## 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 sec	urity num	ber		
SAI	TEJA MITTAPALLY 055-47-8200					
Spouse'	's name	Spouse's	social sec	urity numb	er	
Dort	Tay Patura Information Tay Voor Ending December 21 2002 (Enter	VOOR VOI	ı oro oı	thorizing	<u>, \</u>	
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enterwhole dollars only on lines 1 through 5.	year you	are au	ιιτιοτιΖιτις	J·)	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		.   1	4	7,356.	
2	Total tax				3,803.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		7,044.	
4	Amount you want refunded to you		4		3,241.	
5	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and I penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)					
return ( to send for any Agent t paymer authori paymer 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 an acknowledgement of receipt or reason for rejected an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated into financial 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 terminated the transport of the payment (settlement) date. I also authorize the financial institutions involved in the correceive confidential information necessary to answer inquiries and resolve issues related to the pal identification number (PIN) below is my signature for the income tax return (original or amended) I are income to the model of the paint funds withdrawal Connect.	tter, or election of the S. Treasurp cated in the new to debit the authorst must processing ayment. I	ctronic re e transm y and its e tax pre the entry rization. be rece y of the e further a	eturn origin ission, (b) designated paration so to this acc To revoke ived no la electronic p cknowledg	ator (ERO) the reason d Financial oftware for count. This (cancel) a ter than 2 payment of ge that the	
	nic Funds Withdrawal Consent.  yer's PIN: check one box only	Г			1	
X		my PINI	7 8	2 0 0	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	•		e digits, but er all zeros	as my	
	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 and pur return is filed using the Practitioner PIN meth below.	od. The E	RO mus	st comple		
Your s	signature ► Date ► _	02/	02/20	024		
Spous	se's PIN: check one box only	-			,	
	I authorize to enter or generate	nv PIN			as my	
	ERO firm name			digits, but	] ===,	
	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	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part	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	6 0 enter all z		7 1	
		טוו ני	onici dii Z			
authori	y 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 r	eturn in	accordanc		
ERO's	s signature ► Date ►					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To D	o So				

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



For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20		See se	parate ins	tructions.	
Your first name and middle initial			Last name				Your social security number					
SAI TEJA			MITTAPALLY						055   47   8200			
If joint return, s	pouse's	s first name and middle initial	Last na								curity number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.			Apt. no.		Preside	ntial Electi	ion Campaign	
231 PAL	ACIO	ST								here if you,		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	te	ZIP code		•	spouse if filing jointly, want \$3 to go to this fund. Checking a		
IRVING				TX			75039				ox below will not change	
Foreign country	y name			Foreign province/state/county Fore			Foreign postal	oreign postal code yo		your tax or refund.		
										You	Spouse	
Filing Status	; X	Single				☐ Head of he	ousehold (HC	)H)				
Check only		Married filing jointly (even if only or	ne had	income)								
one box.		Married filing separately (MFS)				☐ Qualifying	surviving spe	ouse (	QSS)			
		ou checked the MFS box, enter the			ı che	ecked the HOH	or QSS box	, ente	r the ch	ild's name	if the	
	qu	alifying person is a child but not you	r depe	ndent:								
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	navn	nent for prope	rty or service	s): or	(b) sell.			
Assets		nange, or otherwise dispose of a digi					-			☐ Yes	⊠ No	
Standard	Som	eone can claim: You as a de	penden	nt	e as	a dependent						
Deduction		Spouse itemizes on a separate return		•		•						
A ma /Dlindman							n bafara lan		1050		lind	
		: Were born before January 2, 19	959 [		ouse:		n before Jan		-	∐ Is b		
Dependent		instructions): irst name Last name		(2) Social security number	'	(3) Relationsh to you	ip   · ·	tax cr	-	1	e instructions): ther dependents	
If more	(1) [	irst ridine Last ridine		Hamber		to you	Office		Cuit	Orcali for or		
than four dependents,												
see instruction:	s —											
and check here	1 —											
-	1a	Total amount from Form(s) W-2, bo	nv 1 (se	e instructions)					1a		<u> </u>	
Income	b		,	,					1b		<del>50,500.</del>	
Attach Form(s)	C	Tip income not reported on line 1a (see instructions)						10				
W-2 here. Also attach Forms	d							10				
W-2G and	e	Taxable dependent care benefits f							16			
1099-R if tax was withheld.	f	Employer-provided adoption bene		*					1f			
If you did not	g	Wages from Form 8919, line 6.							10			
get a Form	h	Other earned income (see instructi							1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	,			l 1i						
	z	Add lines to through th							1z		56,968.	
Attach Sch. B	2a		2a		b Ta	axable interest			2b			
if required.	За	Qualified dividends	3a		<b>b</b> 0	rdinary divider	nds		3b	,		
=	4a	IRA distributions	4a			axable amouni			4b	,		
Standard Deduction for—	5a	Pensions and annuities	5a		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	If you elect to use the lump-sum el	lection	method, check here	(see	instructions)						
\$13,850	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						]				
Married filing jointly or	8	Additional income from Schedule	1, line 1	0					. 8		<b>-9,612.</b>	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	come	e			9		47 <b>,</b> 356.	
\$27,700	10	Adjustments to income from Schee	dule 1,	line 26					10	)		
Head of household,	11	Subtract line 10 from line 9. This is	your <b>a</b>	djusted gross incon	ne				. 11		47 <b>,</b> 356.	
\$20,800 If you checked 1	12	Standard deduction or itemized	deduct	tions (from Schedule	A)				12	2	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 <b>,</b> 850.	
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter -0 This is y	our <b>t</b>	axable incom	e		15	<b>;</b>   :	33,506.	

Form 1040 (2023	3)			Page <b>2</b>	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	3,803.	
Credits	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	3,803.	
	19	Child tax credit or credit for other dependents from Schedule 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	3,803.	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.	
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	3,803.	
Payments	25	Federal income tax withheld from:		· ·	
	а	Form(s) W-2			
	b	Form(s) 1099			
	С	Other forms (see instructions)	1 1		
	d	Add lines 25a through 25c	25d	7,044.	
If you have a	26	2023 estimated tax payments and amount applied from 2022 return	26	· · · · · · · · · · · · · · · · · · ·	
qualifying child,	27	Earned income credit (EIC)			
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812	1 1		
	29	American opportunity credit from Form 8863, line 8	1 1		
	30	Reserved for future use			
	31	Amount from Schedule 3, line 15	7 1		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32		
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	7,044.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	3,241.	
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	3,241.	
Direct deposit?	b	Routing number   0   8   1   2   0   2   7   5   9   <b>c</b> Type: <b>⊠</b> Checking □ Savings			
See instructions.	d	Account number 1 9 9 3 7 9 3 4 6 8 3 6			
	36	Amount of line 34 you want applied to your 2024 estimated tax 36			
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .			
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37		
	38	Estimated tax penalty (see instructions)			
<b>Third Party</b>	Do	you want to allow another person to discuss this return with the IRS? See		_	
Designee	ins	structions	oelow.	⊠ No	
	De nai	signee's Phone Personal identi me no. number (PIN)	fication		
Ciana		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to t	the hest	of my knowledge and	
Sign		lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which			
Here	Yo	ur signature Date Your occupation If the	e IRS ser	nt you an Identity	
		02/02/2024 Prot	ection Pl	N, enter it here	
Joint return?		SOFTWARE ENGINEER (See	inst.)		
See instructions. Keep a copy for your records.		Iden	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
			,		
		one no. (469) 953-8918 Email address SAITEJAMITTAPALLY@GMAIL.COM eparer's name Preparer's signature Date PTIN		Check if:	
Paid			2702	Self-employed	
Preparer		1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/03/2024 P0208			
Use Only				678) 965-9522	
Co to ununu im m		m's address 245 ROONEY CT E BRUNSWICK NJ 08816   Firm	i's EIN	84-3171965	

# SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023

Attachment

Department of the Treasury Internal Revenue Service

SAI TEJA MITTAPALLY

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 soci	ial security number
055-47	_8200

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	ach Schedule E .	5	-9,612.
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		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		
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 (	<u>)</u>	
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:			
_	<del></del>	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> . Ente	r nere and on Form	, .	0 (10
	1040, 1040-SR, or 1040-NR, line 8		10	-9 <b>,</b> 612.

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	04			
_1	• • • • • • • • • • • • • • • • • • • •	24c		_	
d		24d		-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		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				
	<b>-</b>	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:	24z			
<b>0</b> -					
<b>25</b>	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .	. ∟nter	nere and on		
	Form 1040, 1040-SR, or 1040-NR, line 10			26	

#### **SCHEDULE E** (Form 1040)

Department of the Treasury

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

Attachment

OMB No. 1545-0074

Internal Revenue Service Name(s) shown on return Sequence No. 13

Your social security number

SAI TEJA MITTAPALLY 055-47-8200 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) 19-75/1 BALAJI RESIDENCIE MIRYALGUDA NALGONDA IN 508207 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. C C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 610. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 1,936. 8 Commissions . . . . . 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . . . 11 1,420. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 1,758. 14 Repairs . . . . 1,833. 15 Supplies 15 16 16 Taxes 17 Utilities . . . . . . . 17 1,521. 18 1,754. 18 Depreciation expense or depletion . . . . . . Other (list) 19 19 20 20 10,222. 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 -9,612. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . 22 9,612. 610. 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 1,754. 23d Total of all amounts reported on line 18 for all properties 23e 10,222. Total of all amounts reported on line 20 for all properties 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 9,612. 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 . -9,612.