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

Submi	ssion Identification Number (SID)						
Taxpaye	er's name	Social securi	ty numl	ber			
SWAI	PNIKA KALLALA	850-17	-283	7			
Spouse'	s name	Spouse's social security number					
Dort	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	Woor Woll o	ro ou	thorizina '	<u> </u>		
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enterwhole dollars only on lines 1 through 5.	year you a	re au	unonzing.)		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1	68	,208.		
2	Total tax		2		,270.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,818.		
4	Amount you want refunded to you		4		,548.		
5	Amount you owe		5		, 540.		
Part		кеер а сор	y of y	our retu	rn)		
my know return (to send for any Agent t payment authorize payment business taxes t persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) by	re are the am- itter, or electro- action of the transport of the transport of the transport of the transport of the authorization of the transport of the trans	ounts from the country attion. The receipt the elaboration at the elab	from the inc turn original ssion, (b) th designated paration sof to this acco To revoke (dived no late lectronic pa	come tax tor (ERO) e reason Financial tware for unt. This cancel) a er than 2 yment of that the		
	yer's PIN: check one box only						
X		my DINI 7	2 8	8 3 7	as my		
	ERO firm name	ř En		digits, but er all zeros	as my		
_	signature on the income tax return (original or amended) I am now authorizing.		01				
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methology.						
Your s	ignature ► Date ►	04/1	.3,	/202	24_		
Spous	se's PIN: check one box only						
	I authorize to enter or generate	mv PIN			as my		
	ERO firm name	En		digits, but	a.cy		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methology.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part	Certification and Authentication — Practitioner PIN Method Only						
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 4 9 Don't ent	6 0 er all ze	8 2 7 eros	1		
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	ıx return (origi itting this retu	nal or urn in a	amended) I accordance			
ERO's	signature ► Date ►						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To D	Oo So					

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



1040		artment of the Treasury—Internal Revenue Servi		urn	20 2	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	oarate i	instructions.
Your first name	e and m	iddle initial	Last na	me							Your so	cial sec	curity number
SWAPNIK	Д		KALL	ALA							850	17	2837
		s first name and middle initial	Last na										security number
											874	94	5272
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				A	Apt. no.			_	ection Campaign
344 MAP	LE A	VENUE									Check h	nere if y	ou, or your
City, town, or p	oost offi	ice. If you have a foreign address, also co	mplete s	paces belo	W.	Sta	te	ZIP c	ode			0	jointly, want \$3
DOWNERS	GRO'	VE				II		605	15		•		nd. Checking a not change
Foreign countr	y name		F	Foreign pro	ovince/state/	count	ty	Foreig	ın postal c		your tax	or refu	ınd.
							_					Yc	ou U Spouse
Filing Status	s⊢	Single					☐ Head of h	ouseh	old (HOI	⊣)			
Check only		Married filing jointly (even if only o	ne had ı	ncome)			Па и				200)		
one box.		Married filing separately (MFS)			16		☐ Qualifying		• .	,	,	1-11-	26 Hz
		you checked the MFS box, enter the ualifying person is a child but not you						or Q	55 box,	enter	tne cni	ia's na	me if the
		daniying person is a crillo but not you	ır depen	ident. Pr	KASHANTH K	FUUI	NAIINI						
Digital		ny time during 2023, did you: (a) rec						-					
Assets		nange, or otherwise dispose of a dig						et)? (Se	e instru	ctions	S.)	Y€	es 🗵 No
Standard Deduction		neone can claim: You as a de	•				a dependent						
Deduction	Ш.	Spouse itemizes on a separate retur	n or you	i were a d	iuai-status	allen							
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blir	nd Spo	ouse	: Was bor						s blind
Dependent	s (see instructions):				(2) Social security (3) Relationship		nip (4	-				(see instructions):	
If more	(1) F	First name Last name		number to you		Child tax		ax cre	edit	Credit to	or other dependents		
than four dependents,										<u> </u>			
see instruction	s									<u> </u>			
and check	, —								<u> </u>				
here L	 1а	Total amount from Form(s) W-2, b	ov 1 (co	o inetruet	ions)						1a		75 , 670.
Income	b		,		,						1b		75,070.
Attach Form(s)	C								1c				
W-2 here. Also attach Forms	d		•		•						1d		
W-2G and	e		Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1e			
1099-R if tax was withheld.	f	Employer-provided adoption bene									1f		
If you did not	g	Wages from Form 8919, line 6.									1g		
get a Form	h	Other earned income (see instruct	ions)								1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,				1i						-
	z	Add lines 1a through 1h						. .			1z		75 , 670.
Attach Sch. B	2a	1	2a			b Ta	axable interes	t.			2b		
if required.	За	· –	3a			b 0	rdinary divide	nds .			3b		
	4a	IRA distributions	4a				axable amoun				4b		
Standard Deduction for—	5a	Pensions and annuities	5a				axable amoun				5b		
Single or	6a	Social security benefits	6a			b Ta	axable amoun	t			6b		
Married filing separately,	С	If you elect to use the lump-sum e	u elect to use the lump-sum election method, check here (see instructions)						. \square				
\$13,850	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								7			
Married filing jointly or	8	Additional income from Schedule	1, line 10	0							8		-7,462.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is yo	our total inc	ome	e				9		68,208.
\$27,700 Head of	10	Adjustments to income from Sche	dule 1, l	ine 26							10		
household,	11	Subtract line 10 from line 9. This is	s your a c	djusted g	ross incor	ne					11		68,208.
\$20,800 If you checked	12	Standard deduction or itemized	deducti	ions (fron	n Schedule	A)					12		13,850.
any box under Standard	13	Qualified business income deduct	ion from	Form 89	95 or Form	899	5-A				13		
Deduction,	14										14		13,850.
see instructions.	15	Subtract line 1/1 from line 11 If zer	n or les	c ontor (Thic ic v	Our t	tavabla incom	•			15	- 1	5/1 358

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	7,270.	
Credits	17	Amount from Schedule 2, line	3					17		
	18	Add lines 16 and 17						18	7,270.	
	19	Child tax credit or credit for o	ther dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, line	8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	7,270.	
	23	Other taxes, including self-em	nployment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is ye	our total tax					24	7,270.	
Payments	25	Federal income tax withheld f	rom:							
	а	Form(s) W-2				25a 10	,818.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c .						25d	10,818.	
If you have a	26	2023 estimated tax payments	and amount a	pplied from 20	22 return			26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC) .				27				
allach Sch. ElC.	28	Additional child tax credit from	Schedule 8812			28				
	29	American opportunity credit for	rom Form 8863	, line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line	15			31				
	32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits									
	33	Add lines 25d, 26, and 32. The	ese are your to	tal payments				33	10,818.	
Refund	34	If line 33 is more than line 24,	subtract line 24	4 from line 33.	This is the amour	nt you overpaid		34	3,548.	
	35a	Amount of line 34 you want re			is attached, chec	k here		35a	3,548.	
Direct deposit?	b	Routing number 0 8 1				Checking	Savings			
See instructions.	d	Account number 1 9 9	3 7 6 2	7 0 8 9	9 8					
	36	Amount of line 34 you want a	oplied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions					37			
	38	Estimated tax penalty (see ins	_	-		38				
Third Party Designee	Do	you want to allow another particular in the structions	person to disc	cuss this retu	n with the IRS?	See	omplete l	pelow.	⊠ No	
gc	De	esignee's		Phone		Pers	onal identi	fication		
		name no. number (PIN)								
Sign Here		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which								
11010	Yo								nt you an Identity	
	DUOT					TELLICENCE D	, -	ection P inst.)	IN, enter it here	
Joint return? See instructions.	Sn	ouse's signature. If a joint return, b o	ath must sign	Date	BUSINESS INTELLIGENCE DEV Date Spouse's occupation				nt vour enquee an	
Keep a copy for your records.	opodoo o dignataro. Il a joint rotarri, botti madi digni. Il bato Il opodoo o docapation				OH	If the IRS sent your spouse an Identity Protection PIN, enter it I (see inst.)				
	Ph	Phone no. (404) 980-4030 Email address SWAPNIKAREDDY.SQL@GMAIL.COM								
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAC	GAR GUPTA	04/14/2024	P0208	2703	Self-employed	
Use Only							Phor	hone no. (678) 965-9522		
————	Fir	m's address 245 ROONEY	CT E BRU	NSWICK N	J 08816		Firm	's EIN	84-3171965	
o	/-	10101							= 1040 ()	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment

Department of the Treasury Internal Revenue Service

SWAPNIKA KALLALA

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.

Attachment Sequence No. 01 Your social security number

850-17-2837

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att		5	-7,462.
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		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente 1040, 1040-SR, or 1040-NR, line 8		10	-7,462.

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis governr	nent		
	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		9a	
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			
_	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 here and			
	Form 1040, 1040-SR, or 1040-NR, line 10	:	26	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

2023
Attachment
Sequence No. 13

OMB No. 1545-0074

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. 1

Your social security number

SWAI	PNIKA KALLALA						850-	-17-2837		
Par	Income or Loss From Rental Real Estate a Note: If you are in the business of renting personal proper			• C Soo	inetro	ctions If you	ara an ir	ndividual roo	ort farm	
	rental income or loss from Form 4835 on page 2, line 40	erry, use I.	- Scriedul	. 0. 566	เมรเเน	cuons. II you a	are an if	iuiviuuai, rep	ort iaiiii	
Α	Did you make any payments in 2023 that would require you	u to file	Form(s)	1099? S	ee in	structions .		<u> </u>	es 🛛 No	
В	f "Yes," did you or will you file required Form(s) 1099?							🗌 Ye	es 🗌 No	
1a	Physical address of each property (street, city, state, Z	IP cod	e)							
A	C-845, MIG 2ND LANE NGOS COLONY, HYDER	RABAD	TELANO	GANA :	IN 5	00070				
B	o olo, me and ame need octom, mean			0111111		00070				
C										
1b	Type of Property 2 For each rental real estate prop	ertv lis	ted		Fa	ir Rental	Pers	onal Use	0.07	
	(from list below) above, report the number of fair	r rental	and	nd Days				Days	QJV	
Α	gersonal use days. Check the C			Α		365				
В	if you meet the requirements to qualified joint venture. See instr			В						
С	qualified joint venture. See insti	uctions	5.	С						
Туре	of Property:									
1	Single Family Residence 3 Vacation/Short-Term Re	ntal	5 Land	b	-	Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)			
						Properti				
Incon	ne:			Α		В			С	
3	Rents received	3			50.					
4	Royalties received	4								
Expe										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		7	50.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,2	50.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14		1,5						
15	Supplies	15		1,9	85.					
16	Taxes	16								
17	Utilities	17		2,4	65.					
18	Depreciation expense or depletion	18								
19	Other (list)	19		0 0	1.0					
20	Total expenses. Add lines 5 through 19	20		8,0	⊥∠.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must									
	file Form 6198	21		-7,4	62.					
22	Deductible rental real estate loss after limitation, if any,	_		., -						
	on Form 8582 (see instructions)	22	(7,46	i2.)	()()	
23a	Total of all amounts reported on line 3 for all rental prop			., .	23a	1	550			
b	Total of all amounts reported on line 4 for all royalty pro				23b					
С	Total of all amounts reported on line 12 for all properties	•			23c					
d	Total of all amounts reported on line 18 for all properties				23d					
е	Total of all amounts reported on line 20 for all properties				23e	8	,012			
24	Income. Add positive amounts shown on line 21. Do no						. 2	4		
25	Losses. Add royalty losses from line 21 and rental real esta	ate loss	es from lir	ne 22. Er	nter to	tal losses her	e 2	5 (7,462.)	
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do n						on			
	Schedule 1 (Form 1040), line 5. Otherwise, include this a	amoun	t in the to	tal on li	ne 41	on page 2	. 2	6	-7,462.	