

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 PREETHAM MANGARAJU	Social security number 588-24-8723
Spouse's name SOUJANYA RAVICHETTU	Spouse's social security number 991-97-9716

Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter 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	63,273.
2 Total tax	2	3,829.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	5,252.
4 Amount you want refunded to you	4	1,423.
5 Amount you owe	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and 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 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

- I authorize GLOBAL TAXES LLC to enter or generate my PIN

4	8	7	2	3
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 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 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 GLOBAL TAXES LLC to enter or generate my PIN

7	9	7	1	6
---	---	---	---	---

 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 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	4	9	6	0	8	2	7	1
---	---	---	---	---	---	---	---	---	---	---

Don't enter all zeros

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 ▶ _____

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 20 See separate instructions.

Personal information section including name (PREETHAM MANGARAJU), social security numbers (588 24 8723), address (1231 TRAVIS VIEW CT, GAITHERSBURG, MD 20877), and marital status (Married filing jointly).

Filing Status section with options for Single, Married filing jointly (checked), Married filing separately, Head of household, and Qualifying surviving spouse.

Digital Assets section asking if a digital asset was received or sold during 2023 (checked No).

Standard Deduction section with options for claiming someone as a dependent or spouse itemizer.

Age/Blindness section with checkboxes for being born before 1959 or being blind.

Table for Dependents with columns for name, social security number, relationship, and tax credit options.

Income section table with rows 1a through 1z for various income types and adjustments, totaling 72,518.

Table for Dividends and Interest with columns 2a through 2b for tax-exempt and taxable interest, and 3a through 3b for qualified and ordinary dividends.

Table for Deductions and Adjustments with rows 4a through 15, including the standard deduction and final taxable income of 35,573.

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	3,829.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	3,829.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	3,829.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	3,829.

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	5,252.
	b	Form(s) 1099	25b	
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	5,252.
	26	2023 estimated tax payments and amount applied from 2022 return	26	
	27	Earned income credit (EIC)	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
	31	Amount from Schedule 3, line 15	31	
	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	5,252.

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,423.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	1,423.
Direct deposit? See instructions.	b	Routing number 011400495 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account number 388003940766		
	36	Amount of line 34 you want applied to your 2024 estimated tax	36	

Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)	38	

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the 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 preparer has any knowledge.

Your signature	Date	Your occupation SOFTWARE DEVELOPER	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation HOME MAKER	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
Phone no. (978) 483-9846	Email address M.PREETHAM39@GMAIL.COM		

Paid Preparer Use Only

Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM	Preparer's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM	Date 01/12/2024	PTIN P02082703	Check if: <input type="checkbox"/> Self-employed
Firm's name GLOBAL TAXES LLC	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816			Phone no. (678) 965-9522
Firm's EIN				84-3171965

**SCHEDULE 1
(Form 1040)**

Department of the Treasury
Internal Revenue Service

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**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
PREETHAM MANGARAJU & SOUJANYA RAVICHETTU

Your social security number
588-24-8723

Part 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. Attach Schedule E		5	-9,245.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
a	Net operating loss	8a ()		
b	Gambling	8b		
c	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
e	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		
l	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	8l		
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
o	Section 951A(a) inclusion (see instructions)	8o		
p	Section 461(l) 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 nonqualified 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 here and on Form 1040, 1040-SR, or 1040-NR, line 8		10	-9,245.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2023

Part 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		
c	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:		
a	Jury duty pay (see instructions)	24a	
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b	
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c	
d	Reforestation amortization and expenses	24d	
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	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	
j	Housing deduction from Form 2555	24j	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	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 . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10		26

**SCHEDULE E
(Form 1040)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0074

2023
Attachment
Sequence No. **13**

Name(s) shown on return

PREETHAM MANGARAJU & SOUJANYA RAVICHETTU

Your social security number

588-24-8723

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.

- A** Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions Yes No
B If "Yes," did you or will you file required Form(s) 1099? Yes No

1a Physical address of each property (street, city, state, ZIP code)

A 8-3/1 J.PCOLONY ROAD NO-3 PATANCHERU TELANGANA IN 502319

B
C

1b Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days		Personal Use Days	QJV
		A	B	C	<input type="checkbox"/>
A 3		365		0	<input type="checkbox"/>
B					<input type="checkbox"/>
C					<input type="checkbox"/>

Type of Property:

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) _____

Income:	Properties:		
	A	B	C
3 Rents received	3 624.		
4 Royalties received	4		
Expenses:			
5 Advertising	5		
6 Auto and travel (see instructions)	6		
7 Cleaning and maintenance	7 1,988.		
8 Commissions	8		
9 Insurance	9		
10 Legal and other professional fees	10		
11 Management fees	11 1,712.		
12 Mortgage interest paid to banks, etc. (see instructions)	12		
13 Other interest	13		
14 Repairs	14 2,656.		
15 Supplies	15 1,634.		
16 Taxes	16		
17 Utilities	17 1,879.		
18 Depreciation expense or depletion	18		
19 Other (list) _____	19		
20 Total expenses. Add lines 5 through 19	20 9,869.		
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 -9,245.		
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (9,245.)		
23a Total of all amounts reported on line 3 for all rental properties	23a 624.		
b Total of all amounts reported on line 4 for all royalty properties	23b		
c 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		
e Total of all amounts reported on line 20 for all properties	23e 9,869.		
24 Income. Add positive amounts shown on line 21. Do not include any losses	24		
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25 (9,245.)		
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	26 -9,245.		

For Paperwork Reduction Act Notice, see the separate instructions.

NPA

-9,245.

Schedule E (Form 1040) 2023



231010013

Keep this form for your records. Do not send this form to the State of Maryland unless specifically requested to do so. See Instructions.

Print Using Blue or Black Ink Only.

PREETHAM MANGARAJU 588248723
First Name MI Last Name SSN/Taxpayer Identification Number
SOUJANYA RAVICHETTU 991979716
Spouse's First Name MI Spouse's Last Name SSN/Taxpayer Identification Number



Part I Tax Return Information (whole dollars only)

1. Amount of overpayment to be applied to 2024 estimated tax 1.
2. Amount of overpayment to be refunded to you REFUND 2. 232
3. Total amount due (Pay in full by April 15, 2024. See instructions.) 3.

Part II Taxpayer Declaration and Signature Authorization

Under penalties of perjury, I declare that I have compared the information contained on my electronic return with the information that I provided to my Electronic Return Originator (ERO) or entered on-line and that the name(s) and amounts described above agree with the amounts shown on the corresponding lines of my 2023 Maryland electronic income tax return.

Your PIN: check one box only

[X] I authorize GLOBAL TAXES LLC to enter or generate my PIN 4 8 7 2 3 as my signature on my tax year 2023 electronically filed income tax return.

Enter five digits. Do not enter all zeros.

[] I will enter my PIN as my signature on my tax year 2023 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method.

Your signature Date

Spouse's PIN: check one box only

[X] I authorize GLOBAL TAXES LLC to enter or generate my PIN 7 9 7 1 6 as my signature on my tax year 2023 electronically filed income tax return.

Enter five digits. Do not enter all zeros.

[] I will enter my PIN as my signature on my tax year 2022 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method.

Spouse's signature Date

Practitioner PIN Method Returns Only

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 4 9 6 0 8 2 7 1

Do not enter all zeros.

I certify this numeric entry is my PIN, which is my signature for the tax year 2023 electronically filed income tax return for the taxpayer(s). I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and the Maryland MeF Handbook for Authorized e-file Providers.

ERO's signature Date 01122024



DO NOT MAIL



235050013

OR FISCAL YEAR BEGINNING 2023, ENDING

Print Using Blue or Black Ink Only

588248723 Social Security Number 991979716 Spouse's Social Security Number

PREETHAM First Name MI

MANGARAJU Last Name

SOUJANYA Spouse's First Name MI

Does your name match the name on your social security card? If not, to ensure you get credit for your personal exemptions, contact SSA at 1-800-772-1213 or visit ssa.gov.

RAVICHETTU Spouse's Last Name

1231 TRAVIS VIEW CT Current Mailing Address Line 1 (Street No. and Street Name or PO Box)

Maryland County

Current Mailing Address Line 2 (Apt No., Suite No., Floor No.)

City, Town or Taxing Area Name of county and incorporated city, town or special taxing area in which you were employed on the last day of the taxable period if you earned wages in Maryland. (See Instruction 6.)

GAITHERSBURG MD 20877 City or Town State ZIP Code + 4

Foreign Country Name Foreign Province/State/County

Foreign Postal Code

Place your W-2 wage and tax statements and ATTACH HERE with ONE staple. Do not attach check or money order

DO NOT MAIL

E-FILE ONLY

FILING STATUS See Instruction 1 to determine if you are required to file.

- CHECK ONE BOX 1. Single (If you can be claimed on another person's tax return, use Filing Status 6.) 2. Married filing joint return or spouse had no income 3. Married filing separately, Spouse's SSN 4. Head of household 5. Qualifying Surviving Spouse with dependent child 6. Dependent taxpayer (Enter 0 in Exemption Box (A) - See Instruction 8.)

RESIDENCE INFORMATION See Instruction 9.

Enter 2-letter state code for your state of legal residence. NJ
If PA resident, enter both County and City, Borough or Township
Were you a resident of another state for the entire year of 2023? If no, attach explanation.
Are you or your spouse a member of the military?
Did you file a Maryland income tax return for 2022? Yes No If "Yes," was it a Resident or a Nonresident return?
Dates you resided in Maryland for 2023. If none, enter "NONE": FROM None TO None (MMDDYYYY).
Check here for Maryland taxes withheld in error. (See Instruction 4.)

EXEMPTIONS See Instruction 10. Check appropriate box(es). NOTE: If you are claiming dependents, you must attach the Dependents' Information Form 502B to this form in order to receive the applicable exemption amount.

- A. Yourself Spouse Enter number checked 2 See Instruction 10 A. \$ 6400 00
B. 65 or over Blind Enter number checked X \$1,000 B. \$ 00
C. Enter number from line 3 of Dependent Form 502B See Instruction 10 C. \$ 00
D. Enter Total Exemptions (Add A, B and C.) Total Amount D. \$ 6400 00

DO NOT MAIL



235050113

Name PREETHAM MANGARAJU & SOUJANYA RAVICHETTU SSN 588248723

INCOME AND ADJUSTMENTS INFORMATION

(See Instruction 11.)

Table with 4 columns: (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows include Wages, salaries, tips, etc.; Taxable interest income; Dividend income; Taxable refunds, credits or offsets of state and local income taxes; Alimony received; Business income or (loss); Capital gain or (loss); Other gains or (losses); Taxable amount of pensions, IRA distributions, and annuities; Rents, royalties, partnerships, estates, trusts, etc.; Farm income or (loss); Unemployment compensation (insurance); Taxable amount of Social Security and Tier 1 Railroad Retirement benefits; Other income (including lottery or other gambling winnings); Total income; Total adjustments to income from federal return; Adjusted gross income.

ADDITIONS TO INCOME (See Instruction 12.)

Table with 3 columns: (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows include Non-Maryland loss and adjustments; Other; Total additions; Total federal adjusted gross income and Maryland additions.

SUBTRACTIONS FROM INCOME (See Instruction 13.)

Table with 3 columns: (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows include Taxable Military Income of Nonresident; Other; Total subtractions; Maryland adjusted gross income before subtraction of non-Maryland income.

DEDUCTION METHOD See Instruction 15. (All taxpayers must select one method and check the appropriate box.)

Table with 3 columns: (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows include STANDARD DEDUCTION METHOD (26a); ITEMIZED DEDUCTION METHOD (26b, 26c, 26d); Deduction amount (26e); Net income (27); Total exemption amount (28); Enter your AGI factor (29); Maryland exemption allowance (30); Taxable net income (31).

MARYLAND TAX COMPUTATION - COMPLETE FORM 505NR BEFORE CONTINUING.

Table with 3 columns: (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows include Maryland tax (32a); Special nonresident tax (32b); Recaptured credit from Part DD (32c); Total Maryland tax (32d); Poverty level credit (33).



235050213

Name PREETHAM MANGARAJU & SOUJANYA RAVICHETTU SSN 588248723

Table with 3 columns: Line number, Description, and Amount. Includes lines 34-53 for tax credits, contributions, and total amount due.

DIRECT DEPOSIT OF REFUND (See Instruction 23.) Verify that all account information is correct and clearly legible.

If you are requesting direct deposit of your refund, complete the following. For Splitting Direct Deposit, use Form 588.

- Check here if you authorize the State of Maryland to issue your refund by direct deposit.
Check here if this refund will go to an account outside of the United States.

54a. Type of account: [X] Checking [] Savings
54b. Routing Number (9-digits) 011400495
54c. Account Number 388003940766
54d. Name(s) as it appears on the bank account

Check here if you authorize your preparer to discuss this return with us. Check here if you authorize your paid preparer not to file electronically. Check here if you agree to receive your 1099G Income Tax Refund statement electronically (See Instruction 25). Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements and to the best of my knowledge and belief it is true, correct and complete. If prepared by a person other than taxpayer, the declaration is based on all information of which the preparer has any knowledge.

Your signature Date Spouse's signature Date

9784839846 Taxpayer(s) daytime phone number
SYAM PRIYA RAM SAGAR GUPTA TALLAM Signature of Preparer other than taxpayer (Required by Law)

245 ROONEY CT Street address of Preparer/Firm
GLOBAL TAXES LLC Printed name of the Preparer/Firm's name

E BRUNSWICK NJ 08816 City, State, ZIP Code + 4
6789659522 Telephone number of Preparer
P02082703 Preparer's PTIN (Required by law)

CODE NUMBERS (3 digits per line)

For returns filed without payments, mail your completed return to:

Comptroller of Maryland
Revenue Administration Division
110 Carroll Street
Annapolis, MD 21411-0001

To make an online payment, scan the QR code below and follow instructions.

DO NOT MAIL

For returns filed with payments, attach check or money order to Form PV. Make checks payable to Comptroller of Maryland. On your check or money order, you must include the social security number/Individual Taxpayer Identification Number of the taxpayer if filing individually, if filing jointly, you must include the social security number/ITIN of the primary taxpayer on the check. Failure to include this information will delay the processing of your payment. Do not attach Form PV or check/money order to Form 505. Place Form PV with attached check/money order on TOP of Form 505 and mail to:

Comptroller of Maryland
Payment Processing
PO Box 8888
Annapolis, MD 21401-8888

E-FILE ONLY F

DO NOT MAIL





23505N013

Print Using Blue or Black Ink Only

PREETHAM First Name

MANGARAJU Last Name

588248723 Social Security Number

SOUJANYA Spouse's First Name

RAVICHETTU Spouse's Last Name

991979716 Spouse's Social Security Number

DO NOT MAIL

If you are filing Form 505, use the Form 505NR Instructions appearing on page 2 of this form. If you are filing Form 515, use the Form 505NR Instructions appearing in Instruction 18 of the Form 515 Instructions.

PART I - CALCULATION OF TAX WITHOUT ALLOWING CERTAIN MODIFICATIONS

- 1. Enter Taxable net income from Form 505, line 31 (or Form 515, line 32) 60968 00
2. Enter tax from Tax Table or Computation Worksheet Schedules I or II. Continue to Part II. 2843 00

PART II - CALCULATION OF MARYLAND TAX

- 3. Enter your federal adjusted gross income from Form 505 (or Form 515), line 17 (Column 1) 63273 00
3a. Earned Income (See instructions.) 72518 00
4. Enter your federal adjusted gross income plus additions from Form 505 (or 515) line 21. 72518 00
5. Enter the Taxable Military Income of a Nonresident from line 22 of Form 505. 00
6a. Enter your subtractions from line 23 of Form 505 or Form 515 00
6b. Enter non-Maryland income from Form 505 (or 515) not included on lines 5 or 6a of this form (See instructions.) 59932 00
7. Add lines 5 through 6b. 59932 00
8. Maryland Adjusted Gross Income. Subtract line 7 from line 4. 12586 00

If you are using the standard deduction, recalculate the standard deduction based on the income on line 8 and enter on line 8a .8a. 3450 00

- 9. Maryland Income Factor. Divide line 8 by line 3. The factor cannot exceed 1.000000 and cannot be less than 0. If line 8 is 0 or less, the factor is 0. If line 8 is greater than 0 and line 3 is 0 or less, the factor is 1.000000. 198916
10. Deduction amount. If you are using the standard deduction, multiply the standard deduction on line 8a by line 9 of this form and enter on line 10a .10a. 686 00 If you are itemizing your deductions, multiply the deduction on Form 505, line 26d, by line 9 of this form and enter on line 10b .10b. 00

Form 515 Users, see Instruction 18 in Form 515 Instructions.

- 11. Net income (Subtract line 10a or 10b from line 8.) 11900 00
12. Exemption amount. Multiply the total exemption amount on Form 505, line 28 (or Form 515, line 29) by line 9. 1273 00
13. Maryland Taxable Net Income (Subtract line 12 from line 11.) 10627 00
14. Enter the tax amount from line 2 of this form. 2843 00
15. Maryland Nonresident factor: Divide the amount on line 13 on this form by line 1. If more than 1.000000, enter 1.000000. If 0 or less, the factor is 0. 174305
16. Maryland Tax. Multiply line 14 by line 15. Enter this amount on Form 505, line 32a (Form 515, line 33). 496 00
17. Special nonresident tax. Multiply line 13 of this form by 0.0225. Enter this amount on Form 505, line 32b. If line 13 is 0 or less, enter 0. 239 00

FOR FORM 515 FILERS ONLY.

If you are: (1) a nonresident employed in Maryland and (2) you are a resident of a local jurisdiction that imposes a local income or earnings tax on Maryland residents, then you must file a Form 515 to report and pay a tax on your Maryland wages. Form 515 filers pay a local income tax instead of the Special Nonresident Tax.

- 18. Local Income Tax. Multiply line 13 of this form by the local rate of the Maryland county (or Baltimore City) where you are employed. Enter this amount on Form 515, line 39. If line 13 is 0 or less, enter 0. 00

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