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)

Taxpay	ver's name	Social securi	ty numb	ber
SAN	IJAY KUMAR KOTA	484-77	-563	7
Spouse	s's name	Spouse's so	ial secu	urity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	er year you a	ire aut	thorizing)
	whole dollars only on lines 1 through 5.	, your your		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1	84,750.
2	Total tax		2	10,911.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	14,839.
4	Amount you want refunded to you		4	3,928.
5	<u>A</u> mount you owe		5	

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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

				FBO firm name		E	Π
<u>~</u>	rauthorize	GLODAL	IAVEO		to enter or generate my PIN	_	Ĩ
\mathbf{v}	l authorize	CTODAT	TAVEC	TTC	to optok ok gobokoto pov DIN	1	

7	5	6	3	7	as my
Ente					

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 my
	digits, r all ze	

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 E			•							
Practitioner PIN Method Returns Only—continue below										
Part III C	Certification and Authentication – Practitioner PIN Method Only									
ERO's EFIN/P	PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2			6 nter a		2	7	1

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						
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 01/12/24 PRO	Form 8879 (Rev. 01-2021)			

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta)		turn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this	space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ding			, 20		See sep	oarate	instruct	ions.
Your first name	and m	iddle initial	Last r	name							Your so	cial sec	urity nu	mber
SANJAY F	IIMAI	B	кот	Δ'									5637	
		s first name and middle initial	Last r											, numbei
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.		Preside	ntial Ele	ection C	ampaigr
3661 W W	VALN	UT HILL LN						2	2148		Check h			
City, town, or p	ost offi	ce. If you have a foreign address, also co	spaces be	elow.	Sta	ite	ZIP c	ode		spouse				
IRVING						TΣ	K	750	38		to go to box belo			
Foreign country	/ name			Foreign p	province/state/	count	ty	Foreig	n postal co	ode	your tax	or refu	nd.	
												Y	ou 🗌	Spouse
Filing Status	; 🛛	Single					Head of he	ouseh	old (HOF	l)				
Check only		Married filing jointly (even if only o	ne hao	d income)										
one box.		Married filing separately (MFS)					Qualifying		• •		,			
		you checked the MFS box, enter the			spouse. If you	u che	ecked the HOH	l or Q	SS box, e	enter	the chi	ld's na	me if th	е
	qu	alifying person is a child but not you	ır dep	endent:										
Digital	At ar	ny time during 2023, did you: (a) rec	eive (a	s a rewar	d, award, or	payr	ment for prope	rty or	services)	; or (b) sell,			
Assets		hange, or otherwise dispose of a dig						-				Y	es 🛛	No
Standard	Som	neone can claim: 🗌 You as a de	pende	ent	Your spous	e as	a dependent							-
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	ı							
Age/Blindness	s You	: Were born before January 2, 1	959	Are b	lind So	ouse	: 🗌 Was bor	n befo	ore Janua	arv 2	1959		s blind	
Dependents			000	<u> </u>	•			10) Check th					uctions):
-		irst name Last name		(2)	Social security number	/	(3) Relationsh to you	ip (Child ta		· · · ·			ependents
lf more than four	(.)						,			7				
dependents,									L					
see instructions and check	s ——								C					
here]													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	see instru	ctions) .						1a		99,	251.
	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .						1b			
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	a (see i	instructior	ns)						1c			
attach Forms	d	Medicaid waiver payments not rep	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)					1d						
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom F	orm 2441	, line 26						1e			
was withheld.	f	Employer-provided adoption bene									1f			
If you did not	g	Wages from Form 8919, line 6 .									1g			
get a Form W-2, see	h	Other earned income (see instruct					· · · · ·	· ·			1h			0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)		1 i							0.5.1
	z	Add lines 1a through 1h	· i		· · ·						1z	-	99,	251.
Attach Sch. B	2a		2a				axable interest				2b	-		
if required.	<u>3a</u>		3a				Ordinary divider		• •		3b	-		
Standard	4a -		4a				axable amount		• •		4b	-		
Deduction for—	5a		5a				axable amount		• •		5b	-		
 Single or Married filing 	6a	,	6a				axable amount	ι		· .	6b			
separately, \$13,850	с _	If you elect to use the lump-sum e				`	,	• •	• •	· _				
 Married filing 	7	Capital gain or (loss). Attach Sche						• •	• •	. ∟	7	+	_1 /	501
jointly or Qualifying	8 9	Additional income from Schedule						• •	• •	• •	8	-		501. 750.
surviving spouse, \$27,700	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7 Adjustments to income from Sche						• •	• •	• •	9	-	04,	100.
 Head of 	11	Subtract line 10 from line 9. This is						• •	• •	• •	11	+	QЛ	750.
household, [\$20,800	12	Standard deduction or itemized	-					• •	• •	• •	12	+		850.
 If you checked any box under 	13	Qualified business income deduct									13	-	± J I	000.
Standard Deduction,	14										14		13.	850.
see instructions.	15	Subtract line 14 from line 11. If zer	• •	ess, enter	-0 This is v	vour f	taxable incom	e .			15			900.
)									

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	i 10,911.
Credits	17	Amount from Schedule 2, lin	e3				17	7
	18	Add lines 16 and 17					18	1 0,911.
	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	10,911.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		23	3 0.
	24	Add lines 22 and 23. This is	your total tax				24	10,911.
Payments	25	Federal income tax withheld						
·	а	Form(s) W-2				25a 14	,839.	
	b	Form(s) 1099				25b	·	
	с	Other forms (see instructions	s)			25c		
	d	Add lines 25a through 25c					25	d 14,839.
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)			No	27		
attach Sch. EIC.	28	Additional child tax credit from				28		
	29	American opportunity credit	from Form 8863	8, 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 credits	32	2
	33	Add lines 25d, 26, and 32. T	•		-		33	14,839.
Refund	34	If line 33 is more than line 24					34	3,928.
lioidiid	35a	Amount of line 34 you want				•	. 35	a 3,928.
Direct deposit?	b	Routing number 1 1 1					Savings	
See instructions.	d	Account number 7 6 6					J.	
	36	Amount of line 34 you want a			ed tax	36		
Amount	37	Subtract line 33 from line 24	•••••			1 1		
You Owe	0/	For details on how to pay, g					37	,
	38	Estimated tax penalty (see in				38		
Third Party		you want to allow another	,					
Designee		structions	•				mplete belov	v. 🗙 No
	De	signee's		Phone			onal identificatio	n
	nai			no.			er (PIN)	
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com						
Here			piete. Declaration	、	1, 2, 7			, 0
	Yo	ur signature		Date	Your occupation			sent you an Identity PIN, enter it here
Joint return?					SOFTWARE	ENGINEER	(see inst.)	
See instructions.	Sp	Spouse's signature. If a joint return, both must sig		Date	Spouse's occupat	IWAKE ENGINEER , ,		
Keep a copy for	- 1-	,					Identity Pr	otection PIN, enter it here
your records.							(see inst.)	
	Ph	one no. (940) 304-686	3	Email address	SANJAY112K	DTA@GMAIL.CO	М	
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN	Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/24/2024	P0208270	3 Self-employed
Use Only	Fir	m's name GLOBAL TAX	XES LLC				Phone no.	(678)965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's EIN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/12/24 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.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

202 23 Attachment Sequence No. **01**

Internal Revenue Service		Sequence No. 01	
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
SANJAY KUMAR K	OTA	484-77	-5637

Par	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. Attach	Schedule E .	5	-14,501.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	()	
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555 8d	()	
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
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)			
n	Section 951(a) inclusion (see instructions)			
ο	Section 951A(a) inclusion (see instructions)			
р	Section 461(I) excess business loss adjustment			
q	Taxable distributions from an ABLE account (see instructions) 8q			
r	Scholarship and fellowship grants not reported on Form W-2			
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan			
u	Wages earned while incarcerated			
z	Other income. List type and amount:			
	82			
9	Total other income. Add lines 8a through 8z	· · · · · · ·	9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter he			1 4 5 0 1
	1040, 1040-SR, or 1040-NR, line 8	<u></u>	10	-14,501.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	le 1 (Form 1040) 2023

1	Adjustments to Income					11	
	Educator expenses				·	11	
2	Certain business expenses of reservists, performing artists, and fee	-pasi	s gov	vernme	ent	12	
,	officials. Attach Form 2106	• •	• •	• •	• -	13	
3	Moving expenses for members of the Armed Forces. Attach Form 3903					13	
4 5						15	
5	Deductible part of self-employment tax. Attach Schedule SE						
6	Self-employed SEP, SIMPLE, and qualified plans					16	
7	Self-employed health insurance deduction					17	
8	Penalty on early withdrawal of savings					18	
9a	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	Jury duty pay (see instructions)	24a					
b	Deductible expenses related to income reported on line 8I from the						
	rental of personal property engaged in for profit	24b					
С	Nontaxable amount of the value of Olympic and Paralympic medals						
	and USOC prize money reported on line 8m	24c					
d	Reforestation amortization and expenses	24d					
е	Repayment of supplemental unemployment benefits under the Trade						
	Act of 1974	24e					
f	Contributions to section 501(c)(18)(D) pension plans	24f					
q	Contributions by certain chaplains to section 403(b) plans	24g					
· ·	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						
	tax law violations	24i					
i	Housing deduction from Form 2555	24i					
ן ר	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	2 7j					
N		24k					
_		24K					
z	Other adjustments. List type and amount:	24z					
	Tatal athen adjustments Add lines 04- through 04-					05	
25	Total other adjustments. Add lines 24a through 24z				-	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income					~	
	Form 1040, 1040-SR, or 1040-NR, line 10	• •	• •	• •	•	26	

(Form	1040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)										200 2 2		
	nent of the Treasury Revenue Service	Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to <i>www.irs.gov/ScheduleE</i> for instructions and the latest information.										Attachment Sequence No. 13		
) shown on return	0010000				itest ii		ial security number						
SANJAY KUMAR KOTA											77-5637	number		
Part			ss From Re	ental Real Estate a	nd Ro	valties				101	1 3031			
	Note: If yo rental inco	ou are in ome or lo	the business ss from Form	of renting personal prope 4835 on page 2, line 40.	erty, use	Schedule								
		make any payments in 2023 that would require you to file Form(s) 1099? See instructions Yes X No did you or will you file required Form(s) 1099?												
1a	Physical addr	ress of e	each propert	y (street, city, state, Z	IP code	e)								
Α	10/571 1st	T FLO	OR SKANDA	A NIVAS,KADAPA	ANDHE	RA PRAD	ESH	IN 5	16001					
В														
С										1				
1b	Type of Prope (from list belov		above, re	For each rental real estate proper above, report the number of fair re personal use days. Check the QJV if you meet the requirements to fil qualified joint venture. See instruct				Fair Rental Days		Personal Use Days		QJV		
Α	3						Α	365		0				
В							В							
С			quainoa j		uotionic		С							
	of Property:													
	Single Family R			cation/Short-Term Rei	ntal	5 Land			Self-Rental	、				
2	Multi-Family Re	sidence	e 4 Co	mmercial		6 Roya	lties	8	Other (desc	ribe)				
									Propert	ies:				
Incom	ne:						Α		В			С		
3					3		6	81.						
4		ived .			4									
Exper														
5	•				5									
6					6			70						
7					7		2,8	70.						
8 9					8									
9 10	Insurance 9 Legal and other professional fees 10													
11	Management f	11		2 4	50.									
12	Mortgage inter	12												
13	Other interest	13												
14	Repairs	14		3,9	71.									
15	Supplies	15		3,5	10.									
16	Taxes				16									
17					17		2,3	81.						
18		expense	or depletion	1	18									
19														
20				gh 19	20		15,1	82.						
21				and/or 4 (royalties). If										
	file Form 6198			to find out if you must	21	_	-14,5	01						
22				after limitation, if any,			11,5	01.						
	on Form 8582	(see in	structions) .		22	(14,50		()()		
23a				ne 3 for all rental prop			•	23a		681.				
b				ne 4 for all royalty prop	-			23b						
C d				ne 12 for all properties		· · ·		23c 23d						
d				ne 18 for all properties				23d 23e	1 [5,182.				
е 24	Total of all amounts reported on line 20 for all properties23e15,182.Income. Add positive amounts shown on line 21. Do not include any losses													
2 4 25				e 21 and rental real esta		-		 nter to	tal losses he		(14,501.)		

Supplemental Income and Loss

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 -14,501. NPA For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2023

-14,501.

OMB No. 1545-0074

2023
Attachment Sequence No. 13

SCHEDULE E

I

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