(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

Subm	sission Identification Number (SID)		-		
Taxpay	er's name	Social securit	y numl	er	
PRE	ETHI PANDURANGAN	863-57-	-444	3	
Spouse	e's name	Spouse's soc	ial seci	urity num	ber
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	⊥ r year you a	re au	thorizin	ıg.)
Enter	whole dollars only on lines 1 through 5.				<u> </u>
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1		28,874.
2	Total tax		2	2	21,006.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	2	23,951.
4	Amount you want refunded to you		4		2,945.
5	Amount you owe		5		h\
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended				
to send for any Agent payme authori payme busine taxes to person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmount of the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account into finitiate any account in the financial institution account in the process of the second of the return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate that, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation receives days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the last identification number (PIN) below is my signature for the income tax return (original or amended) I applied to the Withdrawal Consent.	ection of the tr J.S. Treasury and licated in the ta on to debit the e the authoriza- uests must be processing of payment. I furt	ansmised the control of the control	ssion, (b) designate paration s to this ac fo revoke ved no l ectronic sknowled	the reason ed Financial software for count. This e (cancel) a ater than 2 payment of ge that the
	onic Funds Withdrawal Consent.				¬
-	ayer's PIN: check one box only	- 7	4 4	4 4 3	;
×	I authorize GLOBAL TAXES LLC to enter or generate ERO firm name	Ent		digits, bu	
	signature on the income tax return (original or amended) I am now authorizing.	doi	ı't ente	r all zero	S
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.				
Yours	signature ▶ Date ▶				
Spous	se's PIN: check one box only				_
	I authorize to enter or generate	mv PIN			as my
	ERO firm name	Ent		digits, bu	nt ,
	signature on the income tax return (original or amended) I am now authorizing.	doı	n't ente	r all zero	S
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.				
Spous	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	1			
Part	III Certification and Authentication — Practitioner PIN Method Only				
FRO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 4 9	6 0	8 2	7 1
LI10 .	S ET INVI INC. Effect your six digit Efficienced by your five digit son solected inc.	Don't ente		- -	, , ±
author	by that the above numeric entry is my PIN, which is my signature for the electronic individual income to ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am substants of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of I	nitting this retu	rn in a	accordan	ice with the
ERO's	s signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



For the year Jan	. 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	Your social security number			
PREETHI			PANI	OURANGAN						863	57	4443	
If joint return, s	pouse's	s first name and middle initial	Last na	ame					s	pouse'	s social s	security number	
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Apt. r	ю.	Р	reside	ntial Elec	tion Campaign	
LILIAN (COUR	r,1645 INTERNATIONAL D)R				212				•	u, or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Stat	te	ZIP code					ointly, want \$3	
MCLEAN					VA		22102			to go to this fund. Checking box below will not change			
Foreign country	/ name			Foreign province/state/	count	y	Foreign pos	stal co	ode y				
											You	Spouse	
Filing Status	; X	Single				Head of he	ousehold (НОН)				
Check only] Married filing jointly (even if only or	ne had	income)									
one box.		Married filing separately (MFS)	se (Q	SS)									
	lf y	ou checked the MFS box, enter the	enter t	he chi	ld's nam	ie if the							
	qu	alifying person is a child but not you											
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		lange, or otherwise dispose of a digi									☐ Yes	s 🛛 No	
Standard	Som	eone can claim: You as a de	penden	t Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	u were a dual-status	alien	•							
Ago/Plindnoo		: Were born before January 2, 1	050 [Are blind Sne		. Nas bar	n hoforo I	00110	m, 0 ·	1050		blind	
	_		909 [-	ouse:		n before J		•			blind ee instructions):	
Dependents		instructions): irst name Last name		(2) Social security number	′	(3) Relationsh to you	ι ρ		x crec		,	other dependents	
If more	(1) [rist name Last name		Humber		to you		Г		***	- Credit for t		
than four dependents,									┽			 	
see instructions	s —								┪			-	
and check here									_			 	
-	1a	Total amount from Form(s) W-2, bo	ov 1 (se	e instructions)						1a	T 1	 131,299.	
Income	b	Household employee wages not re	,	,				•		1b			
Attach Form(s)	C	Tip income not reported on line 1a	1c										
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	•	·		ctions)		•		1d			
W-2G and	e	Taxable dependent care benefits for						•		1e			
1099-R if tax was withheld.	f	Employer-provided adoption bene		•						1f			
If you did not	g	Wages from Form 8919, line 6.								1g			
get a Form	h	Other earned income (see instructi								1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	,			l 1i						-	
	z	A - -								1z	7 1	131,299.	
Attach Sch. B	2a	1	2a		b Ta	axable interest				2b		1,050.	
if required.	За	Qualified dividends	3a		b 0	rdinary divider	nds			3b		9,199.	
	4a	IRA distributions	4a			axable amount				4b			
Standard Deduction for—	5a	Pensions and annuities	5a		b Ta	axable amount	t			5b			
Single or	6a	Social security benefits	6a		b Ta	axable amount	t			6b			
Married filing separately,	С	If you elect to use the lump-sum el	lection	method, check here	(see i	instructions)							
\$13,850	7	Capital gain or (loss). Attach Sched	dule D i	f required. If not requ	uired,	check here			. 🗆	7			
Married filing jointly or	8	Additional income from Schedule	1, line 1	0						8		-12,674.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	come					9	1	128,874.	
\$27,700 • Head of	10	Adjustments to income from Schee	dule 1,	line 26						10			
household,	11	Subtract line 10 from line 9. This is	your a	djusted gross incor	ne					11	1	128,874.	
\$20,800 If you checked _r	12	Standard deduction or itemized	deduct	tions (from Schedule	A)					12		13,850.	
any box under Standard	13	Qualified business income deducti	on fron	n Form 8995 or Form	899	5-A				13	\perp		
Deduction,	14	Add lines 12 and 13								14	_	13,850.	
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our t	axable incom	e			15	1	115,024.	

Form 1040 (202)	3)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	ı(s): 1 881	4 2 🗌 4972	з 🗌		16	21,006.	
Credits	17	Amount from Schedule 2, lin	ne 3					17		
	18	Add lines 16 and 17						18	21,006.	
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	ne 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	21,006.	
	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	21,006.	
Payments	25	Federal income tax withheld	from:							
_	а	Form(s) W-2				25a 21	731.			
	b	Form(s) 1099				25b 2	2,220.			
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c	25d	23,951.						
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	022 return			26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27				
allacii Scii. Elc.	28	Additional child tax credit from	m Schedule 8812	2		28				
	29	American opportunity credit	from Form 8863	3, line 8 . .		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin								
	32	Add lines 27, 28, 29, and 31	32							
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	23,951.	
Refund	34	If line 33 is more than line 24	34	2,945.						
	35a	Amount of line 34 you want	35a	2,945.						
Direct deposit?	b	Routing number 0 6 3								
See instructions.	d	Account number 7 9 4								
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g	37							
100 0 110	38	Estimated tax penalty (see in		31						
Third Party		you want to allow another				Soc.				
Designee		,	•			_	omplete	below.	X No	
Doolgiloo	De	esignee's		Phone		onal ident				
	na	me		no.		num	ber (PIN)			
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com								
Here			ipiete. Declaration t		. , ,	sed on an imormati			,	
	Yo	our signature		Date	Your occupation				nt you an Identity IN, enter it here	
Joint return?					BUSINESS A	NALYST		inst.)	iiv, enter it nere	
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupation		If the	e IRS sei	nt your spouse an	
Keep a copy for your records.		,	· ·				Iden	dentity Protection PIN, enter it here see inst.)		
	Ph	one no. (352)328-775	6	Email address	PREETHI257	@GMAIL.COM	 1			
Daid	Pr	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Paid	SYA	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/03/2024	P0208	2703	Self-employed	
Preparer		m's name GLOBAL TA			(678)965-9522					
Use Only			Y CT E BRU	NSWICK N	J 08816		_	ı's EIN	84-3171965	
	- "		= = ====				1		0 - 0 - 1 - 1 - 1 - 0 - 0	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

PREETHI PANDURANGAN

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.

Your social security number 863-57-4443

Taxable refunds, credits, or offsets of state and local income taxes			
		1	
Alimony received		2a	
Date of original divorce or separation agreement (see instructions):			
		4	
		5	-12,674
Farm income or (loss). Attach Schedule F		6	
Unemployment compensation		7	
Other income:			
Net operating loss	8a ()	
Gambling	8b		
Cancellation of debt	8c		
Foreign earned income exclusion from Form 2555	8d ()	
Income from Form 8853	8e		
Income from Form 8889	8f		
Alaska Permanent Fund dividends	8g		
Jury duty pay	8h		
	8i		
	8j		
Stock options	8k		
Income from the rental of personal property if you engaged in the rental			
	81		
	8m		
,	8n		
	80		
	8p		
,	8r		
	8s (
	8t		
Other income, List type and amount:			
	8z		
		9	
	Business income or (loss). Attach Schedule C Other gains or (losses). Attach Form 4797 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Farm income or (loss). Attach Schedule F Unemployment compensation Other income: Net operating loss Gambling Cancellation of debt Foreign earned income exclusion from Form 2555 Income from Form 8853 Income from Form 8889 Alaska Permanent Fund dividends Jury duty pay Prizes and awards Activity not engaged in for profit income Stock options 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 Olympic and Paralympic medals and USOC prize money (see instructions) Section 951(a) inclusion (see instructions) Section 951(a) inclusion (see instructions) Section 461(l) excess business loss adjustment Taxable distributions from an ABLE account (see instructions) Scholarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan Wages earned while incarcerated Other income. Add lines 8a through 8z	Business income or (loss). Attach Schedule C Other gains or (losses). Attach Form 4797 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Farm income or (loss). Attach Schedule F Unemployment compensation Other income: Net operating loss Gambling Gambling Section 951(a) inclusion (see instructions) Section 951(a) inclusion from a nonqualifed deferred compensation suppose a red for some suppose a red of the rorm of a nongovernmental section 457 plan Wages earned while incarcerated Other income. List type and amount: Other income. Raa (Sa (Sanbling Sa (Sa (Sa (Sambling Sa (Sa (Sambling Sa (Sa (Sa (Sambling Sa (Sa (Sambling Sa (Sa (Sambling Sa (Sa (Sa (Sambling Sa (Sa (Sa (Sambling Sa (Business income or (loss). Attach Schedule C Other gains or (losses). Attach Form 4797 Aental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Farm income or (loss). Attach Schedule F Unemployment compensation Other income: Net operating loss Net operating loss Asa () Gambling Cancellation of debt Foreign earned income exclusion from Form 2555 Bad () Income from Form 8853 Re Income from Form 8889 Alaska Permanent Fund dividends By Prizes and awards Activity pay Prizes and awards Activity not engaged in for profit income Stock options By Cancellation of debt Section 951(a) inclusion (see instructions) Section 951(a) inclusion (see instructions) Section 951(a) inclusion (see instructions) Section 461(f) excess business loss adjustment Taxable distributions from a nABLE account (see instructions) Scholarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan Wages earned while incarcerated Other income. Add lines 8a through 8z 9

Page **2** Schedule 1 (Form 1040) 2023

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN	· <u> </u>			
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 8l 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			
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				
_	tax law violations	24i			
j	Housing deduction from Form 2555	24j		_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k		-	
Z	Other adjustments. List type and amount:				
0 -		24z		0-	
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	
	BAA	REV 02/	23/24 PRO	Schedu	le 1 (Form 1040) 2023

SCHEDULE B (Form 1040)

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR.

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

OMB No. 1545-0074

Attachment Sequence No. 08

Your social security number

863-57-4443

PREETHI PANDURANGAN Amount Part I List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this Interest interest first. Also, show that buyer's social security number and address: (See instructions WELLS FARGO BANK 50. and the DISCOVER BANK 1,000. Instructions for Form 1040, line 2b.) Note: If you received a Form 1099-INT. 1 Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form. 2 1,050. 2 Excludable interest on series EE and I U.S. savings bonds issued after 1989. 3 3 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b 4 1,050. Note: If line 4 is over \$1,500, you must complete Part III. **Amount** List name of payer: FIDELITY BROKERAGE SERVICES LLC 9,199. Part II **Ordinary Dividends** (See instructions and the Instructions for Form 1040, line 3b.) Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b 9,199. dividends shown on that form. Note: If line 6 is over \$1,500, you must complete Part III. Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. **Foreign Accounts** Yes No and Trusts 7a At any time during 2023, did you have a financial interest in or signature authority over a financial Caution: If account (such as a bank account, securities account, or brokerage account) located in a foreign required, failure to X file FinCEN Form If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial 114 may result in substantial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 penalties. and its instructions for filing requirements and exceptions to those requirements Additionally, you If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the may be required financial account(s) is (are) located: to file Form 8938, Statement of Specified Foreign

Financial Assets. See instructions.

During 2023, did you receive a distribution from, or were you the grantor of, or transferor to, a

foreign trust? If "Yes," you may have to file Form 3520. See instructions .

X

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.

Attachment Sequence No. 13

Your social security number

PREI	ETHI PANDURANGAN						863-5	7-4443	}	
Par										
	Note: If you are in the business of renting personal proper	ty, use	Schedule	C . See	instru	ctions. If you ar	e an indi	vidual, rep	ort farm	
	rental income or loss from Form 4835 on page 2, line 40.	1 - CI -		0000	2 !				- V	
	Did you make any payments in 2023 that would require you									
В	f "Yes," did you or will you file required Form(s) 1099? .							. <u> </u>	es 🗌 No)
1a	Physical address of each property (street, city, state, ZIF	ode	e)							
Α										
В										
С										
1b	Type of Property 2 For each rental real estate prope	rtv list	ed		Fa	ir Rental	Persor	nal Use	0.07	
	(from list below) above, report the number of fair	Days	Da	ays	QJV					
Α	personal use days. Check the Qu	365								
В	if you meet the requirements to f			В						
С	qualified joint venture. See instru	ctions	5.	С						
Туре	of Property:								•	
1	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	ılties	8	Other (descri	be)			
				•		Propertie	es:			
Incor				Α 7	45.	В			С	
3 4	Rents received	3		/	45.					
	Royalties received	4								
=xpe 5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1 <i>A</i>	25.					
8	Commissions	8		Ι, Ί	20.					
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1 1	23.					
12	Mortgage interest paid to banks, etc. (see instructions)	12			.23.					
13	Other interest	13								
14	Repairs	14		1.8	76.					
15	Supplies	15			12.					
16	Taxes	16								
17	Utilities	17		2,6	84.					
18	Depreciation expense or depletion	18			.99.					
19	Other (list)	19		<u> </u>						
20	Total expenses. Add lines 5 through 19	20		13,4	19.					
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		-12,6	74.					
22	Deductible rental real estate loss after limitation, if any,									
	on Form 8582 (see instructions)	22	(12,67	74.)	()	()
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		745.			
b	Total of all amounts reported on line 4 for all royalty properties.	erties			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	4	,199.			
е	Total of all amounts reported on line 20 for all properties				23e	13	,419.			
24	Income. Add positive amounts shown on line 21. Do not		-				24			
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lin	e 22. E	nter to	tal losses here	25	(12,674	.)
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do no						ו ר			
	Schedule 1 (Form 10/0) line 5. Otherwise, include this ar	malint	in the tot	tal on li	ına /11	on nage 2	0.0	1	_12 67	4

2023 VA760CG Page 1





PREETHI

PANDURANGAN

LILIAN COURT, 1645 INTERN APT 212

MCLEAN VA 22102

SSN - You PANE)	863574443	Vendor ID	1555		XXXXX	\neg
SSN - Spouse							
Fed Adj Gross Income (FAGI)	1.	128874.	Withholding (VA) - You	ı	19A.	7018	
Additions	2.		Withholding (VA) - Spo	ouse	19B.		
Subtotal	3.	128874.	Estimated Payments		20.		
Age Deduction - You	4A.		2022 Overpayment		21.		
Age Deduction - Spouse	4B.		Extension Payments		22.		
Soc Sec & Tier 1 Railroad	5.		Credit - Low-Income of	or EIC	23.		
State Income Tax Overpayment	6.		Credit - Schedule OSC	;	24.		
Subtractions	7.		Credits - Schedule CR		25.		
Subtotal Subtractions	8.		Total Payments / Cred	lits	26.	7018	
Total VA Adj Gross Income (VAGI)	9.	128874.	Tax You Owe		27.		
Itemized Deductions - VA Sch A	10.		Tax Overpayment		28.	379	
Standard Deduction	11.	8000.	Overpayment Credited	to Next Year	29.		
Exemptions	12.	930.	VAC - Virginia 529 / Al	BLE	30.		
Deductions	13.		VAC - Other Contribut	ions	31.		
Subtotal (Deductions & Exemptions	s) 14.	8930.	Addition to Tax, Penalt	y & Interest	32.		
VA Taxable Income	15.	119944.	Sales and Use Tax		33.		
Amount of Tax	16.	6639.	Amount You Owe	0 1 37			
Spouse Tax Adjustment (STA)	17.		Will Pay by Credit/Debit Your Refund	Card N	1	379	
VAGI - Spouse	17A.		Dank Dankan #			0621075	10
Net Amount of Tax	18.	6639.	Bank Routing #		C 70465	0631075	13
L			Bank Account #		/9465	597999	

File by May 1, 2024 Include Page 1, Page 2 and all

supporting 760CG documents.

REV 02/23/24 PRO

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1											
Filing Status, Age	& License I	nformation		Addition	nal Filing Info	ormation					
Filing Status			1	Locality		059					
Federal Head of I	Household			Uninsured & Authorize DN	MAS						
DOB - You		07251	1991	Name or Filing Status Cha	Name or Filing Status Change						
VA Driver's Licen	se ID - You	E62472	2972	Address Change	Address Change						
VA Driver's Licen	se - Iss. Date	- You 04182	182022 VA Return Not Filed Last Year								
Spouse Name (F	iling Status 3	Only)		Dependent on Another's I	Return						
				Farmer / Fisherman / Me	rchant Seaman						
DOB - Spouse				Amended	Amended						
VA Driver's Licen				Reason Code							
VA Driver's Licen	se - Iss. Date	•		Overseas on Due Date							
Exemptions (A) You	1	Exemptions (B) 65 & Over - You		Federal EIC & Amount							
Spouse		65 & Over - Spouse		Deceased Indicator							
Dependents		Blind - You		Form 760C or 760F	Form 760C or 760F						
Total (A)	1	Blind - Spouse		No Sales & Use Tax Due	Indicator	X					
		Total (B)		Obtain Electronic 1099G							
				ID Theft PIN							
		Contact Information									
				t of my (our) knowledge, it is a true, co on provided is for a domestic account							
Signature - You		С	Date	Phone - You		3523287756					
Signature - Spouse _			Date	Phone - Spouse							
Signature - Preparer	SYAM PRIYA E	RAM SAGAR GUPTA TALLAM [Date 030324	Phone - Preparer		6789659522					
	may discuss n	ny/our return with my/our prep		Preparer Information L TAXES LLC	7	P02082703					

245 ROONEY CT

NJ 08816

Page 2 of 2

E BRUNSWICK

2023 Schedule INC/CG

863574443

Report all W-2s, 1099s & VK-1s with VA Withholding

PREETHI

PANDURANGAN



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Γ					┐
863574443	W	7018.	541966544	30541966544F001	131299.

Total VA Withholding SSN VA Withholding 863574443 7018.

Total # of W-2s,1099s & VK-1s

01

You

Spouse

VA-8879 Virginia Department of Taxation

Virginia Submission Identification Number (SID)

Virginia Individual Income Tax e-File Signature Authorization

Tax Year 2023

DO NOT SEND THIS VA-8879 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

Υοι	ır Na	ame															B Your Social Se	curity Number
PRE	ET	HI I	PAND	URANG	AN												863-57-44	143
Spc	ouse	's Na	me															al Security Number
Pai				urn Inf													A Spouse	B Yourself
1.	F	edera	l Adjust	ed Gross	Incom	e (Fo	rm 7600	CG, Lii	ne 1; 76	0PY, I	Line 1,	column	s A & B	; Fo	orm 763, Line	1)		128874.
2.	\	/irginia	Adjust	ed Gross	Incom	e (Fo	rm 760C	CG, Lir	ne 9; 760	PY, L	ine 10,	columr	ns A & B	3; F	orm 763, Line	9)		128874.
3.				ne (Form											,			119944.
4.				e Tax (F														6639.
5.	V	Vithhol	lding (F	orm 760	CG, Lir	ie 19a	a & 19b;	760P	Y, Lines	19a &	19b; F	orm 76	3, Lines	19	a & 19b)			7018.
6.	P	Amoun	t you O	we (Forn	n 760C	G, Lir	ne 35; Fo	orm 76	60PY, Lir	ne 35;	Form 7	'63, Lin	ie 35)					
7.			•	760CG,														379.
Pai				tion of										-				
Dec Retu num filing liabl Virg refu of th sign	Under penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying schedules and statements for the year ending December 31, 2023, and to the best of my knowledge and belief, it is true, correct and complete. I further declare that the information I provided to my Electronic Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security number or individual tax identification number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If I am filing a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Provider to transmit my complete return to Virginia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, the direct deposit of my refund or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.																	
X	Taxpayer's e-File PIN: check one box only I authorize the ERO named below to enter my e-File PIN 7 4 4 4 3 as my signature on my 2023 e-filed Virginia individual income tax return. Do not enter all zeros																	
	_	GLO:	BAL	TAXES	LLC]						.DO E:	rm Nam					
											ginia ind	dividua	l income	e tax	x return. Che Part III below.		only if you are entering	g your own e-File
You	r Sig	gnature	e												Date			
Spo	use	's e-Fi	ile PIN:	check o	ne bo	x only	y		_				_					
	I	autho	rize the	ERO na	med be	elow to	o enter n	ny e-F	ile PIN		Do r	not ent	as my er all ze	_		/ 2023 e-filo	ed Virginia individual in	come tax return.
	_										EF	RO Fir	m Name	9				
															x return. Che Part III below.		only if you are entering	g your own e-File
		s Sign													Dat	te		
Pai	rt III	Ce	rtifica	ation a	nd Au	ther	nticatio	n – l	Practit	ione	r PIN I	Metho	od Onl	у				
ERC	O's E	EFIN/P	PIN: En	ter your	six-digi	t EFIN	I followe	d by y	our five	digit s	elf-sele	cted PI	N. [2	2	2 2 4	9 6 0	8 2 7 1	
indid Han a siç	ERO's EFIN/PIN: Enter your six-digit EFIN followed by your five digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Do not enter all zeros I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2023 Virginia individual income tax return 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 Virginia's publication Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2023). EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.																	
EK(J S C	Signatu	ле <u> </u>												Date	03-0	J 41	