Form <b>8879</b>
(Rev. January 2021)
Department of the Treesury

#### Department of the Treasury Internal Revenue Service

## **IRS e-file Signature Authorization**

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

T.....

Тахрау	/er's name	Social securit	y numb	ber
PRA	ASHANT K KUNDESHWAR	752-42-	-0020	0
Spouse	e's name	Spouse's soci	ial secu	urity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Ente	r year you ai	re aut	thorizing.)
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	63,620.
2	Total tax		2	6,258.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	8,084.
4	Amount you want refunded to you		4	1,826.
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 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	I authorize	GLOBAL TAXES LLC	to enter or generate my PI
X	I authorize	GLOBAL TAXES LLC	to enter or generate

2	0	0	2	0	
Ent don	er fiv i't er	ve di nter a	gits, all ze	but ros	as

my

as mv

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

Date 🕨

#### Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

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 signature ►	Da	ate 🕨	•				 			
Practi	tioner PIN Method Returns Only—continue	bel	w							
Part III Certification and Authentie	cation — Practitioner PIN Method Only									
ERO's EFIN/PIN. Enter your six-digit EFIN	followed by your five-digit self-selected PIN.	2	2	 	_	6 0 ter all ze	 	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 >			
Do	ERO Must Retain This F n't Submit This Form to the I		
For Depertuerk Deduction Act Notic	a and your tax rature instructions	 BE\/ 01/21/24 BBO	Earm 8879 (Bay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 01/21/24 PRO

<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Tax</b>		turn	202	3	OMB No. 1545	-0074	IRS Use Onl	y—Do not w	vrite or stap	ble in this space.
For the year Jar	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ding			, 20	See se	parate ir	nstructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial secu	urity number
PRASHANT	гк		KUN	DESHWA	AR					752	42	0020
		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 Elec	ction Campaigr
		R RIDGE LN						2	-			ou, or your
		ice. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP co	ode	1 1		pintly, want \$3
SHARONVI						OF	Ŧ	452	41			d. Checking a ot change
Foreign country	/ name			Foreign p	rovince/state/	'count	ty	Foreig	n postal code		c or refur	•
											🗌 Υοι	u 🗌 Spouse
Filing Status	; 🗵	Single					Head of he	ouseh	old (HOH)			
-		] Married filing jointly (even if only or	ne hac	l income)					, ,			
Check only one box.		] Married filing separately (MFS)		,			Qualifying	surviv	ing spouse	(QSS)		
0.10 2011	lf y	you checked the MFS box, enter the	name	of your s	pouse. If yo	u che			<b>.</b> .		ild's nan	ne if the
	qu	Ialifying person is a child but not you	ır depe	endent:								
	<u> </u>											
Digital Assets		ny time during 2023, did you: (a) rece nange, or otherwise dispose of a digi						-	,	. ,	☐ Ye	s 🛛 No
		neone can claim:  You as a de					a dependent	1) (36		115.)		
Standard Deduction		Spouse itemizes on a separate return	•		-		-					
Deduction			n or ye		uuai-siaius	allei	<u> </u>					
Age/Blindness	s You	: Were born before January 2, 1	959	Are bl	lind <b>Sp</b>	ouse	: 🗌 Was bor	n befo	ore January	2, 1959	🗌 Is	blind
Dependents	s (see	instructions):		(2) \$	Social security	y	(3) Relationsh	ip (4				ee instructions):
If more	<b>(1)</b> F	(1) First name Last name			number		to you	Child tax o		redit	Credit for	other dependents
than four												
dependents, see instructions	s ——											<u> </u>
and check												<u> </u>
here 🗌												
Income	1a	Total amount from Form(s) W-2, be			,						-	74,581.
Attach Form(s)	b	Household employee wages not re	•								-	
W-2 here. Also	С	Tip income not reported on line 1a	•		,						-	
attach Forms W-2G and	d	Medicaid waiver payments not rep		`	, (	instru	uctions)	• •		. <u>1</u> d	-	
1099-R if tax	е	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 .				· ·		• •		. <u>1</u> g		0
W-2, see	h	Other earned income (see instructi	,	· · ·		• •		· ·		. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)		• •	<b>1</b> i			- 4		71 501
		Add lines 1a through 1h			· · ·	 . <del>.</del>	· · · · ·		· · ·	. 1z	-	74,581.
Attach Sch. B if required.	2a 2a	· · -	2a				axable interest			. 2b	-	
	<u>3a</u>		3a 4a				Ordinary divider			. 3b	-	
Standard	4a 50	-	4a 5a				axable amount axable amount			. 4b . 5b	-	
Deduction for-	5a 6a	-	5a 6a				axable amoun			. 50	-	
<ul> <li>Single or Married filing</li> </ul>		If you elect to use the lump-sum elect		mothod								
separately, \$13,850	с 7	Capital gain or (loss). Attach Scher		,		`	,	• •		7		
<ul> <li>Married filing</li> </ul>	8	Additional income from Schedule		•	•		-	• •		. 8		-10,961.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						• •		. 9		63,620.
surviving spouse, \$27,700	9 10	Adjustments to income from Sche						• •		. 10		
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is								. 11		63,620.
\$20,800	12	Standard deduction or itemized	-	-	-					. 12	-	13,850.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deducti								. 13		<u> </u>
Standard	14	Add lines 12 and 13				. 555				. 14		13,850.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ss. enter	 -0 This is v	 /our f	taxable incom	e .		. 15		49,770.

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

Form **1040** (2023)

Form 1040 (2023	3)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3 🗌		16	6,258.
Credits	17	Amount from Schedule 2, lin	ie3				-	17	
	18	Add lines 16 and 17						18	6,258.
	19	Child tax credit or credit for	other dependent	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	6,258.
	23	Other taxes, including self-e						23	0.
	24	Add lines 22 and 23. This is	your total tax					24	6,258.
Payments	25	Federal income tax withheld							
· · · <b>,</b> · · · · · · · · · · · · · · · · · · ·	а	Form(s) W-2				25a	3,084.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	8,084.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	)22 return			26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit fror				28		1	
	29	American opportunity credit	from Form 8863	8, line 8		29		1	
	30	Reserved for future use .		· 		30		1	
	31	Amount from Schedule 3, lin				31		1	
	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	hese are your <b>to</b>	tal payments	·			33	8,084.
Refund	34	If line 33 is more than line 24						34	1,826.
	35a	Amount of line 34 you want	refunded to you	I. If Form 8888	3 is attached, che	ck here	🗆	35a	1,826.
Direct deposit?	b	Routing number 0 5 1				Checking	Savings		
See instructions.	d	Account number 8 9 2	1 3 7 0	99			-		
	36	Amount of line 34 you want a	applied to your :	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24							
You Owe	••	For details on how to pay, g						37	
	38	Estimated tax penalty (see ir	nstructions) .			38			
Third Party	Do	you want to allow another				? See			
Designee		structions	•				omplete b	elow.	X No
-		signee's		Phone			sonal identif	ication	
	nai			no.			ber (PIN)		
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com							
Here				、	1 1			• •	nt you an Identity
	to	ur signature		Date	Your occupation				IN, enter it here
Joint return?					SOFTWARE 1	ENGINEER	(see		
See instructions.	Sp	ouse's signature. If a joint return, <b>t</b>	ooth must sign.	Date	Spouse's occupat	tion			nt your spouse an
Keep a copy for your records.							Ident (see		ection PIN, enter it here
your rooordo.								inst.)	
		one no. (513)284-952		Email address	PKUNDESHW	AR@GMAIL.C			Oha ala ita
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	1 02/01/2024	P02082		Self-employed
Use Only		m's name GLOBAL TAX							678)965-9522
				n Cummin	g GA 30041		Firm'	s EIN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/21/24 PRO			Form <b>1040</b> (2023)

SCHEDULE	1
(Form 1040)	

# Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 2 23

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. <b>01</b>
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
PRASHANT K KUN	DESHWAR	752-42	-0020
	••		

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		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ch Schedule E .	5	-10,961.
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		
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			
	<i>,</i>	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	<u>8u</u>	_	
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 <b>additional income</b> . Enter 1040, 1040-SR, or 1040-NR, line 8	here and on Form	10	-10,961.
For Pa	perwork Reduction Act Notice, see your tax return instructions.			e 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basi	s 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			19a	
b	Recipient's SSN			
c	Date of original divorce or separation agreement (see instructions):			
20			20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:		20	
2-7 a	Jury duty pay (see instructions)			
a b	Deductible expenses related to income reported on line 8I from the			
D	rental of personal property engaged in for profit			
-	Nontaxable amount of the value of Olympic and Paralympic medals		-	
С	and USOC prize money reported on line 8m			
لم			-	
d			-	
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)		-	
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		-	
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
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			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV	01/21/24 PRO	Schedule 1 (	Form 1040) 202

SCHE	DULE	Ε
(Form	1040)	

### Supplemental Income and Loss

OMB No. 1545-0074  $\sim$ 

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

'	2023
	Attachment Sequence No. <b>13</b>

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. Name(s) shown on return Your social security number PRASHANT K KUNDESHWAR 752-42-0020 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 . X No Α . . . . Yes If "Yes." did you or will you file required Form(s) 1099? В Yes No 1a Physical address of each property (street, city, state, ZIP code) BALAJI RESIDENCY HYDERABAD TELANGANA IN 508207 Α В С 1b Type of Property **Fair Rental** Personal Use 2 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 2 Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С С 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 С Income: 3 Rents received . 3 512. 4 4 Royalties received **Expenses:** 5 5 Advertising . . . . . . . . 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . 7 1,425. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . 11 1,200. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 Other interest 13 . . . . . . . 14 14 1,429. Repairs . . . . 2,018. 15 Supplies 15 . . . . 16 16 Taxes 17 Utilities . . . . . . . 17 2,124. 18 3,277. 18 Depreciation expense or depletion . . . . . . 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 . . . . 11,473. 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 21 -10,961. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . 22 10,961.) 512. 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 b Total of all amounts reported on line 12 for all properties 23c С 3,277. 23d Total of all amounts reported on line 18 for all properties d 11,473. Total of all amounts reported on line 20 for all properties 23e е 24

24 Income. Add positive amounts shown on line 21. Do not include any losses . . . 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 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 Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

26 -10,961. Schedule E (Form 1040) 2023

10,961.

25