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

	1						
Submi	ssion Identification Number (SID)						
Taxpaye	er's name	Social secur	ity numl	per			
CHAI	NAKYA BANALA	873-77-08					
Spouse'	s name	Spouse's so	pouse's social security number				
Dort	Tay Potura Information Tay Year Ending December 21 2002 (Enter	WOOK WOLL	ro ou	thorizina '	<u> </u>		
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enterwhole dollars only on lines 1 through 5.	year you a	are au	monzing.)		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1 1	69	,991.		
2	Total tax		2		,655.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,165.		
4	Amount you want refunded to you		4		,510.		
5	Amount you owe		5				
Part		еер а сор	y of y	our retu	rn)		
my know return (to send for any Agent t payment authorize payment business taxes t persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended by by by and by by by an acknowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmal my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectly in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated to fine taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the transfer of the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the paint of the With transfer or the income tax return (original or amended) I among the With transfer or the income tax return (original or amended) I among the support of the payment (settlement) and the with transfer or the income tax return (original or amended) I among the with the payment of the payment (settlement) and the financial institutions involved in the confidence of the payment (settlement) below is my signature for the income tax return (original or amended) I among the with the payment (settlement) and the financial institution amended to the payment of the payment (settlement) and the financial institution a	e are the am tter, or electrication of the t S. Treasury a cated in the to the authorization must be processing of ayment. I fur	counts fronic refransmistand its context ax preparation. The election of the election are received at the rece	from the incurrence of the inc	come tax for (ERO) e reason Financial tware for unt. This cancel) a er than 2 yment of that the		
	nic Funds Withdrawal Consent. yer's PIN: check one box only						
X		my PINI 7	0 8	3 9 1	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Er		digits, but er all zeros	as my		
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.						
Your s	ignature ▶ Date ▶						
Spous	e's PIN: check one box only						
Opous	I authorize to enter or generate	my DINI			as my		
	ERO firm name	_	ter five	digits, but	as my		
	signature on the income tax return (original or amended) I am now authorizing.			r all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part	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 Don't en	6 0	8 2 7	1		
		2011 1 611	an 20	50			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the text of the for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Inc.	itting this ret	urn in a	accordance			
ERO's	signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To I	o So					

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



£1040		artment of the Treasury-Internal Revenue Serv S. Individual Income Tax		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this spac	e.
For the year Ja	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 na	me							Your so	cial sec	urity numbe	r
CHANAKY	A		BANA	LA							873	177	0891	
If joint return, s	pouse's	s first name and middle initial	Last na	me									security nun	nber
	, ,													_
	•	er and street). If you have a P.O. box, see	Instruction	ons.					Apt. no. 2029	- 1			ection Campa ou, or your	aign
City town or		⊥ ⊥∪ ice. If you have a foreign address, also co	mnlete s	naces hel	low	Sta	te	ZIP c					jointly, want	\$3
IRVING	5000 0111	iso. Il you have a lordigit address, also se	omploto o	pacco boi		TX		750			U		nd. Checking	jа
Foreign countr	v name			Foreian pr	rovince/state/				n postal c		your tax		not change	
	,			5 -			,		, , ,		,			use
Filing Status	s 🗵	Single					Head of h	ouseh	old (HOI	-				
Check only		Married filing jointly (even if only o	ne had i	ncome)			_							
one box.		Married filing separately (MFS)					☐ Qualifying		0 1	,	,			
		you checked the MFS box, enter the			oouse. 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 deper	ndent:										
Digital		ny time during 2023, did you: (a) rec						-						
Assets	exch	nange, or otherwise dispose of a dig						et)? (Se	ee instru	ction	s.)	Y•	es 🗵 No	
Standard	_	neone can claim: You as a de	•				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 bli	ind Sp	ouse	: U Was bor	n befo	ore Janu	ary 2	, 1959	ls	s blind	
Dependent	s (see	instructions):		(2) S	Social security	,	(3) Relationsh	nip (4) Check t	he bo	x if quali	fies for (see instructio	ns):
If more	(1) F	irst name Last name		number to you			Child t	ax cre	edit	Credit fo	or other depend	lents		
than four														
dependents, see instruction	s													
and check	, —													
here L	4 -	Tatal amount from Forms(a) W.O. In	1 /	- :	.t: \							1	02 16	1
Income	1a	Total amount from Form(s) W-2, b	•		,						1a 1b		83,163	<u>.</u>
Attach Form(s)	b c	Household employee wages not re			. ,						1c			
W-2 here. Also attach Forms	d	Tip income not reported on line 1a (see instructions)							1d					
W-2G and	e								1e					
1099-R if tax was withheld.	f	Employer-provided adoption bene									1f			
If you did not	g	Wages from Form 8919, line 6 .	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11 01111 0	000, 1110 20	•					1g			
get a Form	9 h	Other earned income (see instruct	ions)	 							1h			Ο.
W-2, see instructions.	i	Nontaxable combat pay election (1 _{1i}	i.						
instructions.	Z	Add lines 1a through 1h					· · <u> </u>				1z		83,161	1.
Attach Sch. B			2a			b Ta	axable interes	t .			2b		· · ·	
if required.	3a	. –	3a				ordinary divide				3b			
	4a		4a				axable amoun				4b			
Standard	5a		5a				axable amoun				5b			
Deduction for— Single or	6a	_	6a				axable amoun				6b			
Married filing separately,	С	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		-13,170	٥.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is ye	our total in	come	e				9		69,991	
\$27,700	10	Adjustments to income from Sche	dule 1, l	line 26							10			
 Head of household, 	11	Subtract line 10 from line 9. This is	s your a c	djusted	gross inco	me					11		69,991	1.
\$20,800 If you checked	12	Standard deduction or itemized	deduct	ions (fro	m Schedule	A)					12		13,850	
any box under	13	Qualified business income deduct	ion from	Form 89	995 or Form	1 899	5-A				13			
Standard Deduction,	14	Add lines 12 and 13									14		13,850).
see instructions.	15	Subtract line 1/1 from line 11. If zer	ro or los	c ontor	O Thic ic v	1	avabla incom				15		56 1/1	1

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	7,655.
Credits	17	Amount from Schedule 2, lin	ne 3				[17	
	18	Add lines 16 and 17					[18	7,655.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812		[19	
	20	Amount from Schedule 3, lin	ie 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	7,655.
	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	7,655.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 12	,165.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	12,165.
If you have a	26	2023 estimated tax paymen	ts 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	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ie 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	•		-			33	12,165.
Refund	34	If line 33 is more than line 24						34	4,510.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, che	ck here	. 🗆 İ	35a	4,510.
Direct deposit?	b	Routing number 1 0 2			c Type:		Savings		
See instructions.	d	Account number 3 2 9							
	36	Amount of line 34 you want	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	٥.	For details on how to pay, g						37	
	38	Estimated tax penalty (see in	_	-		38			
Third Party	Do	you want to allow another				? See			
Designee		structions					omplete be	elow.	⋈ No
Ü		signee's		Phone			onal identific	cation	
	naı			no.			ber (PIN)		
Sign		der penalties of perjury, I declare to							
Here		belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information							, ,
	Yo								nt you an Identity IN, enter it here
Joint return?					SOFTWARE	ENGINEER	(see in		iiv, cittor it norc
See instructions.	Sp	ouse's signature. If a joint return, I	Date Spouse's occupation				the IRS sent your spouse an		
Keep a copy for		,	J				Identit	ty Prote	ection PIN, enter it here
your records.							(see in	ıst.)	
	Ph	one no. (636) 208-634	4	Email address	CHANAKYAB(04@GMAIL.CO	M		
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/01/2024	P02082	703	Self-employed
Use Only	Fin	m's name GLOBAL TA	XES LLC				Phone	∍ no. ((678) 965-9522
————	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's	s EIN	84-3171965
Go to www.irs.g	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/21/24 PRO			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

CHANAKYA BANALA

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

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 873-77-0891

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	-13 , 170.
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		
a a	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	
0	Combine lines 1 through 7 and 9. This is your additional income. Enter	r here and on Form		10 150
	1040. 1040-SR. or 1040-NR. line 8		10	-13,170

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	04			
_1	· · · · · · · · · · · · · · · · · · ·	24c		_	
d		24d		-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		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				
	-	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:	24z			
05					
25	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. ∟nter	nere and on		
	Form 1040, 1040-SR, or 1040-NR, line 10			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.

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

Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

Your social security number

CHAN	JAKYA BANALA						873-7	7-0891	
Part		id Ro	yalties						
	Note: If you are in the business of renting personal proper	rty, use	Schedule	C . See	instru	ctions. If you a	re an indiv	vidual, rep	ort farm
A 1	rental income or loss from Form 4835 on page 2, line 40.	4- £1-		10000 0) !:	-tti			- V N-
	Did you make any payments in 2023 that would require you f "Yes," did you or will you file required Form(s) 1099?								
				• •	• •			те	S NO
1a	Physical address of each property (street, city, state, ZIF								
Α	DNO: 7-107/A, PNO: 102 NANDIGAMA, KRISH	I ANE	DIS ANI	OHRA	PRAD	ESH IN 52	21185		
В									
С									
1b	Type of Property 2 For each rental real estate prope				Fa	ir Rental	Rental Personal Use		
	(from list below) above, report the number of fair					Days	Da	,	QJV
A	gersonal use days. Check the Quif you meet the requirements to f			Α		365		0	
В	qualified joint venture. See instru			В					
_ C				С					
	of Property:				_	0 1/ 0 1 1			
	Single Family Residence 3 Vacation/Short-Term Ren	itai	5 Land			Self-Rental	.u\		
2	Multi-Family Residence 4 Commercial		6 Roya	aities	8	Other (descr	1be)		
						Properti	es:		
Incon	ne:			Α		В			С
3	Rents received	3		6	91.				
4	Royalties received	4							
Expe	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,4	58.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10			4.0				
11	Management fees	11		2,0	40.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13		2 5	21.				
14 15	Repairs	15			85.				
16	Supplies	16		1,0	00.				
17	Utilities	17		2 . 0	10.				
18	Depreciation expense or depletion	18			47.				
19	Other (list)	19		- 0 / -					
20	Total expenses. Add lines 5 through 19	20		13,8	61.				
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	<u> </u>	-13 , 1	70.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(13,17	70.)	()	()
23a	Total of all amounts reported on line 3 for all rental prope				23a		691.		
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b				
С	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		,147.		
е	Total of all amounts reported on line 20 for all properties				23e	13	,861.		
24	Income. Add positive amounts shown on line 21. Do not		-				. 24	/	10 150 \
25	Losses. Add royalty losses from line 21 and rental real estate							(13,170.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this ar						on . 26		-13 , 170.
	Constant in the roy, into or other wise, include this di	ouili		cai oii ii	1	on page 2	. 20		, _ / O .