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

III.GITIAI N	levertue dei vice								
Submis	ssion Identification Number (SID)								
Taxpayer	r's name		Social	securit	y numb	er			
MRIT	UNJAY KUMAR PATHAK		754-95-6424						
Spouse's	s name		Spouse	e's soci	ial secu	rity nu	ımber		
		/E .	er year you are authorizing.)						
Part	-	(Enter	year y	ou aı	re aut	horiz	zing.)		
	whole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.								
	Adjusted gross income				1		109	240.	
	Total tax				2			290.	
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099				3			047.	
	Amount you want refunded to you				4			757.	
	Amount you owe				5				
Part I		and k	еер а	copy	y of y	our	retur	n)	
return (o to send for any o Agent to payment authorize payment business taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Parl original or amended) I am now authorizing. I consent to allow my intermediate service provider, my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial interaction is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to text, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellating adays prior to the payment (settlement) date. I also authorize the financial institutions involved to receive confidential information necessary to answer inquiries and resolve issues related to all identification number (PIN) below is my signature for the income tax return (original or amendatic Funds Withdrawal Consent.	transmin for reject the U. unt indicate the untindicate the part of the part o	tter, or ction of S. Treascated in to del the au processayment.	electro the transury are the tabit the thorizanust be sing of	enic retuents ansmissed its distance of the entry to ation. To receive the electrical transfer acknowledge in the electrical transfer a	urn or sion, esign aratic this oreverted nectron	iginato (b) the ated F n softe accou oke (c o later ic pay edge	or (ERO) e reason inancial ware for unt. This ancel) a than 2 ment of that the	
	yer's PIN: check one box only								
X	I authorize GLOBAL TAXES LLC to enter or ger	nerate r	nv PIN	5	6 4	2	4	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.		,	Ent	er five on't enter			y	
	I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.								
Your si	gnature ▶ Da	te▶ _							
Snouse	e's PIN: check one box only								
Ороца	I authorize to enter or ger	narata r	nv PIN					as my	
	ERO firm name	iciale i	11y 1 11 1		er five o	liaits.	but	as my	
	signature on the income tax return (original or amended) I am now authorizing.				n't enter				
	I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.								
Spouse	e's signature ▶ Da	te ►							
	Practitioner PIN Method Returns Only—continue	below							
Part I	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 0	8	2 7	1	
			Do	n't ente	er all zei	ros			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual incred to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I amonts of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providence.	n submi	tting th	is retu	ırn in a	ccord	lance '		
ERO's	signature ▶ Da	te ▶							
	ERO Must Retain This Form — See Instruction								
	Don't Submit This Form to the IRS Unless Requested		o So						

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



OMB No. 1545-0074

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

For the year Jan	ı. 1–Dec	c. 31, 2023, or other tax year beginning	, 2023, ending ,				, 20		See separate instructions.			
Your first name	and m	iddle initial	Last na	ame					Y	our so	cial secu	rity number
MRITUNJA	Y KI	IJMAR	PATH	ΙΔΚ						754	95	6424
		s first name and middle initial	Last na						-			security number
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Apt. r	10.	Р	reside	ntial Elec	tion Campaign
10200 IN	IDEP1	ENDENCE PKWY					180	8	c	Check h	nere if you	u, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	te	ZIP code					ointly, want \$3 d. Checking a
PLANO					TX		75025			•		ot change
Foreign country	/ name			Foreign province/state/o	count	у	Foreign po	stal co	de y	our tax	or refund	
											You	Spouse
Filing Status	; ×	Single				☐ Head of ho	ousehold (HOH)			
Check only		Married filing jointly (even if only or	ne had i	income)								
one box.		Married filing separately (MFS)				☐ Qualifying	surviving	spou	se (Q	SS)		
	If y	ou checked the MFS box, enter the	name o	of your spouse. If you	u che	cked the HOH	or QSS b	ox, e	nter t	he chi	ld's nam	ie if the
	qu	alifying person is a child but not you	ır deper	ndent:								
Digital	At ar	ny time during 2023, did you; (a) rece	eive (as	a reward, award, or	pavn	nent for prope	rtv or serv	ices):	or (b) sell.		
Assets		nange, or otherwise dispose of a digi									☐ Yes	s 🛛 No
Standard	Som	neone can claim:	penden	t Your spouse	e as	a dependent						
Deduction		Spouse itemizes on a separate returi	n or you	u were a dual-status	alien							
Age/Blindness	· Vali	: Were born before January 2, 1	050 F	Are blind Spo	ouse:	· 🗆 Was bor	n before l	anua	n/2 ·	1050		blind
			JJJ _	Ī			(4) Ob		•			
Dependents		irst name Last name		(2) Social security number	′	(3) Relationsh to you	ib				· `	,
If more than four	(.,					. ,	dent as born before January 2, 1959					
dependents,									-			Ħ
see instructions	s —								_			Ħ
and check here]							Ē	-			i
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (se	ee instructions)						1a		 128,423.
	b	Household employee wages not re	•	•						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	•	, ,						1c	;	
attach Forms	d	Medicaid waiver payments not rep	orted o	on Form(s) W-2 (see ir	nstru	ctions)				1d	1	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	rm 2441, line 26 .						1e	,	
was withheld.	f	Employer-provided adoption bene	fits fron	n Form 8839, line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .								1g	ı .	
get a Form W-2, see	h	Other earned income (see instructi	ions)							1h	ı	0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		<u>1i</u>						
	z	Add lines 1a through 1h	. ;							1z	. 1	128,423.
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest	t			2b	,	
if required.	3a	Qualified dividends	3a		b 0	rdinary divider	nds			3b		
Standard	4a	IRA distributions	4a			axable amount				4b		
Deduction for—	5a		5a			axable amount				5b)	
Single or Married filing	6a	,	6a			axable amount	t			6b)	
separately,	С	If you elect to use the lump-sum el		•	•	,			. 📙			
\$13,850 Married filing	7	Capital gain or (loss). Attach Sched							. Ц	7		
jointly or Qualifying	8	Additional income from Schedule	-							8		-19,183.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•						9		109,240.
\$27,700 • Head of	10	Adjustments to income from Sche								10		100 040
household, \$20,800	11	Subtract line 10 from line 9. This is	•	-						11		109,240.
If you checked	12	Standard deduction or itemized								12		13,850.
any box under Standard	13	Qualified business income deducti			เชษษ	o-A				13		12 050
Deduction, see instructions.	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer				avahla inaa				14		13,850. 95,390.
	15	Subtract line 14 HOTH line 11. If Zer	o or ies	os, enter -u Triis is y	our t	алаын шсот				15	/ I	ノン ,

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	16,290.
Credits	17	Amount from Schedule 2, lir	ne 3						17	
	18	Add lines 16 and 17							18	16,290.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812				19	
	20	Amount from Schedule 3, lir	ne 8						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0					22	16,290.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .				23	0.
	24	Add lines 22 and 23. This is	your total tax						24	16,290.
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25a	24	,047.		
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c							25d	24,047.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return				26	
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28				
	29	American opportunity credit	from Form 8863	8, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir	ne 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable	credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	24,047.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you o	verpaid		34	7,757.
	35a	Amount of line 34 you want			is attached, che	ck here			35a	7,757.
Direct deposit?	b	Routing number 1 1 1] Checki	ng 🗌 S	Savings		
See instructions.	d	Account number 4 8 8	1 1 1 6	1 9 9 9	9 9					
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe						
You Owe		For details on how to pay, g	o to www.irs.gov	//Payments or	see instructions				37	
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See				
Designee	ins	structions							oelow.	⋉ No
	Designee's Phone Personal name no. number						nal identi	fication		
0:		der penalties of perjury, I declare t	hat I have examined		accompanying scho	dulos ano		, ,	ho host	of my knowledge and
Sign		lief, they are true, correct, and com								, ,
Here	Υo	ur signature		Date	Your occupation			l If the	IRS se	nt you an Identity
	10	ur signature		Date	Tour occupation					IN, enter it here
Joint return?				SOFTWARE ENGINEER				(see	inst.)	
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat	ion				nt your spouse an
Keep a copy for your records.	-							1	tity Prote inst.)	ection PIN, enter it here
•		(245)600 510		Farall address	<u> </u>	00000	3.TT GO:	,		
		one no. (347)682-712 eparer's name	5 Preparer's signat	Email address	MRITUNJAYP	Date	ALL.CO	M PTIN		Check if:
Paid		·	1 .		CIIDMA MATTAN		7/2024		2702	Self-employed
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM	1	KAM SAGAR	GUPIA TALLAM	102/0	7/2024	P0208		
Use Only		m's name GLOBAL TA		NICIJI CIZ 37	T 00016					678)965-9522
	Fin	m's address 245 ROONE	Y CT E BRU	MSWICK N	J 08816			Firm	'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

MRITUNJAY KUMAR PATHAK

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 soc	ial security number
754-95	-6424

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ich Schedule E .	5	-19,183.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
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. Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-19,183.

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				
16	Self-employed SEP, SIMPLE, and qualified plans				
17	Self-employed health insurance deduction				
18	Penalty on early withdrawal of savings				
19a	Alimony paid				
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				Į.
20	IRA deduction				
21	Student loan interest deduction				
22	Reserved for future use				
23	Archer MSA deduction			. 23	
24	Other adjustments:				
а	,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	· · · · · · · · · · · · · · · · · · ·	24c			
d	the state of the s	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			Į.
25	Total other adjustments. Add lines 24a through 24z				
26	Add lines 11 through 23 and 25. These are your adjustments to income . Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	r here and	on 26	
	1 OITH 1070, 1070-011, 01 1070-1111, IIIIC 10	• •		. 20	

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.

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 754-95-6424 MRITUNJAY KUMAR PATHAK Income or Loss From Rental Real Estate and Royalties

rart	income or	LOS	s From Rental Real Estate and Royalties				
			he business of renting personal property, use Schedu l s from Form 4835 on page 2, line 40.	e C. See	instructions. If you	are an individual, repo	ort farm
	•	-	ents in 2023 that would require you to file Form(s) ou file required Form(s) 1099?				
1a	Physical address	of e	ach property (street, city, state, ZIP code)				
Α	RZB-67,FLAT	#C1	,2ND FLOOR NEW DELHI NEW DELHI D	IST II	110045		
В							
С							
1b	Type of Property (from list below)	2	For each rental real estate property listed above, report the number of fair rental and		Fair Rental Days	Personal Use Days	QJV
Α	3	1	personal use days. Check the QJV box only	Α	365	0	
В			if you meet the requirements to file as a qualified joint venture. See instructions.	В			
С			quaineu joint venture. See instructions.	С			
Гуре с	of Property:						
	–						

1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties

					Properties:	perties:		
ncon	ne:		Α		В		С	
3	Rents received	3	6	20.				
4	Royalties received	4						
хреі	nses:							
5	Advertising	5						
6	Auto and travel (see instructions)	6						
7	Cleaning and maintenance	7	1,5	20.				
8	Commissions	8						
9	Insurance	9						
0	Legal and other professional fees	10						
1	Management fees	11	1,3	60.				
12	Mortgage interest paid to banks, etc. (see instructions)	12						
3	Other interest	13						
14	Repairs	14	4,5	37.				
15	Supplies	15	4,8	24.				
6	Taxes	16						
17	Utilities	17	4,6	00.				
18	Depreciation expense or depletion	18	2,9	62.				
19	Other (list)	19						
20	Total expenses. Add lines 5 through 19	20	19,8	03.				
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	-19,1	83.				
22	Deductible rental real estate loss after limitation, if any,							
	on Form 8582 (see instructions)	22	(19,18	3.))	(
23a	Total of all amounts reported on line 3 for all rental prope	rties		23a	6	20.		
b	Total of all amounts reported on line 4 for all royalty properties			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	2,9	62.		
е	Total of all amounts reported on line 20 for all properties			23e	19,8	03.		
4	Income. Add positive amounts shown on line 21. Do not	inclu	de any losses			24		
5	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from line 22. E	nter to	tal losses here	25	(19,18	
26	Total rental real estate and royalty income or (loss).	Comb	ine lines 24 and	25. E	nter the result			
	here. If Parts II, III, and IV, and line 40 on page 2 do no							
	Calcadula 1 (Farma 1040) lina F. Othamuian include this an	~~	المرم المقمة ممالة مراد	no 11			10 1	

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 -19,183.

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

2023 Attachment Sequence No. 179

OMB No. 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number MRITUNJAY KUMAR PATHAK Sch E RZB-67, FLAT #C1, 2ND FLOOR 754-95-6424 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1,160,000. Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2,890,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property h Residential rental 27.5 yrs. MM S/L 01/23 85,000. 2,962 S/L 27.5 yrs. MM property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. **b** 12-year ММ S/L c 30-year 30 yrs. ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 2,962. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.