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)

Taxpaver's name

Taxpay	er's name	Social security number			
ABH	ISHEK YADAV AKKEM	033-75-33	72		
Spouse	's name	Spouse's social se	curity number		
Part	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	r year you are a	uthorizing.)		
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	165,584.		
2	Total tax	2	29,816.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	36,831.		
4	Amount you want refunded to you	4	7,015.		
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

^	1 autriorize	GIODAI	IAAES	ERO firm name	to enter or generate my Fin	Er
V	l authorize	CTOBAT	TAVEC	TTC	to enter or generate my PIN	Ľ

Ent	as my				
5	3	3	7	2	

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 o	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	Date 🕨				
Practitioner PIN Method Returns Only—continue below					
Part III 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 6 0 8 2 7 1 Don't enter all zeros				

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 Don't Submit This Form to the			
For Paperwork Reduction Act Notice, see your tax return instructions	BAA	REV 02/11/24 PRO	Form 8879 (Rev. 01-2021)

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		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, enc	ding			, 20	See se	parate i	instructions.
Your first name	and m	iddle initial	Last r	ame						Your so	cial sec	urity number
ABHISHER	(YAI	DAV	AKK	EM						033	75	3372
		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	Apt. no.	Preside	ntial Ele	ection Campaign
906 DEX1	'ER Z	AVE N						I	404	Check I	nere if y	ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP c	ode			jointly, want \$3
SEATTLE						WZ	A I	981	09			nd. Checking a not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your tax		0
											Yc	ou 🗌 Spouse
Filing Status] Single					Head of he	ouseh	old (HOH)			
Check only] Married filing jointly (even if only or	ne had	l income)								
one box.] Married filing separately (MFS)					Qualifying	surviv	ing spouse/	(QSS)		
	lf y	ou checked the MFS box, enter the	name	of your s	pouse. If you	u che	ecked the HOH	l or Q	SS box, ente	er the ch	ild's na	me if the
	qu	alifying person is a child but not you	ır depe	endent:								
Digital	Atar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d award or	navr	ment for prope	rtv or	services): or	(b) sell		
Assets		ange, or otherwise dispose of a digi						-			Ye	es 🛛 No
Standard		eone can claim: Vou as a de					a dependent	, ,		,		
Deduction		Spouse itemizes on a separate return			dual-status	alien	, 1					
Age/Blindness	S You:	: 🗌 Were born before January 2, 1	959	Are bl	lind Spo	ouse	: 🗌 Was bor	n befo	ore January	2, 1959		s blind
Dependents		-		(2) 5	Social security	,	(3) Relationsh	1			fies for (see instructions):
If more		irst name Last name			number		to you		Child tax c	redit	Credit fo	or other dependents
than four												
dependents,												
see instructions and check	s											
here 🗌												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	ee instruc	ctions) .					. 1a		184,197.
Attach Form(s)	b	Household employee wages not re	-							. 1b	·	
W-2 here. Also	С	Tip income not reported on line 1a								. 10	-	
attach Forms W-2G and	d	Medicaid waiver payments not rep		,	, (nstru	uctions)	• •		. 1d	-	
1099-R if tax	е	Taxable dependent care benefits f						• •		. 1e		
was withheld.	f	Employer-provided adoption bene						• •		. 1f		
lf you did not get a Form	g	6						• •	· · ·	. <u>1</u> g		0
W-2, see	h	Other earned income (see instructi					· · · ·	· ·		. 1h		0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			1 i			_		10/ 107
	<u>z</u>	Add lines 1a through 1h		• • •	· · ·	 ьт	· · · ·	• •	• • •	. 1z	-	184,197.
Attach Sch. B if required.	2a 2a	· ·	2a 3a				axable interest				-	
	3a 40	· · · · · · · · · · · · · · · · · · ·	3a 4a				Ordinary divider axable amount			. 30	-	
Standard	4a 5a		ња 5а				axable amount			. 40 . 5b	-	
Deduction for -	5a 6a		6a				axable amount		• • •	. 6b	-	
 Single or Married filing 	C	If you elect to use the lump-sum el	-	method	check here				· · · [·	
separately, \$13,850	7	Capital gain or (loss). Attach Scher						• •	[7		
 Married filing 	8	Additional income from Schedule			•			• •	••••	. 8		-18,613.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							• • •	. 9		165,584.
surviving spouse, \$27,700	10	Adjustments to income from Sche					.			. 10		,
 Head of household, 	11	Subtract line 10 from line 9. This is								. 11	-	165,584.
\$20,800	12	Standard deduction or itemized	-		-					. 12		13,850.
 If you checked any box under 	13	Qualified business income deducti								. 13		±0,000.
Standard Deduction,	14	Add lines 12 and 13								. 14	-	13,850.
see instructions.	15	Subtract line 14 from line 11. If zer						e .		. 15	-	151,734.
			-									

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

Form **1040** (2023)

Form 1040 (2023	3)							Page 2
Tax and	16	Tax (see instructions). Check i	f any from Form	(s): 1 🗌 881	4 2 4972	3	16	29,816.
Credits	17	Amount from Schedule 2, line	e3				17	
	18	Add lines 16 and 17					18	29,816.
	19	Child tax credit or credit for c	other dependent	ts from Sched	ule 8812		19	
	20	Amount from Schedule 3, line	e 8				20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18.	If zero or less,	enter -0			22	29,816.
	23	Other taxes, including self-er	nployment tax,	from Schedule	e 2, line 21 .		23	0.
	24	Add lines 22 and 23. This is y	our total tax				24	29,816.
Payments	25	Federal income tax withheld						
	а	Form(s) W-2				25a 36	,831.	
	b	Form(s) 1099				25b		
	с	Other forms (see instructions)			25c		
	d	Add lines 25a through 25c .					250	1 36,831.
If you have a	26	2023 estimated tax payments					26	
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, line	e 15			31		
	32	Add lines 27, 28, 29, and 31.				_	32	
	33	Add lines 25d, 26, and 32. Th	-					
Refund	34	If line 33 is more than line 24					34	
neruna	35a	Amount of line 34 you want r						
Direct deposit?	b	Routing number 0 6 2					Savings	,
See instructions.	d	Account number 1 0 8					arnige	
	36	Amount of line 34 you want a			ad tax	36		
Amount	37	Subtract line 33 from line 24.						
You Owe	37	For details on how to pay, go					37	
	38	Estimated tax penalty (see in	-	-		38		
Third Party		you want to allow another						
Designee		structions	•				mplete below	. 🗙 No
Deelghee	De	signee's		Phone			nal identification	
	nai	ne		no.		numb	er (PIN)	
Sign		der penalties of perjury, I declare th						
Here	bei	ief, they are true, correct, and comp	blete. Declaration of	of preparer (othe	r than taxpayer) is b	ased on all informatio	1	
	Yo	ur signature		Date	Your occupation			ent you an Identity PIN, enter it here
Joint return?					SOFTWARE 1	FNCINFFR	(see inst.)	Fin, enter it here
See instructions.	Sp	ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occupat		If the IRS s	ent your spouse an
Keep a copy for	op		our maor orgin.	Duto				ptection PIN, enter it here
your records.							(see inst.)	
	Ph	one no. (601) 307-2931	-	Email address	ABHISHEKYADAV	.AKKEM@GMAIL.CO	М	
Paid	Pre	parer's name	Preparer's signat	ure		Date	PTIN	Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/21/2024	P02082703	Self-employed
Preparer	Fir	m's name GLOBAL TAX	ES LLC				Phone no.	(678)965-9522
Use Only	Fir	m's address 245 ROONEY	CT E BRU	NSWICK N	J 08816		Firm's EIN	84-3171965
Go to www.irs.go	ov/Form	1040 for instructions and the lates	t information.		BAA	REV 02/11/24 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.

OMB No. 1545-0074 202 23

Department of the Treasury Internal Revenue Service		Attachment Sequence No. 01	
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
ABHISHEK YADAV	AKKEM	033-75	-3372

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. Attach Scl	5	-18,613.
6	Farm income or (loss). Attach Schedule F.	6	
7	Unemployment compensation	7	
8	Other income:	 _	
a	Net operating loss		
b	Gambling	 -	
C	Cancellation of debt		
d	Foreign earned income exclusion from Form 2555		
e	Income from Form 8853		
f	Income from Form 8889		
g	Alaska Permanent Fund dividends		
ĥ	Jury duty pay		
i	Prizes and awards		
i	Activity not engaged in for profit income		
k	Stock options		
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)		
n	Section 951(a) inclusion (see instructions)		
0	Section 951A(a) inclusion (see instructions)		
р	Section 461(I) excess business loss adjustment		
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		
t	Pension or annuity from a nonqualifed deferred compensation plan or		
	a nongovernmental section 457 plan		
u	Wages earned while incarcerated		
z	Other income. List type and amount:		
	8z		
9	Total other income. Add lines 8a through 8z	 9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter here a		
	1040, 1040-SR, or 1040-NR, line 8	 10	-18,613.
For Pa	perwork Reduction Act Notice, see your tax return instructions.	Schedul	e 1 (Form 1040) 2023

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis govern	ment		
	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		-	
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			
;	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 ar	nd on		
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV 02/11/24 PRO		· · · · ·	I (Form 1040) 2023

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

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

OMB No. 1545-0074	
2023	

	nent of the Treasury Attach to Form 1040, 1040-SR, 1040-SR, 0040-SR, 01041. Revenue Service Go to www.irs.gov/ScheduleE for instructions and the latest information.						Attachm Sequend	ent ce No. 13			
Name(s	e(s) shown on return Your soc					al security i	number				
ABHISHEK YADAV AKKEM							033-75-3372				
	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										
В	If "Yes," did you or will you file required Form(s) 1099?										
1a	1a Physical address of each property (street, city, state, ZIP code)										
Α	BHAVANI COLONY HYDERABAD TELANGANA IN 500030										
В											
С					-						
1b	(from list below) above, report the number of fair	elow) above, report the number of fair rental and			Fair Rental Days		Personal Use Days		QJV		
Α	3 personal use days. Check the Quift for the requirements to f			Α		350		0			
В	qualified joint venture. See instru			В							
C				С							
Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)											
						Propert	ies:				
Income:					В	C		C			
3		3		9	70.						
	Royalties received	4									
Expe		-									
5		5									
6 7	Auto and travel (see instructions)	6									
8		8		1, Z	40.						
9		9									
10	Legal and other professional fees	10									
11	Management fees	11		1,3	65.						
12	Mortgage interest paid to banks, etc. (see instructions)	12									
13	Other interest	13									
14	Repairs	14		3,7	89.						
15	Supplies	15		3,8	86.						
16	Taxes	16									
17	Utilities	17		2,8							
18	Depreciation expense or depletion	18		6,3	96.						
19	Other (list)	19									
20	Total expenses. Add lines 5 through 19	20		19,5	83.						
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 -18,613. 21 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 18,613.) Total of all amounts reported on line 3 for all rental properties 23a b Total of all amounts reported on line 4 for all royalty properties Total of all amounts reported on line 12 for all properties С Total of all amounts reported on line 18 for all properties d Total of all amounts reported on line 20 for all properties е 24 Income. Add positive amounts shown on line 21. Do not include any losses

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 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

18,613. 25 -18,613. . 26 -18,613.

970.

6,396.

24

19,583.

23a

23b

23c

23d

23e

. .