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)

T.....

Taxpayer's name	Social secu	Social security number			
ROHAN R NYALAPATLA	332-19	9-0973			
Spouse's name	Spouse's so	ocial security number			
Part I Tax Return Information – Tax Year Ending December 31, 2023 (E	Enter year you	are authorizing.)			
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 70,872.			
2 Total tax		2 7,853.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 12,500.			
4 Amount you want refunded to you		4 4,647.			
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 periury. 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

X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	L
				ERO firm name		

9	0	9	7	3	
Ent dor	er fiv n't er	ve di Iter a	gits, all ze	but ros	as my

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	or	generate	my	PIN

as mv 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 Me	hod Returns Only—continue below
Part III Certification and Authentication – Prac	titioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by you	r five-digit self-selected PIN. 2 2 2 4 9 6 6 1 9 8 9

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 Mu Don't Submit Th	0	
For Denemoral Deduction Act Nation and vous toy		Earm 8879 (Bay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/04/24 PRO

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta >		turn	202	3	OMB No. 1545	-0074	IRS Use (Dnly—I	Do not wi	rite or sta	aple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	5	See sep	oarate i	instructions.
Your first name	and m	iddle initial	Last r	name						····	four so	cial sec	urity number
ROHAN R			NYA	LAPATI	.Δ								0973
	oouse's	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	pt. no.	F	Presider	ntial Ele	ection Campaigr
314 UKIA	AH S	T, LEWISVILLE											ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP co	ode		•	•	jointly, want \$3 nd. Checking a
THE COLC	DNY					TΣ	X	750	56				not change
Foreign country	/ name			Foreign pi	rovince/state/	count	ty	Foreig	n postal co	de y	our tax	_	_
							_					Yo	ou Spouse
Filing Status	; 🗵	Single					Head of he	ouseho	old (HOH))			
Check only		Married filing jointly (even if only o	ne hac	l income)									
one box.	L	Married filing separately (MFS)					Qualifying						
		you checked the MFS box, enter the			pouse. If you	u che	ecked the HOF	l or QS	SS box, e	nter	the chil	d's na	me if the
	qu	alifying person is a child but not you	u debe	endent:									
Digital	At ar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d, award, or	payr	ment for prope	rty or s	services);	or (b	o) sell,		
Assets	exch	nange, or otherwise dispose of a digi	ital ass	set (or a fir	nancial inter	est ir	n a digital asse	t)? (Se	e instruc	tions	5.)	□ Ye	es 🛛 No
Standard		neone can claim: 🗌 You as a de	•				a dependent						
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	1						
Age/Blindness	S You	: Were born before January 2, 1	959	Are bl	lind Spo	ouse	: 🗌 Was bor	n befc	re Janua	ry 2,	1959	🗌 ls	s blind
Dependents	s (see	instructions):		(2) 5	Social security	,	(3) Relationsh	ip (4	Check th	e box	if qualif	ies for (see instructions):
If more	•	irst name Last name		number to you				Child ta	x crea	dit	Credit fo	r other dependents	
than four													
dependents, see instructions]			
and check	·												
here													
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	ee instruc	ctions) .					•	1a		91,104.
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 rep			, ,			• •		•	1d		
1099-R if tax	e	Taxable dependent care benefits f		,					•	1e			
was withheld. If you did not	f	Employer-provided adoption bene						• •		•	1f		
get a Form	g h	Wages from Form 8919, line 6 . Other earned income (see instruction				• •		• •		•	1g 1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,	· · · ·		• •	· · · · ·	· ·		•	In		0.
instructions.	z	Add lines 1a through 1h	500 113	siluctions		• •	11				1z		91,104.
Attach Sch. B	 2a	-	2a				axable interest			•	2b		
if required.	3a		3a				Ordinary divider				3b		
	4a		4a				axable amount				4b		
Standard Deduction for—	5a	Pensions and annuities	5a			bТ	axable amount	t			5b		
 Single or 	6a	Social security benefits	6a			bΤ	axable amount	t			6b		
Married filing separately,	с	If you elect to use the lump-sum e	lectior	n method,	check here	(see	instructions)						
\$13,850	7	Capital gain or (loss). Attach Schee	dule D	if required	d. If not requ	uired	, check here				7		
 Married filing jointly or 	8	Additional income from Schedule								•	8		-20,232.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8	8. This is y	our total inc	come	e			•	9		70,872.
\$27,700 • Head of	10	Adjustments to income from Sche								•	10		
household,	11	Subtract line 10 from line 9. This is								•	11		70,872.
\$20,800 If you checked T	12	Standard deduction or itemized								•	12		13,850.
any box under Standard	13	Qualified business income deducti	ion fro	m Form 8	995 or Form	899	95-A			•	13	_	10 0
Deduction, see instructions.	14	Add lines 12 and 13	• •	•••		•••				•	14		13,850.
	15	Subtract line 14 from line 11. If zer	ro or le	ss, enter	-U This is y	our l	taxable incom	е.		•	15		57,022.

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	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		. 16	7,853.
Credits	17	Amount from Schedule 2, lin	e3					. 17	
	18	Add lines 16 and 17						. 18	7,853.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			. 19	
	20	Amount from Schedule 3, lin	e8					. 20	
	21	Add lines 19 and 20						. 21	
	22	Subtract line 21 from line 18	If zero or less,	enter -0				. 22	7,853.
	23	Other taxes, including self-er	mployment tax,	from Schedule	e 2, line 21 .			. 23	0.
	24	Add lines 22 and 23. This is	your total tax					. 24	7,853.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a	12,5	00.	
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						. 25d	12,500.
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20	22 return			. 26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31.				undable cre	dits .	. 32	
	33	Add lines 25d, 26, and 32. The second		-	-				12,500.
Refund	34	If line 33 is more than line 24						. 34	4,647.
nerana	35a	Amount of line 34 you want				,			4,647.
Direct deposit?	b	Routing number 0 1 1			_	Checking	_	ings	
See instructions.	d	Account number 4 6 6							
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24							
You Owe	57	For details on how to pay, go						. 37	
	38	Estimated tax penalty (see in				38			
Third Party		you want to allow another							
Designee		structions	•				es. Comp	olete below.	× No
g	De	signee's		Phone				identification	
	nai	nē		no.			number (PIN)	
Sign		der penalties of perjury, I declare th							, ,
Here	Del	ief, they are true, correct, and com	plete. Declaration of	ot preparer (otne	,	ased on all into	ormation of		, .
	Yo	ur signature		Date	Your occupation				nt you an Identity
Joint return?					SOFTWARE	FNGINFFI	2	(see inst.)	IN, enter it here
See instructions.	Sp	ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occupat		<i>د</i>	If the IRS se	nt your spouse an
Keep a copy for	op			Duto	opouoo o occupu				ection PIN, enter it here
your records.								(see inst.)	
	Ph	one no. (617)639-7766	5	Email address	ROHAN.NYALAI	PATLA@GMA	LL.COM		
	Pre	eparer's name	Preparer's signat	ure		Date	PT	IN	Check if:
Paid	VENK	ATA SAI PAVAN KUMAR DUDIPALLI	VENKATA SAI	PAVAN KUM	AR DUDIPALLI		P0	2470833	Self-employed
Preparer Use Only	Fir	m's name GLOBAL TAX	KES LLC					Phone no. (678)965-9522
	Fir	m's address 245 ROONE	CT E BRU	NSWICK N	J 08816			Firm's EIN	88-2145487
Go to www.irs.go	ov/Form	n1040 for instructions and the lates	st information.		BAA	REV 03/04/24	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 20 23

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.	Attachment Sequence No. 01	
Name(s) shown on Fo	Your social security number		
ROHAN R NYALAF	332-19	-0973	
Part I Addition	onal Income		

Par	t 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	ach Schedule E .	5	-20,232.
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		
I	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:			
e.		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	-20,232.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedul	e 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	government		
	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			19a	
b	Recipient's SSN			
c	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:		20	
<u>-</u>	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the			
D	rental of personal property engaged in for profit			
-	Nontaxable amount of the value of Olympic and Paralympic medals			
С	and USOC prize money reported on line 8m.			
h			-	
d			-	
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		-	
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		-	
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			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV 03	3/04/24 PRO	Schedule 1 (F	orm 1040) 202

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

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

Department of the Treasury Internal Revenue Service

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

2023	
Attachment	

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

Namo(e) shown on return						Vour cooir		number	
	OHAN R NYALAPATLA						Your social security number 332-19-0973			
Parl		d Do	valtion				332-1	9-0973		
Fall	Note: If you are in the business of renting personal proper			e C. See	instru	ctions. If you	are an indiv	vidual, rep	ort 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 . If "Yes," did you or will you file required Form(s) 1099?									
BI								🗌 Yes 🗌 No		
1a	Physical address of each property (street, city, state, ZIF	o code	e)							
Α	SAROORNAGAR RANGAREDDY TELANGANA IN 500079									
В										
С										
1b	Type of Property 2 For each rental real estate proper	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only			Fa	ir Rental	Personal Use QJV			
					Days		Days			
<u>A</u>	3 personal use days. Check the Qu if you meet the requirements to fi			A B		365		0		
B	qualified joint venture. See instru									
<u>с</u>	- Character			C						
	of Property: Single Family Residence 3 Vacation/Short-Term Rent	hal	F Laws	-	7	Self-Rental				
		lai	5 Land				wile a)			
2	Multi-Family Residence 4 Commercial		6 Roya	anties	0	Other (desc	inbe)			
						Propert	ies:			
Incon				Α		В			С	
3	Rents received	3		5	20.					
4	Royalties received	4								
Exper										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,6	50.					
8	Commissions	8								
9		9								
10	Legal and other professional fees	10			10					
11	Management fees	11		1,2	40.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13		F 7	0.0					
14 15		14 15		<u>5,7</u> 5,5						
15 16	Supplies	15		5,5	12.					
17		17		6,5	70					
18	Depreciation expense or depletion	18		0,5	/0.					
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		20,7	52.					
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		-20,2	32.					
22	Deductible rental real estate loss after limitation, if any,									
	on Form 8582 (see instructions)	22	(20,23	32.)	()	()	
23a	Total of all amounts reported on line 3 for all rental proper				23a		520.			
b	Total of all amounts reported on line 4 for all royalty prope				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	20),752.			
24	Income. Add positive amounts shown on line 21. Do not		•		• •		. 24	1	<u> </u>	
25	Losses. Add royalty losses from line 21 and rental real estate							(20,232.)	
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do not Schedule 1 (Form 1040), line 5. Otherwise, include this ar						. 26	-	-20,232.	