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

Submission Identification Number (SID)		·
Taxpayer's name	Social securit	ty number
ARUN KUMAR SALLA	050-65	-5456
Spouse's name	Spouse's soc	cial security number
SOUMYA BONKAM	988-95	-9910
Part I Tax Return Information — Tax Year Ending December 31, 20	23 (Enter year you a	re 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 1
1 Adjusted gross income		1 65,647.
2 Total tax		2 4,111.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 11,180.
4 Amount you want refunded to you		4 7,069.
5 Amount you owe		5
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original of	•	· · · · · · · · · · · · · · · · · · ·
return (original or amended) I am now authorizing. I consent to allow my intermediate service provides send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reafor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution apayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancer outsiness days prior to the payment (settlement) date. I also authorize the financial institutions involved to receive confidential information necessary to answer inquiries and resolve issues related between the confidential information is my signature for the income tax return (original or an electronic Funds Withdrawal Consent.	ason for rejection of the trorize the U.S. Treasury a account indicated in the troial institution to debit the to terminate the authorizabilation requests must be allowed in the processing of the to the payment. I further the processing of the treatment of the payment.	ransmission, (b) the reason nd its designated Financial ax preparation software for entry to this account. This ation. To revoke (cancel) a e received no later than 2 f the electronic payment of ther acknowledge that the
Taxpayer's PIN: check one box only X I authorize GLOBAL TAXES LLC to enter or	generate my PIN 5	
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	En En	ter five digits, but n't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amend if you are entering your own PIN and your return is filed using the Practitioner below.		
Your signature ►	Date ►	
ERO firm name		9 9 1 0 as my ter five digits, but n't enter all zeros
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 amend if you are entering your own PIN and your return is filed using the Practitioner below.	ed) I am now authorizi	ng. Check this box only
Spouse's signature ▶	Date ►	
Practitioner PIN Method Returns Only—contin		
Part III Certification and Authentication — Practitioner PIN Method Only	1	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 0 8 2 7 1 er all zeros
certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practitioner PIN method PID e-file Practitioner PIN method PID e-file Practitioner PIN method PID e-file PIN e	I am submitting this retu	urn in accordance with the
ERO's signature ▶	Date ►	
ERO Must Retain This Form — See Instru		

Don't Submit This Form to the IRS Unless Requested To Do So

E1040 Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

2023

OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20	See se	parate instructions.	
Your first name	and m	iddle initial	Last name				Your social security number			
ARUN KUMAR SALLA					050 65 5456					
					Spouse's social security number					
				988	95 9910					
	(numbe	er and street). If you have a P.O. box, see					Apt. no.		ntial Election Campaig	
10500 LA	AKEL	INE MALL DRIVE					2102	Check h	nere if you, or your	
•		ce. If you have a foreign address, also co	mplete	spaces below.	Sta	ate	ZIP code spouse if filing jointly			
AUSTIN				TX 78717					this fund. Checking a ow will not change	
Foreign country	y name		Foreign province/state/county			ty	Foreign postal code		or refund.	
									You Spouse	
Filing Status	s [Single				Head of ho	usehold (HOH)	•		
Check only	_	Married filing jointly (even if only or	ne had	income)						
one box.		Married filing separately (MFS)				Qualifying	surviving spouse	(QSS)		
	If y	you checked the MFS box, enter the	name	of your spouse. If you	u che	ecked the HOH	or QSS box, ent	er the chi	ld's name if the	
	qu	alifying person is a child but not you	ır depe	ndent:						
Digital	Δt aı	ny time during 2023, did you: (a) rece	aiva (as	s a reward award or	navi	ment for proper	ty or services): o	r (h) sell		
Digital Assets		nange, or otherwise dispose of a digi	•				•	. ,	☐ Yes ☒ No	
Standard		neone can claim: You as a de					, (,		
Deduction		Spouse itemizes on a separate return	•	-		•				
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind Spo	ouse	: U Was bori	n before January		Is blind	
Dependent				(2) Social security	/	(3) Relationshi	ρ [``	· ' '	fies for (see instructions)	
If more	(1) F	irst name Last name		number		to you	Child tax o	credit	Credit for other dependent	
than four										
dependents, see instruction	s								<u> </u>	
and check	, —								<u> </u>	
here L				1						
Income	1a	Total amount from Form(s) W-2, be	•	,				. 1a		
Attach Form(s)	b	Household employee wages not re	•	` ,				. 1b		
W-2 here. Also	C	Tip income not reported on line 1a	•	•				. 1c		
attach Forms W-2G and	d		eported on Form(s) W-2 (see instructions)					. 1d		
1099-R if tax	e	•						. <u>1e</u>		
was withheld.	f	Employer-provided adoption bene		· ·				. 1f		
If you did not get a Form	g	Wages from Form 8919, line 6 .						. 1g		
W-2, see	h	Other earned income (see instructi	,					. 1h	0.	
instructions.	I _	Nontaxable combat pay election (s	see ins	tructions)		<u>li</u>			72,962.	
AH! 0 : 5	<u>z</u>	Add lines 1a through 1h	 22	· · · · · · i	 	· · · ·		. 1z		
Attach Sch. B if required.	2a		2a 3a	2.		axable interest Ordinary dividen		. 2b	0.1	
	<u>3a</u> 4a		4a			axable amount		. 3b		
Standard	4 а 5а		1 а 5а			axable amount		. 5b		
Deduction for— Single or	6a		6a			axable amount		. 6b		
Married filing	C	If you elect to use the lump-sum e		method check here				. 56		
separately, \$13,850	7	,		•	`	,		7		
Married filing jointly or	rried filing			. 8	-7,346.					
Qualifying Q Add lines 17. 2h. 3h. 4h. 5h. 6h. 7. and 8. This is your total income.				. 9	65,647.					
surviving spouse, \$27,700	surviving spouse,			. 10						
Head of household,	11	Subtract line 10 from line 9. This is						. 11	65,647.	
\$20,800	12	Standard deduction or itemized	-					. 12		
If you checked any box under	13	Qualified business income deducti		,	,	 95-A		. 13		
Standard Deduction,	14							. 14		
see instructions.	15	Subtract line 14 from line 11 If zer				tavable incom		15		

Form 1040 (2023	3)						Page 2	
Tax and	16	Tax (see instructions). Check if any from Fo	orm(s): 1 881	4 2 4972	3 🗌	1	6 4,111.	
Credits	17	Amount from Schedule 2, line 3				1	7	
	18	Add lines 16 and 17				1	8 4,111.	
	19	Child tax credit or credit for other depend	dents from Sched	lule 8812		1	9	
	20	Amount from Schedule 3, line 8				2	0	
	21	Add lines 19 and 20				2	:1	
	22	Subtract line 21 from line 18. If zero or les	ss, enter -0			2	4,111.	
	23	Other taxes, including self-employment to	ax, from Schedul	e 2, line 21		2	0.	
	24	Add lines 22 and 23. This is your total ta	x			2	4,111.	
Payments	25	Federal income tax withheld from:						
•	а	Form(s) W-2			25a 11	,180.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c				25	5d 11,180.	
If you have a	26	2023 estimated tax payments and amour	nt applied from 20	022 return		2	6	
qualifying child,	27	Earned income credit (EIC)			27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 8			28			
	29	American opportunity credit from Form 8	863, 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 y	our total other p	ayments and refu	undable credits	3	2	
	33	Add lines 25d, 26, and 32. These are you	r total payments	·		3	11,180.	
Refund	34	If line 33 is more than line 24, subtract lin				3	7,069.	
	35a	Amount of line 34 you want refunded to			•	. 🗆 35	5a 7,069.	
Direct deposit?	b	Routing number 1 2 1 0 0 0	3 5 8	c Type:	Checking S	Savings		
See instructions.	d	Account number 3 2 5 0 4 3	9 4 2 6					
	36	Amount of line 34 you want applied to yo	ur 2024 estimat	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the a	mount vou owe) <u>.</u>				
You Owe		For details on how to pay, go to www.irs.	•			3	7	
	38	Estimated tax penalty (see instructions)			38			
Third Party Designee		you want to allow another person to ostructions			_	mplete belov	w. 🗵 No	
		signee's me	Phone no.	•		onal identificati per (PIN)	on	
Sign Here		der penalties of perjury, I declare that I have examief, they are true, correct, and complete. Declaration					, ,	
Here	Yo	ur signature	Date	Your occupation			sent you an Identity	
						Protectio (see inst.)	n PIN, enter it here	
Joint return? See instructions.		average alamatume. If a joint waterum, beatle moved alam	Data	SOFTWARE I		·		
Keep a copy for your records.	Sp	ouse's signature. If a joint return, both must sign	. Date	Date Spouse's occupation			If the IRS sent your spouse an Identity Protection PIN, enter it here	
your rooordo.				HOME MAKER		(see inst.)		
		one no. (630)398-9406	Email address	ARUNREDDY9	010@GMAIL.CO		01 1 1	
Paid		eparer's name Preparer's sig	•	G. D. G	Date	PTIN	Check if:	
Preparer		M PRIYA RAM SAGAR GUPTA SYAM PR	IYA KAM SA	GAR GUPTA	03/22/2024	P0208270		
Use Only		m's name GLOBAL TAXES LLC	DIDIGIT OF T	· T 00016			o. (678)965-9522	
		m's address 245 ROONEY CT E B	KUNSWICK N			Firm's Elf		
(in to www.irs a	ov/Forn	n1040 for instructions and the latest information.		DAA	DEV 02/07/24 DDO		Form 1040 (2023)	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

ARUN KUMAR SALLA & SOUMYA BONKAM

Attach to Form 1040, 1040-SR, or 1040-NR.

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

Your social security number 050-65-5456

_	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
	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	-7,346.
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		
ı	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	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	r here and on Form		
	1040. 1040-SR. or 1040-NR. line 8		10	-7.346.

Schedule 1 (Form 1040) 2023 Page **2**

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-				
	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	,	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 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				
		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 Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	here and on	26	
	, - , - , - , , , , , ,		-		

SCHEDULE E (Form 1040)

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,

Department of the Treasury Internal Revenue Service

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

2023
Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number ARUN KUMAR SALLA & SOUMYA BONKAM 050-65-5456 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. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions 1a Physical address of each property (street, city, state, ZIP code) NANDIPET, NIZAMABAD NIZAMABAD TELANGANA IN 503212 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 594. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,248. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 648. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 1,891. 14 Repairs . . . 15 Supplies 15 2,017. 16 16 Taxes 17 Utilities 17 2,136. 18 18 Depreciation expense or depletion 19 19 Other (list) 20 20 7,940. Total expenses. Add lines 5 through 19 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 -7,346. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 7,346.) 594. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 7,940. Total of all amounts reported on line 20 for all properties 23e 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 7,346. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

-7,346.

26

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2