			-14, 421.

Schedule E (Form 1040) 2023