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

	515.135 55.135							
Submis	ssion Identification Number (SID)							
Taxpayer	's name	Social securi	ty numl	per				
SAI ROOP CHAND PANGANAMAMULA 693-98-0910								
Spouse's		Spouse's soo			r			
Dort	Tay Daturn Information Tay Voor Ending December 21 2022 (Enter	VOOR VOUL	ro 011	thorizina	\			
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter hole 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.							
	Adjusted gross income		1	82	2,002.			
	Total tax		2		,306.			
_	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,937.			
	Amount you want refunded to you		4		,631.			
	Amount you owe		5		,,031.			
Part	•	еер а сор	y of y	our retu	ırn)			
my knowreturn (ct to send for any characteristics) Agent to paymen authorize paymen business taxes to personal Electron Taxpay	enalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmirmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejecteday in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutio ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate t, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requise days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I and ic Funds Withdrawal Consent. **Yer's PIN: check one box only**	e are the ameter, or electrication of the tast. Treasury a ten to debit the the authorizests must be processing of ayment. I furn now author	ounts for it is considered to the construction of the construction. The construction of the construction o	from the in turn original ssion, (b) the designated paration so to this accor To revoke of ved no late ectronic paraking when	come tax ator (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the cable, my			
X	I authorize GLOBAL TAXES LLC to enter or generate r	nv PIN 🗀			as my			
	signature on the income tax return (original or amended) I am now authorizing.			digits, but er all zeros				
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN method below.							
Your si	gnature ► Date ►							
Spous	e's PIN: check one box only							
	I authorize to enter or generate r	nv PIN			as my			
	ERO firm name		ter five	digits, but	ao my			
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros				
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN method below.							
Spouse	e's signature ▶ Date ▶							
	Practitioner PIN Method Returns Only—continue below							
Part I	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	7 1			
		Don't ent	er all Ze	5105				
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income tall ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit nents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this reti	ırn in a	accordance				
ERO's	signature ▶ Date ▶							
	ERO Must Retain This Form — See Instructions							
	Don't Submit This Form to the IRS Unless Requested To D	o So						

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



£1040		artment of the Treasury-Internal Revenue Servi		ırn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.	
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	oarate	instructions.	
Your first name	and m	niddle initial	Last nar	ne							Your so	cial sec	curity number	_
SAI ROO	P CH	AND	PANG	ANAMA	MULA						693	98	0910	
If joint return, s	pouse'	s first name and middle initial	Last nar										security numb	e
Home address	(numb	er and street). If you have a P.O. box, see	instructio	ons.					Apt. no.		Preside	ntial Ele	ection Campai	
		RTHUR BLVD								- 1			ou, or your	J -
		ice. If you have a foreign address, also co	mplete sp	aces bel	ow.	Sta	te	ZIP c	ode		•	_	jointly, want \$	
IRVING						TX	2	750	62		•		nd. Checking a not change	а
Foreign countr	y name		F	oreign pr	ovince/state/	count	у	Foreig	ın postal c	ode	your tax		ınd.	se
Filing Status	s 🗵	Single					Head of h	ouseh	old (HOH	1)				
Check only	L	Married filing jointly (even if only or	ne had ir	ncome)										
one box.	L	Married filing separately (MFS)					☐ Qualifying		0 1	,	,			
		you checked the MFS box, enter the			oouse. If you	ı che	ecked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	
	qι	ualifying person is a child but not you	ur depen	dent:										
Digital		ny time during 2023, did you: (a) rec												
Assets	excl	nange, or otherwise dispose of a dig	ital asset	t (or a fir	nancial inter	est ir	n a digital asse	et)? (Se	ee instru	ction	s.)	☐ Ye	es 🗵 No	
Standard		neone can claim: You as a de	pendent		Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-status	alien								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bli	ind Spc	ouse	: Was bo	rn befo	ore Janua	ary 2	, 1959		s blind	
Dependent	s (see	instructions):		(2) S	ocial security	,	(3) Relationsh	nip (4) Check t	he bo	x if quali	fies for ((see instruction	 s):
If more		(1) First name Last name			number to you				Child t	ax cre	edit	Credit fo	or other depende	nts
than four									[
dependents, see instruction	e —													
and check	. —													
here L														
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		94,224	<u>. </u>
Attach Form(s)	b	Household employee wages not re									1b			_
W-2 here. Also	C	Tip income not reported on line 1a			•						1c			_
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d				
1099-R if tax	e	Taxable dependent care benefits f									1e			_
was withheld.	f	Employer-provided adoption bene	etits trom	Form 8	839, line 29						1f	_		_
If you did not get a Form	g	Wages from Form 8919, line 6 .									1g		0	_
W-2, see	h :	Other earned income (see instruct	,				· · · · .	i.			1h			<u>.</u>
instructions.	i	Nontaxable combat pay election (s	see instri	uctions)			<u>1</u> i				4-		94,224	
Attack Cal- D	z 2a	Add lines 1a through 1h Tax-exempt interest	2a		· · · j	ЬТ	 axable interes	 +			1z 2b		71,441	-
Attach Sch. B if required.	3a		3a				rdinary divide							_
	4a		4a				axable amoun							_
Standard	5a		5a				axable amoun							_
Deduction for— Single or	6a		6a				axable amoun				6b			_
Married filing	C	If you elect to use the lump-sum election method, check here (see instructions)										_		
separately, \$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		•							8		-12,222	-
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	-								9		82,002	
\$27,700	10	Adjustments to income from Sche		•							10			
 Head of household, 	11	Subtract line 10 from line 9. This is your adjusted gross income								11	_	82,002		
\$20,800	12	Standard deduction or itemized	•	-	_						12		13,850	
If you checked any box under	13	Qualified business income deduct		•		-	5-A				13			
Standard Deduction,	14	Add lines 12 and 13									14		13,850	
see instructions.	15	Subtract line 1/1 from line 11. If zer	ro or loce	ontor -	O Thio io v	our t	avabla incom				15		68 152	

Form 1040 (2023	3)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	10,306.	
Credits	17	Amount from Schedule 2, lir	ne 3					17		
	18	Add lines 16 and 17						18	10,306.	
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lir	ne 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	10,306.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.	
	24	Add lines 22 and 23. This is	your total tax					24	10,306.	
Payments	25	Federal income tax withheld								
_	а	Form(s) W-2				25a 13	3,937.			
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	13,937.	
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20)22 return			26		
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	!		28				
	29	American opportunity credit	from Form 8863	8, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir	ne 15			31				
	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 to	tal payments				33	13,937.	
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	3,631.	
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	3 is attached, che	ck here	🗆	35a	3,631.	
Direct deposit?	b	Routing number 2 6 7			c Type:	Checking	Savings			
See instructions.	d	Account number 6 2 5	6 3 7 3	5 7						
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe	•					
You Owe		For details on how to pay, g	o to www.irs.gov	//Payments or	see instructions			37		
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party		you want to allow another	person to disc	cuss this retu	rn with the IRS?	_			_	
Designee	ins	structions	omplete		⊠ No					
		signee's me		Phone no.		sonal identi iber (PIN)	l identification (PINI)			
Cian		der penalties of perjury, I declare t	hat I have examined		accompanying sche			the best	of my knowledge and	
Sign		lief, they are true, correct, and com								
Here	Yo	ur signature	Date	Your occupation	If the	If the IRS sent you an Identity				
		J					Protection PIN, enter it here			
Joint return?					SOFTWARE ENGINEER			(see inst.)		
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.			Date	Spouse's occupat	nt your spouse an ection PIN, enter it here				
	——Ph	one no. (217)685-886		Email address	CVIBUUDG⊓VV		•			
		Phone no. (217)685-8866 Email address SAIROOPCHAND25@GMAIL.COM Preparer's name Preparer's signature Date PTIN							Check if:	
Paid		M PRIYA RAM SAGAR GUPTA TALLAM	'		GUPTA TALLAM		P0208	2703	Self-employed	
Preparer		Firm's name GLOBAL TAXES LLC							(678)965-9522	
Use Only				NSWICK M	J 08816		Firm's EIN 84-3171965			
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816						FIIII	I S LIIN	04-21/1302	

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

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

SAI ROOP CHAND PANGANAMAMULA

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 693-98-0910

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. Atta	ch Schedule E .	5	-12,222.
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		
ı	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 p8		
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 . Enter 1040 1040-SR or 1040-NR line 8	here and on Form	10	-12 222

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-				
	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	,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b		_	
С	Nontaxable amount of the value of Olympic and Paralympic medals	_			
	· · · · · · · · · · · · · · · · · · ·	24c			
d		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				
	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	24i			
j	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
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 Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	here and on	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,

Attachment

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.

Sequence No. 13

OMB No. 1545-0074

SAI ROOP CHAND PANGANAMAMULA 693-98-0910 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 . 1a Physical address of each property (street, city, state, ZIP code) RANGAVALLI APTS HYDERABAD IN TELANGANA Α В C 1b Type of Property **Fair Rental Personal Use** 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 Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 620. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,654. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 1,869. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 3,314. 14 Repairs 15 Supplies 15 3,587. 16 16 Taxes 17 Utilities 17 2,418. 18 18 Depreciation expense or depletion 19 19 Other (list) 20 20 12,842. Total expenses. Add lines 5 through 19 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 -12,222. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 12,222.) 620. 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 Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 12,842. Total of all amounts reported on line 20 for all properties 23e 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 12,222. 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 -12,222. 26