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

	1.000.000				
Subm	ission Identification Number (SID)				
Taxpay	er's name	Social securit	y numb	per	
AKH	ILASH PENNAM	283-91-	-482	4	
Spouse	s's name	Spouse's soc	ial seci	urity number	
David	Too Datawa Information - Too Van Fudina Danashan 04 - 0000 /Fu			tla a siaita as N	
Part		nter year you a	re au	tnorizing.)
	whole dollars only on lines 1 through 5.				
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. Adjusted gross income		1	150	,329.
1 2	Total tax		2		, 329. , 117.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,209.
4	Amount you want refunded to you		4	20,	,209.
5	Amount you owe		5	5	,908.
Part	,	nd keep a cop		/our retu	,
my knowner to send for any Agent payme authori payme taxes to person Electro	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	above are the amonsmitter, or electron of the true U.S. Treasury an indicated in the tatution to debit the nate the authorizated must be the processing of the payment. I furt I am now authoritate my PIN	punts for an	from the inc turn originat sssion, (b) th designated in paration soft to this acco To revoke (oved no late ectronic paracknowledge and, if applic	come tax cor (ERO) e reason Financial tware for unt. This cancel) a er than 2 yment of that the able, my
	I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN and your return is filed using the Practitioner PIN melow.	ethod. The ERC			
Your	signature ► Date ■	04/11/2024			
Spous	se's PIN: check one box only				
	I authorize to enter or genera	ate mv PIN			as my
_	ERO firm name	Ent		digits, but	,
	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 are if you are entering your own PIN and your return is filed using the Practitioner PIN m below.	m now authorizir	ng. Ch		
Spous	se's signature ▶ Date ▶	•			
	Practitioner PIN Method Returns Only—continue bel	ow			
Part	III Certification and Authentication — Practitioner PIN Method Only				
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 9 Don't ente	6 0 er all ze	8 2 7 eros	1
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual incomized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am stements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers	ubmitting this retu	rn in a	accordance	
ERO's	s signature ▶ Date ▶	•			
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested T				

Form 1040-V (2022) 2023 Page **2**

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V 2023**

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service 2023

Form 1040-V Payment Voucher

▶ Use this voucher when making a payment with Form 1040.

► Do not staple this voucher or your payment to Form 1040.

► Make your check or money order payable to the 'United States Treasury.'

► Write your social security number (SSN) on your check or money order.

Enter the amount of your payment ► 5 ¬ 9 □ 8 - REV 03/07/24 PRO 1555

AKHILASH PENNAM

3990 SPRING VALLEY ROAD 1125 DALLAS TX 75244

INTERNAL REVENUE SERVICE P.O. BOX 1214 CHARLOTTE, NC 28201-1214

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



1040		artment of the Treasury-Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	ple in this s	space.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	oarate i	nstructio	ons.
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	urity nun	nber
AKHILASI	Н		PENN	IAM							283	91	4824	
		s first name and middle initial	Last na										security	
											448	61	9481	
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ons.				A	Apt. no.				ction Ca	ımpaign
3990 SPI	RTNG	VALLEY ROAD						1	125	ı	Check h	nere if y	ou, or yo	our
		ice. If you have a foreign address, also co	omplete s	paces be	low.	Sta	te	ZIP c				.	jointly, w	
DALLAS						TX	ζ	752	44		•		nd. Checl	_
Foreign countr	y name		1	Foreign p	rovince/state/				gn postal c		your tax			ge
												Yo	u 🔲 :	Spouse
Filing Status	s [Single					Head of h	ouseh	old (HOI	- 1)				
-		Married filing jointly (even if only o	ne had i	income)						,				
Check only one box.	×	Married filing separately (MFS)		,			☐ Qualifying	survi	/ina spoi	use (C	QSS)			
0110 20%.		you checked the MFS box, enter the	name c	of your si	pouse. If you	u che	, ,		• .	,	,	ld's nai	me if the	Э
		, ialifying person is a child but not you							ŕ					
Digital Assets		ny time during 2023, did you: (a) rec nange, or otherwise dispose of a dig						•			,	ΠYe	es 🛛 I	No
								el) ? (3t	e instru	CHOIL	5.)			NO
Standard Deduction		neone can claim:	•		•		a dependent							
Deduction	<u> </u>	Spouse itemizes on a separate retur	n or you	ı were a	duai-status	allen								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bl	lind Sp o	ouse	: Was bo	rn befo	ore Janua	ary 2,	1959	ls	blind	
Dependent	s (see	instructions):		(2) 9	Social security	,	(3) Relationsh	nip (4) Check t	he bo	x if quali	fies for (see instru	uctions):
If more		(1) First name Last name		, ,	number		to you		Child t	ax cre	edit	Credit fo	r other dep	pendents
than four														
dependents,														
see instruction and check	5													
here														
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruc	ctions) .						1a		132,1	107.
Attach Form(s)	b	Household employee wages not re	eported	on Form	n(s) W-2 .						1b			
W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	struction	ns)						1c			
attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s	s) W-2 (see i	nstru	ictions)				1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	from For	rm 2441,	, line 26						1e			
was withheld.	f	Employer-provided adoption bene	efits fron	n Form 8	839, line 29						1f			
If you did not	g	Wages from Form 8919, line 6 .									1g			
get a Form W-2, see	h	Other earned income (see instruct	ions)								1h			0.
instructions.	i	Nontaxable combat pay election (s	see insti	ructions)			<u>1</u> i	i						
	z	Add lines 1a through 1h									1z		132,1	107.
Attach Sch. B	2a	Tax-exempt interest	2a			b Ta	axable interes	t.			2b			
if required.	3a_	Qualified dividends	3a			b 0	rdinary divide	nds .			3b			
Standard	4a	IRA distributions	4a				axable amoun				4b			
Deduction for—	5a	Pensions and annuities	5a			b Ta	axable amoun	t			5b		46,6	603.
Single or	6a	,	6a				axable amoun	t			6b			
Married filing separately,	С	If you elect to use the lump-sum e				`	,							
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche								. L	7			
jointly or	8	Additional income from Schedule	•								8		-19 , 3	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-	our total in	come	e				9		159,3	<u>329.</u>
\$27,700 • Head of	10	Adjustments to income from Sche									10			
household,	11	Subtract line 10 from line 9. This is	-								11		159,3	
\$20,800 If you checked	12	Standard deduction or itemized									12		<u> 13,8</u>	850.
any box under Standard	13	Qualified business income deduct	ion from	Form 8	995 or Form	899	5-A				13			
Deduction,	14										14			850.
see instructions.	15	Subtract line 1/1 from line 11 If zer	ro or loc	c ontor	O Thic ic v		tavabla incom	•			15	1	1/15 /	17a

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	28,315.	
Credits	17	Amount from Schedule 2, lin	ie 3					17		
	18	Add lines 16 and 17						18	28,315.	
	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	28,315.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	3,802.	
	24	Add lines 22 and 23. This is	your total tax					24	32,117.	
Payments	25	Federal income tax withheld	from:							
_	а	Form(s) W-2				25a 21	. , 549.			
	b	Form(s) 1099				25b 4	1,660.			
	С	Other forms (see instructions	s)			25c	0.			
	d	Add lines 25a through 25c						25d	26,209.	
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20)22 return			26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)				27				
allacii Scii. Eic.	28	Additional child tax credit from	m Schedule 8812			28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin								
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	26,209.	
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amoun	t you overpaid		34		
	35a	Amount of line 34 you want			is attached, chec	k here	. 🗆	35a		
Direct deposit?	b	Routing number X X X					Savings			
See instructions.	d	Account number X X X	X X X X	X X X X	X X X X	XX				
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	5,908.	
roa o we	38	Estimated tax penalty (see in	=	-		38		37	3,300.	
Third Party		you want to allow another								
Designee		•	•				omplete	below.	X No	
_ 00.g00	De	signee's		Phone			onal iden		_	
	na	me		no.		num	ber (PIN)			
Sign		der penalties of perjury, I declare the lief, they are true, correct, and com								
Here	Yo	ur signature		Date	Your occupation		lf th	ne IRS se	nt you an Identity	
		<u></u>					Pro	tection P	IN, enter it here	
Joint return?					SOFTWARE D	EVELOPER	(see	e inst.)		
See instructions. Keep a copy for your records.		Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupation	on	Ide		nt your spouse an ection PIN, enter it here	
	Ph	one no. (703) 577-753	8	Email address	AKHILASH.PEN	NAM@GMAIL.C	MC			
		eparer's name	Preparer's signat	l		Date	PTIN		Check if:	
Paid	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAC	GAR GUPTA	04/08/2024	P0208	32703	Self-employed	
Preparer									(678) 965-9522	
Use Only			Y CT E BRU	NSWICK N	J 08816			n's EIN	84-3171965	
	- "						1		01 01/1000	

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

AKHILASH PENNAM

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.

Sequence No. 01

Your social security number 283-91-4824

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. Att	ach Schedule E .	5	-19,381.
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		
- 1	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	4	
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	4	
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 . Ente		4.0	10 201
	1040, 1040-SR, or 1040-NR, line 8		10	-19 , 381.

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-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				
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)	24a		_	
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b		-	
С	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			
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	041			
_	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	04:			
	Housing deduction from Form 2555	24i 24j		-	
J	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24 j		-	
k	1041)	24k			
_		24K		-	
Z	Other adjustments. List type and amount:	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income			23	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		07/24 PRO		le 1 (Form 1040) 2023
	BAA	INEV U3/	ULIZA FINO	uu	

SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Taxes

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. 02

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

Your social security number 283-91-4824

Pa	tl Tax		
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17.	3	
Par	t Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137		
6	Uncollected social security and Medicare tax on wages. Attach Form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.		
	If not required, check here	8	3,660.
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	142.
12	Net investment income tax. Attach Form 8960	12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	
	(cc	ontinu	ed on page 2)

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

Part II Other Taxes (continued)

17	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount:			
		17a		
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b		
С	Additional tax on HSA distributions. Attach Form 8889	17c		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A $$	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
I	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
Z	Any other taxes. List type and amount:			
		17z		
18	Total additional taxes. Add lines 17a through 17z		18	
19	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your total other tax on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b	es. Enter here and	21	3,802.

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.

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

AKHI	LASH PENNAM							283	-91-482	4	
Part		rom Rental Real Estate and	d Roy	alties							
	Note: If you are in the b	usiness of renting personal propertom Form 4835 on page 2, line 40.	ty, use	Schedule	C . See	instru	ctions. If you a	are an i	ndividual, re	port farm	
Α [in 2023 that would require you	to file l	Form(s) 1	0002 5	Saa ins	etructions			/as X Na	_
		ille required Form(s) 1099? .									
		property (street, city, state, ZIF					<u> </u>		· · · ·		_
						7.170		7.011	T.T. F.21.01	1.0	
A B	H NO:2-63 NEAR RAI	MALAYAM LANEKELAPALEM	I VIS	HAKAPA	AT'NAM,	, AND	HRA PRADE	SH .	IN 5310.	19	
C											_
1b	Type of Droporty 0 Fe		المحال الما	l			in Donatal	Daw			_
ID		or each rental real estate proper bove, report the number of fair r				га	ir Rental Days	Pers	sonal Use Days	QJV	
Α		ersonal use days. Check the QJ			Α		340		0	+	_
В	if	you meet the requirements to fi			В		310			1 7	_
С	qu	ualified joint venture. See instru	ctions.	•	C						_
Type	of Property:						l				_
	Single Family Residence	3 Vacation/Short-Term Rent	tal	5 Land		7	Self-Rental				
	Multi-Family Residence	4 Commercial		6 Roya	ılties	8	Other (descr	ribe)			
	·						Properti				
Incom	10'				Α		В	es.		С	
3			3			80.					_
4			4		,	•••					_
Exper			-								_
5			5								
6		ctions)	6								_
7	· · · · · · · · · · · · · · · · · · ·	·	7		1,5	20.					_
8			8								
9			9								
10		nal fees	10								
11			11		2,1	42.					
12		panks, etc. (see instructions)	12								
13			13								
14			14		4,5						
15			15		6,1	00.					
16			16			1 -					
17			17			15. 84.					
18	Depreciation expense or d Other (list)	epietion	18 19		3,4	84.					
19 20	Total expenses. Add lines	5 through 19	20		20,1	61					_
21	•	3 (rents) and/or 4 (royalties). If	20		20,1	<u> </u>					_
21		ections to find out if you must									
	file Form 6198		21	-	- 19 , 3	81.					
22	Deductible rental real esta	te loss after limitation, if any,									_
		tions)	22		19,38	31.)	()()
23a	Total of all amounts report	ed on line 3 for all rental proper	rties			23a		780).		
b		ed on line 4 for all royalty prope	erties			23b					
С		ed on line 12 for all properties				23c					
d		ed on line 18 for all properties				23d		, 484			
е		ed on line 20 for all properties				23e	20	,161	_		
24	· ·	ounts shown on line 21. Do not		-				_	24		
25	• •	from line 21 and rental real estate							25 (19,381.)
26		nd royalty income or (loss).						- 1			
		, and line 40 on page 2 do not)	_10 391	

5329

Department of the Treasury Internal Revenue Service

Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

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

Go to www.irs.gov/Form5329 for instructions and the latest information.

OMB No. 1545-0074 Attachment Sequence No. 29

Name of individual subject to additional tax. If married filing jointly, see instructions. Your social security number 283-91-4824 AKHILASH PENNAM Home address (number and street), or P.O. box if mail is not delivered to your home Apt. no. Fill in Your Address Only City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces if You Are Filing This below. See instructions. Form by Itself and Not If this is an amended return, check here With Your Tax Return Foreign postal code Foreign country name Foreign province/state/county If you only owe the additional 10% tax on the full amount of the early distributions, you may be able to report this tax directly on Schedule 2 (Form 1040), line 8, without filing Form 5329. See instructions. Additional Tax on Early Distributions. Complete this part if you took a taxable distribution (other than a qualified disaster distribution) before you reached age 59½ from a qualified retirement plan (including an IRA) or modified endowment contract (unless you are reporting this tax directly on Schedule 2 (Form 1040)—see above). You may also have to complete this part to indicate that you qualify for an exception to the additional tax on early distributions or for certain Roth IRA distributions. See instructions. Early distributions includible in income (see instructions). For Roth IRA distributions, see instructions. 1 46,603. Early distributions included on line 1 that are not subject to the additional tax (see instructions). 2 Enter the appropriate exception number from the instructions: 09 2 10,000. 3 3 36,603. Additional tax. Enter 10% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040), line 8 . . . 3,660. Caution: If any part of the amount on line 3 was a distribution from a SIMPLE IRA, you may have to include 25% of that amount on line 4 instead of 10%. See instructions. Additional Tax on Certain Distributions From Education Accounts and ABLE Accounts. Complete this part Part II if you included an amount in income, on Schedule 1 (Form 1040), line 8z, from a Coverdell education savings account (ESA) or a qualified tuition program (QTP), or on Schedule 1 (Form 1040), line 8q, from an ABLE account. Distributions included in income from a Coverdell ESA, a QTP, or an ABLE account 5 5 6 Distributions included on line 5 that are not subject to the additional tax (see instructions) 6 7 7 8 Additional tax. Enter 10% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040), line 8. 8 Part III Additional Tax on Excess Contributions to Traditional IRAs. Complete this part if you contributed more to your traditional IRAs for 2023 than is allowable or you had an amount on line 17 of your 2022 Form 5329. 9 Enter your excess contributions from line 16 of your 2022 Form 5329. See instructions. If zero, go to line 15 If your traditional IRA contributions for 2023 are less than your maximum 10 allowable contribution, see instructions. Otherwise, enter -0- 10 11 2023 traditional IRA distributions included in income (see instructions) . . . 11 12 2023 distributions of prior year excess contributions (see instructions) . . . 13 13 14 Prior year excess contributions. Subtract line 13 from line 9. If zero or less, enter -0- 14 15 15 16 16 Additional tax. Enter 6% (0.06) of the smaller of line 16 or the value of your traditional IRAs on December 17 31, 2023 (including 2023 contributions made in 2024). Include this amount on Schedule 2 (Form 1040), line 8 17 Part IV Additional Tax on Excess Contributions to Roth IRAs. Complete this part if you contributed more to your Roth IRAs for 2023 than is allowable or you had an amount on line 25 of your 2022 Form 5329. Enter your excess contributions from line 24 of your 2022 Form 5329. See instructions. If zero, go to line 23 18 18 If your Roth IRA contributions for 2023 are less than your maximum allowable 19 19 contribution, see instructions. Otherwise, enter -0- 20 2023 distributions from your Roth IRAs (see instructions) 21 21 22 Prior year excess contributions. Subtract line 21 from line 18. If zero or less, enter -0-. . . . 22 23 Excess contributions for 2023 (see instructions) 23 24 24 25 Additional tax. Enter 6% (0.06) of the smaller of line 24 or the value of your Roth IRAs on December 31, 2023 (including 2023 contributions made in 2024). Include this amount on Schedule 2 (Form 1040), line 8 25

Form 5329 (2023) Page **2**

Part				tributions to Coverdell ESAs. Con nan is allowable or you had an amount				
26				f your 2022 Form 5329. See instruction			26	
27				SAs for 2023 were less than the				
			•	uctions. Otherwise, enter -0	27			
28				s (see instructions)	28			
29		ines 27 and 2	_				29	
30	Prior	year excess	contributions. Subtract lin	ne 29 from line 26. If zero or less, ente	r -0		30	
31	Exces	ss contribution	ons for 2023 (see instruct	ions)			31	
32	Total	excess cont	ributions. Add lines 30 an	d 31			32	
33	Addit	ional tax. En	ter 6% (0.06) of the smalle	er of line 32 or the value of your Coverde	ell ESAs on	December		
	31, 20	23 (including	2023 contributions made	in 2024). Include this amount on Schedu	le 2 (Form 1	1040), line 8	33	
Part \	VI .	Additional	Tax on Excess Contri	butions to Archer MSAs. Comple	te this part	if you or y	our em	ployer contributed
	-	more to your	r Archer MSAs for 2023 th	nan is allowable or you had an amount	on line 41	of your 20	22 Forn	n 5329.
34	Enter	the excess c	ontributions from line 40 c	of your 2022 Form 5329. See instruction	s. If zero, g	o to line 39	34	
35	If the	contribution	s to your Archer MSAs for	or 2023 are less than the maximum				
	allowa	able contribu	ition, see instructions. Ot	herwise, enter -0	35			
36	2023	distributions	from your Archer MSAs t	from Form 8853, line 8	36			
37	Add li	ines 35 and 3	36				37	
38	Prior :	year excess	contributions. Subtract lin	ne 37 from line 34. If zero or less, ente	r -0		38	
39	Exces	ss contribution	ons for 2023 (see instruct	ions)			39	
40	Total	excess cont	ributions. Add lines 38 an	id 39			40	
41	Addit	ional tax. E	Enter 6% (0.06) of the s	maller of line 40 or the value of y	our Archer	MSAs on		
	Dece	mber 31, 202	23 (including 2023 contril	butions made in 2024). Include this a	mount on S	Schedule 2		
							41	
Part \				tributions to Health Savings Ac	•	-	•	
				nployer contributed more to your HS	As for 202	23 than is	allowat	ole or you had an
			ne 49 of your 2022 Form					
42	Enter	the excess of	contributions from line 48	of your 2022 Form 5329. If zero, go to	o line 47		42	
43				2023 are less than the maximum				
				herwise, enter -0	43			
44			-	rm 8889, line 16	44			
45							45	
46		-		ne 45 from line 42. If zero or less, ente			46	
47			•	ions)			47	
48				d 47			48	
49				aller of line 48 or the value of your H				
				2024). Include this amount on Schedule	•		49	
Part V				ibutions to an ABLE Account. C	omplete thi	is part if co	ntribut	ions to your ABLE
			2023 were more than is a					Г
50			ons for 2023 (see instructi	,			50	
51			` ,	maller of line 50 or the value of yo				
B				Schedule 2 (Form 1040), line 8			51	
Part I				nulation in Qualified Retirement	-	_	RAS).	Complete this part
		-		quired distribution from your qualified				
52		•	distribution for 2023 (see	•			52	
53		,	•	(see instructions)			53	
54			om line 52. If zero or less				54	
55				o calculate the additional tax. If you q	•	ie 10% tax		
				ne qualified retirement plan, check this			FE	
				040), line 8 or Form 1041, Schedule G		· · · ·	55	at of my knowledge and
		nly if You	belief, it is true, correct, and com	lare that I have examined this form, including accorplete. Declaration of preparer (other than taxpayer) is	s based on all in	nformation of v	hich prep	arer has any knowledge
		nis Form						
Your 1		l Not With eturn	Your signature			Date		
				Preparer's signature	Date			PTIN
Paid		Print/Type prep	Jai S Hailie				k <u> </u>	I IIIN
Prepa		Eirm's nome				Firm's EIN	,	
Use (Only	Firm's name Firm's address	<u> </u>			Phone no.		

Form **8959**

Department of the Treasury Internal Revenue Service

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions. Attach to Form 1040, 1040-SR, 1040-NR, or 1040-SS.

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. 71

Name(s) shown on return

AKHILASH PENNAM

283-91-4824

AKH.		283-91-4	824
Part	Additional Medicare Tax on Medicare Wages		
1	Medicare wages and tips from Form W-2, box 5. If you have more than one		
	Form W-2, enter the total of the amounts from box 5	753.	
2	Unreported tips from Form 4137, line 6		
3	Wages from Form 8919, line 6		
4	Add lines 1 through 3	753.	
5	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately \$125,000		
	Single, Head of household, or Qualifying surviving spouse \$200,000 5 125,	000.	
6	Subtract line 5 from line 4. If zero or less, enter -0		15 , 753.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and of		,
			142.
Part	Part II		
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you		
•	had a loss, enter -0		
9	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately \$125,000		
	Single, Head of household, or Qualifying surviving spouse \$200,000 9		
10	Enter the amount from line 4		
11	Subtract line 10 from line 9. If zero or less, enter -0		
12	Subtract line 11 from line 8. If zero or less, enter -0	12	1
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here		
Part	go to Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation	n	1
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14		
•	(see instructions)		
15	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately \$125,000		
	Single, Head of household, or Qualifying surviving spouse \$200,000		
16	Subtract line 15 from line 14. If zero or less, enter -0	16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.		
	Enter here and go to Part IV		
Part	V Total Additional Medicare Tax		
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 104	0-SS	
	filers, see instructions), and go to Part V		142.
Part	V Withholding Reconciliation	•	
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form		
	W-2, enter the total of the amounts from box 6	041.	
20		753.	
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax		
		041.	I
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Additional Medicare		
	withholding on Medicare wages		0.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2		
-	14 (see instructions)		
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount		
	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-SS)		
	see instructions)	24	

BAA

Form **8960**

Net Investment Income Tax— Individuals, Estates, and Trusts

Department of the Treasury Internal Revenue Service Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.

2023
Attachment
Sequence No. 72

OMB No. 1545-2227

Name(s) shown on your tax return Your social security number or EIN AKHILASH PENNAM 283-91-4824 Part I Investment Income ☐ Section 6013(g) election (see instructions) ☐ Section 6013(h) election (see instructions) ☐ Regulations section 1.1411-10(g) election (see instructions) 1 2 2 3 3 Rental real estate, royalties, partnerships, S corporations, trusts, trades or 4a -19,381. Adjustment for net income or loss derived in the ordinary course of a nonsection 1411 trade or business (see instructions) 4b -19,381. 4c Net gain or loss from disposition of property (see instructions) 5a 5a Net gain or loss from disposition of property that is not subject to net 5b Adjustment from disposition of partnership interest or S corporation stock (see 5d 6 Adjustments to investment income for certain CFCs and PFICs (see instructions) 6 7 7 Other modifications to investment income (see instructions) Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7. 8 -19,381Part II Investment Expenses Allocable to Investment Income and Modifications State, local, and foreign income tax (see instructions) 9b Miscellaneous investment expenses (see instructions) . . 9c 9d 10 10 Total deductions and modifications. Add lines 9d and 10 11 11 Part III Tax Computation Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. 12 12 0. Individuals: Modified adjusted gross income (see instructions) 13 159,329. 14 125,000. 15 Subtract line 14 from line 13. If zero or less, enter -0- 15 34,329. 16 16 0. Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include 17 17 0. **Estates and Trusts:** Deductions for distributions of net investment income and charitable 18b Undistributed net investment income. Subtract line 18b from line 18a (see 18c 19a Highest tax bracket for estates and trusts for the year (see instructions) . . . 19b 19c 20 20 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and 21 21

BAA