# 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	ission Identification Number (SID)					
Taxpaye	er's name	Social secur	ity num	ber		
SAI	ROOP CHAND PANGANAMAMULA	693-98	693-98-0910			
Spouse'	's name	Spouse's so	s social security number			
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	vear vou a	are au	thorizina	.)	
	whole dollars only on lines 1 through 5.	year year	0 0.0.		-,	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	82	,002.	
2	Total tax		2	10	,306.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	13	,937.	
4	Amount you want refunded to you		4		,631.	
_ 5	Amount you owe		5			
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and I	ceep a cop	y of y	our retu	ırn)	
return ( to send for any Agent t paymen authori paymen busines taxes t person	owledge 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, transmed my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected 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 indicated in the financial institution account indicated taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the Indicated the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the payment (settlement) below is my signature for the income tax return (original or amended) I and the financial institution or amended) I and the financial institution or amended) I are a financial institution or amended) I are the financial institution or amended) I are funded Withdrawal Consent.	itter, or electroction of the section of the sectio	onic recrease ransminated and its cax preparation. The receipt the electrons of the electrons of the acceptance of the acceptance receipt the acceptance receipt the acceptance recrease recreas	turn origina ssion, (b) the designated paration so to this acco To revoke ( ved no late lectronic para knowledge	ator (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the	
	nic Funds Withdrawal Consent.					
· -	yer's PIN: check one box only	8	0	9   1   0		
×	I authorize GLOBAL TAXES LLC to enter or generate  ERO firm name	. Ei		digits, but	as my	
	signature on the income tax return (original or amended) I am now authorizing.	do	on't ente	er all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.					
Your s	ignature ► Date ►					
Cnauc	·					
Spous	se's PIN: check one box only	DIN				
	I authorize to enter or generate ERO firm name	,	ter five	digits, but	as 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 n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.					
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part	III Certification and Authentication — Practitioner PIN Method Only					
ERO's	<b>S EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't en	6 0 ter all z	8 2 7 eros	1	
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Ir	itting this ret	urn 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 I	o So				

# E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space

For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		·,	20		See se	parate ins	structions.	
Your first name and middle initial			Last name					١,	Your social security number				
SAI ROOE	CHA	AND	PANG	SANAMAMULA						693	98   0	3910	
If joint return, spouse's first name and middle initial			Last na	ame					;	Spouse'	s social se	ecurity number	
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Ap	t. no.	1	Preside	ntial Elect	tion Campaign	
2326 N N	IACAI	RTHUR BLVD					21	.28		Check here if you, or your			
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Stat	te	ZIP cod				spouse if filing jointly, want \$3 to go to this fund. Checking a		
IRVING				TX			7506	75062 b			ow will no	0	
Foreign country	name			Foreign province/state/county Foreign posta			Foreign	postal c	ode	your tax	c or refund		
									☐ You ☐ S				
Filing Status	; X	Single				☐ Head of ho	ousehol	d (HOF	H)				
Check only		Married filing jointly (even if only or	ne had	income)									
one box.		Married filing separately (MFS)				☐ Qualifying	survivir	ıg spoı	use (C	QSS)			
	If y	ou checked the MFS box, enter the	name o	of your spouse. If you	u che	cked the HOH	or QSS	S box,	enter	the chi	ild's nam	e if the	
	qu	alifying person is a child but not you	ır deper	ndent:									
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	navn	nent for prope	rtv or se	ervices	): or (l	a) sell.			
Assets		lange, or otherwise dispose of a digi									☐ Yes	⊠ No	
Standard	Som	eone can claim: You as a de	penden	t Your spouse	e as	a dependent							
Deduction		Spouse itemizes on a separate return		•		·							
A (DU. d								. 1		1050		. P d	
		Were born before January 2, 1	959 [	T -	ouse:		(4)					olind	
Dependents				(2) Social security number	′	(3) Relationsh	ip (4)	neck נו Child t			, ,	e instructions): other dependents	
If more	(1) F	irst name Last name		number		to you		oniiu t		uit	Credit for 0	The dependents	
than four dependents,									_			<u> </u>	
see instructions	s —								+			<del> </del>	
and check here								[	_			+	
-	1a	Total amount from Form(s) W-2, bo	ov 1 (cc	oo instructions)				L		1a		94,224.	
Income	b	• • • • • • • • • • • • • • • • • • • •	•	•						1b		74,224.	
Attach Form(s)	C	Household employee wages not reported on Form(s) W-2											
W-2 here. Also attach Forms	d	Tip income not reported on line 1a (see instructions)								1c			
W-2G and	e									1e			
1099-R if tax was withheld.	f									1f			
If you did not	g g	Wages from Form 8919, line 6.								1g			
get a Form	h	Other earned income (see instructi								1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	,			1 1i	Ì						
	z	Add lines to through th					<del></del> .			1z		94,224.	
Attach Sch. B	2a	1	2a		b Ta	axable interest	t.			2b			
if required.	3a	Qualified dividends	3a		<b>b</b> 0	rdinary divider	nds .			3b	,		
	4a	IRA distributions	4a			axable amount				4b	,		
Standard Deduction for—	5a	Pensions and annuities	5a		<b>b</b> Ta	axable amount	t			5b	,		
Single or	6a	Social security benefits	6a		<b>b</b> Ta	axable amount	t			6b	,		
Married filing separately,	С												
\$13,850	7	Capital gain or (loss). Attach Sched	dule D i	f required. If not requ	uired,	check here			. $\square$	7			
Married filing jointly or	8	Additional income from Schedule	1, line 1	0						8	_	12,222.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	come					9		82,002.	
\$27,700	10	Adjustments to income from Scheen	dule 1,	line 26						10			
Head of household,	<u>11</u>	Subtract line 10 from line 9. This is	your <b>a</b>	djusted gross incon	ne					11		82,002.	
\$20,800 If you checked r	12	Standard deduction or itemized	deduct	tions (from Schedule	A)					12	:	13,850.	
any box under Standard	13	Qualified business income deducti	on fron	n Form 8995 or Form	899	5-A				13	;		
Deduction,	14	Add lines 12 and 13								14	,	13,850.	
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our <b>t</b>	axable incom	ie .			15	,	68,152.	

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 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 <b>total tax</b>					24	10,306.
<b>Payments</b>	25	Federal income tax withheld							
_	а	Form(s) W-2				<b>25a</b> 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	32						
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	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 <b>overpaid</b>		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			<b>c</b> 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 <b>amo</b>	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			
<b>Third Party</b>		you want to allow another	person to disc	cuss this retu	rn with the IRS?	_			_
Designee	ins	structions				<del></del>	•		<b>⊠</b> No
		signee's me	Phone no.			sonal identi iber (PIN)	ification		
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	Your signature Date Your occupation						e IRS se	nt you an Identity
		J		·			Protection PIN, enter it here		
Joint return?				SOFTWARE 1		(see	(see inst.)		
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupation			If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Phone no. (217)685-8866 Email address SAIROOPCHAND25@GMAIL.COM							•	
		eparer's name	Preparer's signat		DATROUPCHAN	Date	PTIN		Check if:
Paid		M PRIYA RAM SAGAR GUPTA TALLAM	'		CIIDTA TAI.I.AM		P0208	2703	Self-employed
Preparer	SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/14/2024 PO Firm's name GLOBAL TAXES LLC								(678)965-9522
Use Only			J 08816		ı's EIN				
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816							I S LIIN	84-3171965

# 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 <b>additional income</b> . 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 <b>adjustments to income</b> 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