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

Submission Identification Number (SID) Faxpayer's name SAT JASWANTH KUTUMBAKA To 4-32-1.105 Spouse's name Spouse's social security number Fart I Tax Return Information — Tax Year Ending December 31, 2023 (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 2 Total tax 2 8, 106. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 12, 265. 4 Amount you want refunded to you 4 4, 159. 5 Amount you want refunded to you 5 5 Fart II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, 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 in Fart I above are the amounts reginator of the processing the return or refund, and (c) the date of any refund. If applicable, I authorize the IJ. S. Treasury and its designated Financial Agent to initiate an ACH electroic funds withdrawal clience toldy entry to the financial institution in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of a stimated tax, and the financial institution to debit the entry to this account. This applicable, I authorize the U.S. Treasury 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 applicable in to remain in full force and effect until 1 nority the U.S. Treasury Financial Agant to terminate the unterviate the transical institutions involved in the processing of the electronic payment of taxes to receive confidential informa
Part I Tax Return Information — Tax Year Ending December 31, 2023 (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
Part I Tax Return Information — Tax Year Ending December 31, 2023 (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
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.) Finter 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
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 Adjusted gross income 2 Rederal income tax withheld from Form(s) W-2 and Form(s) 1099 3 12, 265. 4 Amount you want refunded to you 4 4, 159. 5 Amount you want refunded to you 5 Amount you owe 5 Amount you owe 5 Amount you owe 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 perjury, 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 bellef, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the lincome 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 Freaktorn (regiction of the tax preparations of 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 tintate an ACH electronic funds withdrawald (ident debit) entry to the financial institution account indicated in the tax preparations 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 notly the U.S. Treasury Financial Agent at 1-a88-353-4537. Payment cancellation requests must be received no later than 2 pusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income
Total tax
Part II
3 12, 265. 4 Amount you want refunded to you 5 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best off which was the time to the last and to receive from the IRS (a) an acknowledge 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 orany 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 anyment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution adocunt. 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 augment, I must contact the U.S. Treasury Financial Agent at 1-888-333-4357. 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. Check this
Amount you want refunded to you Amount you owe Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, 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, 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, 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, or electronic return originator (ERO) to send my return to 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, 1 authorize the U.S. Treasury and its designated Financial Agent to triniate an ACH electronic funds withdrawal (direct debit) entry to the financial institutions count 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 1 notify the U.S. Treasury Financial Agent at 1-888-353-4537. Payment to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment contact the funding and the financial institutions involved in the processing of the electronic payment (set funding any financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later
Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, 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 bellef, 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 eason 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 1-888-353-453f. Payment cancellation requests must be received no later than 2 pusiness days prior to the payment (settlement) date. I also authorize the financial institution in 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 Decisional 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 I will enter my PIN as my signature on the income tax return (orig
Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, 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 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 my 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 at 1-888-353-4537. Payment cancellation requests must be received no later than 2 pusimess 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. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. T
Under penalties of perjury, 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 1-888-363-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) data. 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 Punds Withdrawal Consent. Taxpayer's PIN: check one box only 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
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 intimate 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 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 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 the simulation 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 if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must com
I authorize GLOBAL TAXES LLC to enter or generate my PIN Enter five digits, but don't enter all zeros 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. Spouse's PIN: check one box only Date ERO firm name ERO firm name Enter five digits, but don't enter all zeros as my Enter five digits, but do
I authorize GLOBAL TAXES LLC to enter or generate my PIN Enter five digits, but don't enter all zeros 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. Spouse's PIN: check one box only Date ERO firm name Enter five digits, but don't enter all zeros don't enter all zeros 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
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 PIN: check one box only ☐ I authorize
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 Enter five digits, but don't enter all zeros 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
Spouse's PIN: check one box only I authorize 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
I authorize to enter or generate my PIN as my Enter five digits, but don't enter all zeros 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
I authorize to enter or generate my PIN as my Enter five digits, but don't enter all zeros 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
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
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
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
Spouse's signature ▶ Date ▶
Practitioner PIN Method Returns Only—continue below
Part III 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 6 1 9 8 9 Don't enter all zeros
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 Must Retain This Form — See Instructions

Don't Submit This Form to the IRS Unless Requested To Do So

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



£1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545-0	0074	IRS Use Only	–Do not v	vrite or staple in	this space.
For the year Ja	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, endi	ing			, 20	See se	parate instru	ıctions.
Your first name	e and m	iddle initial	Last na	ame						Your so	ocial security	number
SAI JAS	WANT:	H	KUTU	JMBAKA	A					784	32 11	05
If joint return, s	spouse's	s first name and middle initial	Last na								's social secu	
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.				A	pt. no.	Preside	ential Election	Campaigr
686 CYP	RESS	DOWN LN								1	here if you, o	,
City, town, or p	oost offi	ice. If you have a foreign address, also co	mplete s	spaces be	elow.	Sta	te	ZIP c	ode		if filing jointly	
COLLIER'	VILL:	E				TN	1	380	17		o this fund. Cl low will not cl	•
Foreign countr	y name			Foreign p	rovince/state/c	count	ty	Foreig	n postal code	I	x or refund.	3 -
											You	Spouse
Filing Status	s 🗵	Single					☐ Head of ho	useh	old (HOH)			
Check only		Married filing jointly (even if only o	ne had	income)								
one box.		Married filing separately (MFS)					☐ Qualifying s	surviv	ing spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name o	of your s	pouse. If you	ı che	ecked the HOH	or Q	SS box, ente	er the ch	ild's name if	the
	qu	ıalifying person is a child but not you	ır depei	ndent:								
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	d award or r	navr	ment for propert	v or	services): or	(b) sell		
Assets		nange, or otherwise dispose of a dig						•	,	. ,	Yes	⊠ No
Standard		neone can claim: You as a de					a dependent					
Deduction		Spouse itemizes on a separate retur	•		•		•					
								h - f -		1050	☐ Is bline	۵.
	-	: Were born before January 2, 1	909 [Are b	<u> </u>			14	ore January 2	-	ifies for (see in	
•	ts (see instructions): (1) First name Last name			(2) Social secu number		rity (3) Relationsh to you		ין י	Child tax c		Credit for other	
If more than four	(1)	East name					10,00]
dependents,]
see instruction	ıs ——]
and check here	1 —]
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruc	ctions)				<u></u>	. 1a	88	3,000.
	b	Household employee wages not re	•		,							,
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a			. ,					. 10		
attach Forms	d	Medicaid waiver payments not rep	•		,					. 10		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f								. 16	,	
was withheld.	f	Employer-provided adoption bene	fits fror	n Form 8	3839, line 29					. 11	f	
If you did not	g	Wages from Form 8919, line 6 .								. 10	3	
get a Form W-2, see	h	Other earned income (see instruct	ions)							. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions))		1i					
	z	Add lines 1a through 1h			, .					. 12	88	3,000.
Attach Sch. B	2a	Tax-exempt interest	2a			b T	axable interest			. 2t)	
if required.	3a_	Qualified dividends	3a			b C	ordinary dividen	ds .		. 3b)	
<u> </u>	4a	IRA distributions	4a			b T	axable amount			. 4t	,	
Standard Deduction for—	5a	Pensions and annuities	5a			b T	axable amount			. 5k)	
 Single or 	6a	Social security benefits	6a			b T	axable amount			. 6Ł)	
Married filing separately,	С	If you elect to use the lump-sum election method, check here (see instructions)							_]			
\$13,850 • Married filing	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here										
jointly or	8	Additional income from Schedule	e 1, line 10							. 8		968.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is y	our total inc	ome	e			. 9	72	2,032.
\$27,700 • Head of	10	Adjustments to income from Schedule 1, line 26										
household,	11	Subtract line 10 from line 9. This is	-							. 11		2,032.
\$20,800 • If you checked	12	Standard deduction or itemized deductions (from Schedule A)							2 13	3 , 850.		
any box under Standard	13	Qualified business income deduct	ion fron	n Form 8	1995 or Form	899	5-A			. 13		
Deduction,	14									. 14		3,850.
see instructions.	15	Subtract line 1/1 from line 11 If zer	n or lac	c ontor	Λ Thic ic w	aur 1	tavabla inaama			1.5	. 1 59	1 2 2

Form 1040 (202)	3)							Page Z		
Tax and	16	Tax (see instructions). Check if any from For	rm(s): 1 🗌 881	4 2 4972	з 🗌		16	8,106.		
Credits	17	Amount from Schedule 2, line 3					17			
	18	Add lines 16 and 17					18	8,106.		
	19	Child tax credit or credit for other depende	ents from Sched	lule 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	s, enter -0				22	8,106.		
	23	Other taxes, including self-employment tax	x, from Schedul	e 2, line 21			23	0.		
	24	Add lines 22 and 23. This is your total tax					24	8,106.		
Payments	25	Federal income tax withheld from:								
-	а	Form(s) W-2			25a 12	2,265.				
	b	Form(s) 1099			25b					
	С	Other forms (see instructions)			25c					
	d	Add lines 25a through 25c					25d	12 , 265.		
If you have a	26	2023 estimated tax payments and amount	applied from 20	022 return			26			
qualifying child,	27	Earned income credit (EIC)		No .	27					
attach Sch. EIC.	28	Additional child tax credit from Schedule 88	12		28					
	29	American opportunity credit from Form 88	63, 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 yo	ur total other p	ayments and refu	ndable credits		32			
	33	Add lines 25d, 26, and 32. These are your	total payments	· •			33	12,265.		
Refund	34	If line 33 is more than line 24, subtract line					34	4,159.		
	35a	Amount of line 34 you want refunded to y	ou. If Form 888	8 is attached, ched	k here		35a	4,159.		
Direct deposit?	b	Routing number 0 2 1 1 0 0 3	3 6 1	c Type:	Checking	Savings				
See instructions.	d	Account number 3 7 2 9 3 2	7 3 8							
	36	Amount of line 34 you want applied to you	ır 2024 estimat	ed tax	36					
Amount	37	Subtract line 33 from line 24. This is the ar								
You Owe		For details on how to pay, go to www.irs.g	ov/Payments or	see instructions.			37			
	38	Estimated tax penalty (see instructions) .			38					
Third Party		you want to allow another person to di			_					
Designee		structions				omplete l		⊠ No		
		signee's me	Phone no.	•		onal identi ber (PIN)	fication			
Sign		der penalties of perjury, I declare that I have examin		accompanying sche		. ,	he best	of my knowledge and		
-		lief, they are true, correct, and complete. Declaratio								
Here	Yo	ur signature	Date	Date Your occupation			If the IRS sent you an Identity			
						1,		IN, enter it here		
Joint return?				SOFTWARE (CI		, 75	see inst.)			
See instructions. Keep a copy for your records.		ouse's signature. If a joint return, both must sign.	Date	Date Spouse's occupation				f the IRS sent your spouse an dentity Protection PIN, enter it here see inst.)		
	Ph	one no. (901) 864-6463	Email address	JASWANTH.KUTU	MBAKA@GMAIL.C	OM				
	Pr	eparer's name Preparer's sign	nature		Date	PTIN		Check if:		
Paid	VENE	KATA SAI PAVAN KUMAR DUDIPALLI VENKATA SA	AI PAVAN KUN	MAR DUDIPALLI		P0247	0833	Self-employed		
Preparer		m's name GLOBAL TAXES LLC			1			678) 965-9522		
Use Only		m's address 245 ROONEY CT E BF	RUNSWICK N	J 08816			's EIN	88-2145487		
		4040 (' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		-		,		= 1010 (

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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.

2023	
Attachment Sequence No. 01	

Your social security number

SAI	JASWANTH KUTUMBAKA	784-32-11	05	
Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received			
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			
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule	E . 5	-15,968.
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		
	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
•	Total all a charge Add Paragon Day II and Day	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	r nere and or	ı ⊢orm	

10

-15,968.

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.

Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number SAI JASWANTH KUTUMBAKA 784-32-1105 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 . If "Yes." did you or will you file required Form(s) 1099? 1a Physical address of each property (street, city, state, ZIP code) VENKATAYA PALEM KHAMMAM TELANGANA IN 507318 Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Days** 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 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received 3 540. 4 Royalties received 4 **Expenses:** 5 5 6 Auto and travel (see instructions) 6

6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7	1,5	90.					
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11	1,2	70.					
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14	4,8	57.					
15	Supplies	15	4,2	15.					
16	Taxes	16							
17	Utilities	17	4,5	76.					
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20	16,5	08.					
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	-15 , 9	68.					
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(15,96	8.)	()	()
23a	Total of all amounts reported on line 3 for all rental proper	ties		23a	5	40.			
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	16,5	08.			
24	Income. Add positive amounts shown on line 21. Do not		•			24			
25	Losses. Add royalty losses from line 21 and rental real estate	losse	es from line 22. Er	nter to	tal losses here	25	(15,968	.)
26	Total rental real estate and royalty income or (loss). Ohere. If Parts II, III, and IV, and line 40 on page 2 do not								

-15,968.