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)		•	
Taxpayer's name	Social security	y number	
PHANI KUMAR KOVILAKAR	542-83-	-3788	
Spouse's name	al security number		
DIVYA KOVILAKAR	989-99-	-0292	
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you ar	e 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 68,	411.
2 Total tax]	2 4,	447.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 11,	565.
4 Amount you want refunded to you		4 7,	118.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a copy	y of your retur	n)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indic payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requ business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payments to receive confidential information necessary to answer inquiries and resolve issues related to the payersonal identification number (PIN) below is my signature for the income tax return (original or amended) I an Electronic Funds Withdrawal Consent.	tter, or electro ction of the tra S. Treasury ar cated in the ta n to debit the the authoriza ests must be processing of ayment. I furth	nic return originate ansmission, (b) the dits designated for a preparation soft entry to this account on the control of the ditter of the electronic paymer acknowledge	or (ERO) e reason Financial ware for unt. This rancel) a r than 2 yment of that the
Taxpayer's PIN: check one box only			
▼ I authorize GLOBAL TAXES LLC to enter or generate n	ov DINI 3	3 7 8 8	ac my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ento	er five digits, but I't enter all zeros	as my
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.			
Your signature ▶ Date ▶			
Chausaia Dibly shook and hay only			
Spouse's PIN: check one box only	DIN O		
▼ I authorize GLOBAL TAXES LLC to enter or generate n ■ ERO firm name		0 2 9 2 er five digits, but	as my
signature on the income tax return (original or amended) I am now authorizing.		i't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.			
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 Don't ente	6 0 8 2 7 er all zeros	1
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of Indicated IRS <i>e-file</i> Providers	tting this retu	rn in accordance	
ERO's signature ▶ Date ▶			
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		urn	202	3	OMB No. 1545-0	074	IRS Use Only	–Do not v	write or staple in	n this space.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, endi	ing			, 20	See se	parate instr	uctions.
Your first name	and m	iddle initial	Last na	ame						Your so	ocial security	/ number
PHANI K	IMAR		KOVI	LAKAF	₹					542	83 37	788
		s first name and middle initial	Last na								's social sec	
DIVYA	•		KOVI	LAKAF	₹					989	99 02	92
	(numbe	er and street). If you have a P.O. box, see	•					A	pt. no.		ential Election	
65 PROS	· PECT	ST, UNIT # 2P							•	ł	here if you,	
		ce. If you have a foreign address, also co	mplete s	spaces be	low.	Sta	ite	ZIP c	ode		if filing joint	•
Stamfor	d					CI	r	069	01		o this fund. (low will not (•
Foreign countr				Foreign p	rovince/state/c				n postal code	I	x or refund.	Silarige
											You	Spouse
Filing Status	s \Box	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	urviv	ing spouse	(QSS)		
	If y	ou checked the MFS box, enter the	name o	of your s	pouse. If you	ı che	ecked the HOH	or Q	SS box, ente	r the ch	ild's name	if the
	qu	alifying person is a child but not you	ır deper	ndent:								
Digital	Δt 21	ny time during 2023, did you: (a) rec	aiva (ac	a rewar	d award or r	navr	ment for propert	v or	eervices): or	(b) call		
Digital Assets		nange, or otherwise dispose of a dig				-		-			Yes	⊠ No
Standard		eone can claim: You as a de					a dependent	. (0				
Deduction	_	Spouse itemizes on a separate retur	•		•		•					
		<u> </u>		_ word u	dual Status t	anon	<u>' </u>					
		: Were born before January 2, 1	959	Are bl	lind Spo	use	: U Was born		re January 2	-	ls bli	
Dependent				(2) 9	Social security		(3) Relationship	, (4) Check the b		1	
If more	(1) F	irst name Last name			number		to you	u Child t		redit	Credit for oth	er dependents
than four											L	
dependents, see instruction	s							_	<u> </u>		L	
and check	, —							_			L	<u></u>
here L				<u> </u>						<u> </u>	<u> </u>	1 006
Income	1a	Total amount from Form(s) W-2, b	•		,							1 , 886.
Attach Form(s)	b	Household employee wages not re			. ,							
W-2 here. Also	С.	Tip income not reported on line 1a	•		•					. 10		
attach Forms W-2G and	d	Medicaid waiver payments not rep		•	,		•			. 10		
1099-R if tax	e	Taxable dependent care benefits f								. 16		
was withheld.	Ť	Employer-provided adoption bene	etits fron	n Form 8	8839, line 29					. 11		
If you did not get a Form	g					•				. 10	_	0
W-2, see	h :	Other earned income (see instruct	,			•				. 1h	1	0.
instructions.	i -	Nontaxable combat pay election (s	see inst	ructions)			<u>li</u>					1,886.
AH! 0 ! 5	<u>z</u>	Add lines 1a through 1h	 20		· · · ·	h T	avable interest			. 12		<u> </u>
Attach Sch. B if required.	2a	'	2a 3a				axable interest Ordinary dividend			. 2b		
	<u>3a</u> 4a		4a				axable amount					
Standard	5a	_	ч а 5а				axable amount					
Deduction for—	6a	_	6a				axable amount			. 6k		
 Single or Married filing 	C	If you elect to use the lump-sum e	_	method						. 51		
separately, \$13,850	7	Capital gain or (loss). Attach Sche			,	`	,		[7		
 Married filing 	8	Additional income from Schedule								_ <u> </u>	_	3,475.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9		8,411.
surviving spouse, \$27,700	10	Adjustments to income from Sche		•						. 10		~,
 Head of household, 	11	Subtract line 10 from line 9. This is								. 11		8,411.
\$20,800	12	Standard deduction or itemized	-							. 12		7,700.
 If you checked any box under 	13	Qualified business income deduct		`		,	 15-A			. 13		,,,,,,,,
Standard	14					555				. 14		7,700.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer				our i	tavabla inaama			15		7 , 700 .

Form 1040 (202)	3)								Page Z
Tax and	16	Tax (see instructions). Check if an	ny from Form((s): 1 881	4 2 🗌 4972	з 🗌		16	4,447.
Credits	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	4,447.
	19	Child tax credit or credit for other	er dependent	s from Sched	ule 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 z	zero or less, e	enter -0				22	4,447.
	23	Other taxes, including self-emplo						23	0.
	24	Add lines 22 and 23. This is your	r total tax					24	4,447.
Payments	25	Federal income tax withheld from	m:						
•	а	Form(s) W-2				25a 11	,565.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions) .				25c			
	d	Add lines 25a through 25c						25d	11,565.
If you have a	26	2023 estimated tax payments ar	nd amount ap	oplied from 20)22 return			26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from Sc	chedule 8812			28			
	29	American opportunity credit fron	n Form 8863	, 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 your total other payments and refundable credits							
	33	Add lines 25d, 26, and 32. These	•	-	-			33	11,565.
Refund	34	If line 33 is more than line 24, su						34	7,118.
	35a	Amount of line 34 you want refu				•	. 🗆	35a	7,118.
Direct deposit?	b	Routing number 0 5 3 0				_	Savings		
See instructions.	d	Account number 2 3 7 0	4 9 3	2 7 8 6	5 3 1	_	ŭ		
	36	Amount of line 34 you want appl	lied to your 2	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24. Thi	is is the amo	unt vou owe.					
You Owe		For details on how to pay, go to						37	
	38	Estimated tax penalty (see instru	uctions) .			38			
Third Party	Do	you want to allow another per	rson to disc	uss this retu	n with the IRS?	See			
Designee	ins	structions				. 🗌 Yes. C	omplete l	below.	X No
		esignee's me		Phone no.			onal identi ber (PIN)	fication	
Ciara		ider penalties of perjury, I declare that I	have evamined		accompanying sched		. ,	the heet	of my knowledge and
Sign		lief, they are true, correct, and complete							
Here	Υo	our signature		Date	Your occupation		l If the	e IRS se	nt you an Identity
		ar olgridad		24.0	Tour occupation		Prot	ection P	IN, enter it here
Joint return?					EMPLOYEE		(see	inst.)	
See instructions. Keep a copy for		Spouse's signature. If a joint return, both must sign. Date		Spouse's occupation				nt your spouse an	
your records.		HOME MAKER						inst.)	ection PIN, enter it here
		one no. (980) 371–4039		Email address			,	- /	
		(300/072 1003	parer's signatu		KOVILAKAR2	Date	PTIN		Check if:
Paid		M PRIYA RAM SAGAR GUPTA TALLAM SYA			מווסשת שאודאש	01/28/2024	P0208	2703	Self-employed
Preparer				NAUN SAGAK	GUFIA IALLAM	01/20/2024			
Use Only				NICHITCIZ NI	T 00016				678) 965-9522
	rir 'E	m's address 245 ROONEY C	L E BKU.	MONTOV N	00010		Firm	i's EIN	84-3171965

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

PHANI KUMAR & DIVYA KOVILAKAR

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No. **01** Your social security number

542-83-3788

Par	t I Additional Income	•		
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
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		5	-13,475.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b		
C	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		
!	Prizes and awards	8i		
J	Activity not engaged in for profit income	8j		
K	Stock options	8k		
	Income from the rental of personal property if you engaged in the rental	OI		
	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		
	Section 951A(a) inclusion (see instructions)	80		
o p	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8g		
ч r	Scholarship and fellowship grants not reported on Form W-2	8r		
s	Nontaxable amount of Medicaid waiver payments included on Form			
•	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or	,		
•	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente		10	- 13,475

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				
	-	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			
05					
25	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. ∟nter	nere and on		
	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.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

2023
Attachment Sequence No. 13

Your social security number

PHA	NI KUMAR & DIVYA KOVILAKAR						542-8	3-3788	
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rtv. use		c . See	e instru	ctions. If you a	ıre an indi	vidual, rep	ort farm
Α	Did you make any payments in 2023 that would require you	to file	Form(s)	1099? 5	See ins	structions .		. 🗌 Ye	es 🛛 No
В	If "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city, state, ZII								
Α	FLAT.NO:401, VENKATADRI NIVAS, NANDAMURI NAGAR, NEAR		<u> </u>	CHOOT	NT 7 AME	ועאה עעט באי	FD NACAD	HAULDVE	AD TN 500090
B	FLAT.NO.401, VENNATADAT NIVAS, NANDAMORI NAGAR, NEAR	DIIGAIIA	K HODEL S	CHOOL,	NIAMI	EI KOAD, HID	EN NAGAN,	III DENADA	AD IN 300090
C									
1b	Type of Property (from list below) 2 For each rental real estate properties above, report the number of fair	erty list	ted Fair Rent						
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to qualified joint venture. See instru			В					
С	qualified joint venture. See instru	JCHOUS	э.	С					
Туре	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (descr	ribe)		
			1			Properti			
Inco	mer			Α		В	es.		С
3	Rents received	3			80.				
4	Royalties received	4							
	nses:	† ·							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		9	58.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,7	48.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		2,9	95.				
15	Supplies	15		3,7	48.				
16	Taxes	16							
17	Utilities	17		1,7	50.				
18	Depreciation expense or depletion	18		2,8	56.				
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		14,0	55.				
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		-13,4	75.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		13,47		()	()
23a	Total of all amounts reported on line 3 for all rental prope				23a		580.		
b	Total of all amounts reported on line 4 for all royalty prop				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	2	,856.		
е	Total of all amounts reported on line 20 for all properties				23e		,055.		
24	Income. Add positive amounts shown on line 21. Do not		de any lo	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estat		•		nter to	tal losses here	e 25	(13,475.)
26	Total rental real estate and royalty income or (loss).	Comb	ine lines	24 and	25. E	nter the resu	ılt		
	here. If Parts II, III, and IV, and line 40 on page 2 do no	ot appl	ly to you,	also e	nter th	nis amount o			
	Schedule 1 (Form 1040), line 5. Otherwise, include this a	mount	in the to	tal on li	ine 41	on page 2	. 26		-13,475.