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)

Taxpayer's name	Social security number							
MONICA JANAPAALA 829-09-8909								
Spouse's name	Spouse's social security number							
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 65,681.							
2 Total tax	2 6,709.							
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 9,393.							
4 Amount you want refunded to you	4 2,684.							
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

X I authorize GLOBAL TAXES LLC to enter or generate my PIN	E
ERO firm name	

			gits, all ze		as my
9	8	9	0	9	

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 my
	ve dig nter a		

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 O	nly									
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PI	N. 2	2	2				0 all zer	 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 Date										
ERO Must Retain This F Don't Submit This Form to the I										
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 01/12/24 PRO	Form 8879 (Rev. 01-2021)							

1040		artment of the Treasury—Internal Revenue Serv S. Individual Income Ta 2		turn	202	3	OMB No. 1545-	-0074	IRS Use Only	–Do not w	rite or sta	aple in this space.
For the year Jan	. 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 r	name						Your so	cial sec	urity number
MONICA			JAN	APAALA	ł					829	09	8909
If joint return, sp	oouse's	s first name and middle initial	Last r	name						Spouse	s social	security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.	Preside	ntial Ele	ection Campaigr
4307 W 36TH ST Ch											ou, or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete	spaces be	low.	Sta	ite	ZIP co	ode			jointly, want \$3 nd. Checking a
MINNEAPC	DLIS					MN	J	554	16			not change
Foreign country	name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your tax	_	_
											Yo	ou Spouse
Filing Status	; <u>×</u>	Single					Head of ho	ouseho	old (HOH)			
Check only	L	Married filing jointly (even if only o	ne hac	l income)			_					
one box.		Married filing separately (MFS)					Qualifying		•	. ,		
	-	ou checked the MFS box, enter the			pouse. If you	u che	ecked the HOH	or QS	SS box, ente	er the ch	ld's na	me if the
	qu	alifying person is a child but not you	ur aepe	endent:								
Digital	At ar	ny time during 2023, did you: (a) rec	eive (a	s a reward	d, award, or	payr	ment for prope	ty or s	services); or	(b) sell,		
Assets	exch	ange, or otherwise dispose of a dig	ital ass	set (or a fi	nancial inter	est ir	n a digital asse	t)? (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	🗌 ls	s blind
Dependents	s (see	instructions):		(2) 5	Social security	,	(3) Relationsh	14			fies for (see instructions):
If more		irst name Last name			number		to you	-P-	Child tax c	redit	Credit fo	or other dependents
than four												
dependents,												
see instructions and check	5											
here 🗌												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	see instruc	ctions) .					. 1a		73,071.
Attach Form(s)	b	Household employee wages not r	eporte	d on Form	n(s) W-2 .					. 1b		
W-2 here. Also	С	Tip income not reported on line 1a (see instructions) .						. 10	:			
attach Forms W-2G and	d		Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						. 1d	-		
1099-R if tax	е	Taxable dependent care benefits								. 1e		
was withheld.	f	Employer-provided adoption bene	efits fro	om Form 8	8839, line 29			• •		. 1f		
lf you did not get a Form	g	Wages from Form 8919, line 6 .						• •		. 1g		
W-2, see	h	Other earned income (see instruct						···		. 1h		0.
instructions.	i	Nontaxable combat pay election (see ins	structions)			1 i					72 071
		Add lines 1a through 1h	· ·		· · ·	 . .	· · · ·	• •		. 1z	-	73,071.
Attach Sch. B if required.	2a	· · -	2a				axable interest			. 2b		
	3a		3a				Ordinary divider				-	
Standard	4a		4a				axable amount axable amount		· · ·	. 4b . 5b		
Deduction for –	5a 6a		5a 6a				axable amount			. 50 . 6b		
 Single or Married filing 	oa C	If you elect to use the lump-sum e		method	check boro				· · ·			
separately, \$13,850	7	Capital gain or (loss). Attach Sche						• •	· · · [7		
 Married filing jointly or 	8	Additional income from Schedule		-						. 8		-7,390.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9		65,681.
surviving spouse, \$27,700	10	Adjustments to income from Sche								. 10		,
 Head of household, 	11	Subtract line 10 from line 9. This is								. 11	-	65,681.
\$20,800	12	Standard deduction or itemized	-		-					. 12		13,850.
 If you checked any box under 	13	Qualified business income deduct					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				е.		. 15	-	51,831.
					,							1010

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

Form **1040** (2023)

Form 1040 (2023	8)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	6,709.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	6,709.
	19	Child tax credit or credit for	other dependen [.]	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	6,709.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is						24	6,709.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				25a 9	, 393.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions				25c			
	d	Add lines 25a through 25c						25d	9,393.
H	26	2023 estimated tax payment						26	
If you have a L qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit				29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3. lin				31			
	32	Add lines 27, 28, 29, and 31.						32	
	33	Add lines 25d, 26, and 32. T					· ·	33	9,393.
Refund	34	If line 33 is more than line 24						34	2,684.
Refund	35a	Amount of line 34 you want i					t t	35a	2,684.
Direct deposit?	b	Routing number $\begin{vmatrix} 1 & 2 & 1 \end{vmatrix}$					· □ Savings	554	2,001.
See instructions.		Account number 8 5 2					Savings		
	d 36	Amount of line 34 you want a			d tox	36			
A		•				30			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, go						07	
Tou Owe	20					1 1		37	
	38	Estimated tax penalty (see in				38			
Third Party		you want to allow another	•		rn with the IRS':		omplete be	olow	× No
Designee		signee's		Phone			onal identific		
	nai			no.			ber (PIN)	Jalion	
Sign	Un	der penalties of perjury, I declare th	nat I have examined	d this return and	accompanying sche	edules and statemen	ts, and to th	e best o	of my knowledge and
Here		ief, they are true, correct, and com							
пеге	Yo	ur signature		Date	Your occupation				nt you an Identity
							1		N, enter it here
Joint return?				_		IONS DEVELOPH			
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, k	ooth must sign.	Date	Spouse's occupat	tion			nt your spouse an action PIN, enter it here
your records.							(see in		
	Ph	one no. (925) 366-3052	2	Email address	Ι 	ICA93@GMAIL.C	M		
		parer's name	Preparer's signat			Date	PTIN		Check if:
Paid					GUPTA TALLAM		P02082	702	Self-employed
Preparer		m's name GLOBAL TAX		TADA PAGAN	JULIA IAUUAN	101/20/2024			678) 965-9522
Use Only		045 5000		NOWICK N	J 08816		Phone Firm's		
Co to united in				TIONICI IN			Firm's		84-3171965 Form 1040 (2023)
GU IU WWW.Irs.go	JV/FOIN	11040 for instructions and the late	si mormanon.		BAA	REV 01/12/24 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 202 23 Attachment Sequence No. 01

Internal Revenue Service		Sequence No. 01	
Name(s) shown on For	m 1040, 1040-SR, or 1040-NR	Your soc	ial security number
MONICA JANAPAAI	A	829-09	-8909

Par	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		
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-7,390.
6	Farm income or (loss). Attach Schedule F.	6	
7	Unemployment compensation	7	
8	Other income:		
а	Net operating loss)	
b	Gambling		
С	Cancellation of debt		
d	Foreign earned income exclusion from Form 2555 8d ()	
е	Income from Form 8853		
f	Income from Form 8889		
g	Alaska Permanent Fund dividends		
h	Jury duty pay		
i	Prizes and awards		
j	Activity not engaged in for profit income		
k	Stock options	_	
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)	_	
n	Section 951(a) inclusion (see instructions)	_	
0	Section 951A(a) inclusion (see instructions)	_	
р	Section 461(I) excess business loss adjustment	_	
q	Big Big Ophological distributions from an ABLE account (see instructions) Big	_	
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	4	
t	a nongovernmental section 457 plan		
	Wages earned while incarcerated	-	
z	Other income. List type and amount:	-	
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 here and on Form		
	1040, 1040-SR, or 1040-NR, line 8	10	-7,390.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		le 1 (Form 1040) 2023

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis gove	ernment		
	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	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit		-	
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m		-	
d	Reforestation amortization and expenses		-	
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974		-	
f	Contributions to section 501(c)(18)(D) pension plans		-	
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)		-	
İ	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			
;	Housing deduction from Form 2555		-	
ן א	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		-	
n	1041)			
7	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	
	BAA REV 01/12/24 PF	RO		1 (Form 1040) 2023

SCHE	DULE E	
(Form	1040)	

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

2023
Attachment

nternal	Revenue Service		Go to www.irs.gov/Sche	eduleE for	instru	uctions a	nd the la	atest in	formation.		Sequen	ce No. 13
Name(s	lame(s) shown on return									Your soc	ial security	number
MONI	MONICA JANAPAALA									829-09-8909		
Part			s From Rental Real Es									
	Note: If you rental incon	i are in tl ne or los	he business of renting persor is from Form 4835 on page 2	nal propert 2. line 40.	y, use	Schedul	le C. See	e instru	ctions. If you	are an indi	vidual, rep	ort farm
Α			ents in 2023 that would rec		to file	Form(s)	1099? 5	See ins	structions .		. 🗌 Ye	s 🛛 No
			ou file required Form(s) 10			. ,						
1 a			ach property (street, city,									
Α	-		P HDFC BANK HYDER			,	TN 50	nnan				
B	NIZAMPEI K	D, OF	F NDEC DANK NIDER	ADAD I	БЦАГ	IGANA	IN 30	0090				
C												
1b	Type of Propert	v 2	For each rental real esta	For each rental real estate property listed Fair Rental								
10	(from list below)		above, report the number				Days		Personal Use Days		QJV	
Α	3	<u></u>	personal use days. Che	ck the QJ	V box	c only	Α		185	0		
В		_	if you meet the requirem				B				-	
С			qualified joint venture. S	see instruc	ctions	3.	C					
	of Property:						-					
	Single Family Re	sidence	e 3 Vacation/Short-T	erm Rent	al	5 Lan	d	7	Self-Rental			
	Multi-Family Res		4 Commercial			6 Roy	alties		Other (desc			
	, ,					, 						
									Propert	les:		•
ncon					0		A	20.	В			С
3 4					3 4		4	20.				
		eu			4							
5	1ses:				5							
6	-		structions)		6							
7					7		1 2	00.				
8					8		1,2	.00.				
9					9							
10			sional fees		10							
11	U U	•			11		9	20.				
12	•		to banks, etc. (see instrue		12			201				
13	00	•		,	13							
14					14		2,1	.00.				
15	Supplies				15			90.				
16					16							
17	Utilities				17		1,7	00.				
18	Depreciation ex	pense (or depletion		18							
19	Other (list)				19							
20	Total expenses.	Add lir	nes 5 through 19		20		7,8	10.				
21	Subtract line 20	from li	ne 3 (rents) and/or 4 (roya	alties). If								
			structions to find out if yo									
					21		-7,3	90.				
22			estate loss after limitation									
			tructions)	1	22	(7,39	90.)	()	(
23a			ported on line 3 for all ren	• •			• •	23a		420.		
b			ported on line 4 for all roy					23b			-	
c			ported on line 12 for all pr	•				23c			-	
d			ported on line 18 for all pr	•				23d			-	
e			ported on line 20 for all pr	•				23e		7,810.		
24	•		amounts shown on line 21			•				. 24	(7 2 2 2 2
25		•	ses from line 21 and rental i								(7,390.
26	I otal rental rea	al estat	te and royalty income or	r (Ioss). (Jomb	ine lines	24 and	i 25. E	nter the res	ult		

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 For Paperwork Reduction Act Notice, see the separate instructions.

here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

26

-7,390.