## 8879 Form

(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

Taypayer's rane  MANUISHA REDDY PALLERIA  794-29-956  Social security number 794-29-956  Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.)  Enter whole dollars only on lines 1 through 5.  Note Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1	Submission Identification Number (SID)		
Part II		Social securi	ty number
Part   Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.)			•
Enter whole dollars only on lines 1 through 5.  Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income 2 Total tax 2 6,700. 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099. 3 12, 497. 4 Amount you want refunded to you 5 Amount you want refunded to you 7 Amount you want refunded to you 7 Amount you want refunded to you 8 Amount you want refunded to you 9 Amount you want refunded to the best of my knowdege and belef, it is true correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing, and to the best of my knowdege and belef, 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 returns originate (ERO) for any relayin processing the refunded (I be dated as of any refunded I am plantaled, a lathorize the IS. Treasury and its designated (ERO) do not any refunded I am plantaled seaved and the financial institution account indicated in the tax preparation software for payment of my federal taxes wore on this return and/alogent at 1 seaso standard tax, and the financial institution account indicated in the tax preparation software for payment of the payment, I must the 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 to terminate the authorization. To rev			
Notes Form 1040-SS filter use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income 2 Total tax 2 Total tax 2 Total tax 2 Total tax 3 12, 497. 4 Amount you want refunded to you 5 Amount you want refunded to you 5 Amount you ove  Part III Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your proving).  1 Total	Part I Tax Return Information — Tax Year Ending December 31, 203	23 (Enter year you a	re authorizing.)
1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 12, 497. 4 Amount you want refunded to you 4 3, 797. 5 Amount you want refunded to you 5 Amount you want refunded to you 6 Amount you want refunded to you 7 Amount you want refunded to you 7 Amount you want refunded to you 8 Amount you want refunded to you 8 Amount you want refunded to you 9 Amount you want refunded to the you get and keep a copy of your refund 9 Amount you want refunded to refunde the your want refunded to the your to train a common the your want refunded to the your want to the your yant to the your want to the your want to the your want to the your yant to the yant to the your yant yant to the y	Enter whole dollars only on lines 1 through 5.		
2 Total tax	Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1
A Amount you want refunded to you	· · ·		
Amount you want refunded to you  5 Amount tyou well are funded to you  5 Amount tyou well are funded to you  7 Amount you well  Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)  Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of which your deplay and belief, it is true, correct, and complete. I hurther declare that the amounts in Part I above are the authorist 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 (FRO) 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 resonance of ready 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 with threat (incred belief) entity to the financial institution activation indicated in the processing to the payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution activation indicated in the sector payment of the payment (settlement) data. I also authorizes the financial institutions involved in the processing preparation software for 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 (PfV) below is my signature for 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.    Practitioner PIN Method Returns Only—continue below   Pra			
Amount you owe  Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)  Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and beller, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the locate that 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 or any delay in processing the return or return, and (c) (d) an acknowledgement of receipt or reason for rejection of the transmission (b) the reason or any delay in processing the return or return, and (c) the date of any return or the function of the processing and its designated financial Agent to initiate an ACH electronic funds withdrawal (circet debit) entry to the financial institution account indicated in the tax preparation software for any electronic funds withdrawal (circet debit) entry to the financial institution account indicated in the tax preparation should be entry to the processing of the processing of the processing that the entry to the account. This 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 payment. I should be a contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 payment. I further acknowledge that the personal identification number (Pilly b) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.  Taxpayer's PIN: check one box only  I will enter my PIN as my signature on the income tax return (original or amende			12/13/.
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended). I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended). I am now authorizing or the income tax return (original or amended) I am now authorizing.  I make the control of the transmission, (b) the reason of the control of the transmission, (b) the reason of the control of the transmission, (b) the reason of the control of the transmission, (b) the reason of the control of the transmission, (b) the reason of the control of the transmission, (b) the reason of the original or an original or any delay in processing the return or return, and (c) the date of any refund if applicable, I authorize the U.S. Treasury financial Agent to institution of both 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 and the force or the received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions account in the authorization. To revoke (cancel) at taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. There 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 letter five digits, but don't enter all zeros  I authorize GLOBAL TAXES LLC to enter or generate my PIN to enter or generate my PIN and your return is filed using the	•		5/1311
Under penalties of perjuny, 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 whore More and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are transor 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 reasons 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 withdraval (gired debit) entry to the financial institution to debit the entry to this account indicated in 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 unthorization is to remain in full force and effect until 1 notify the U.S. Treasury Financial Agent to terminate that 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 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. The payment of my federal taxes are to remain in full force and effect until 1 notify the U.S. Treasury framental flat the 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 of the electronic payment of taxes to receive confidential information necessary to an account of taxes to receive confidential information necessary to an account of the electronic flat taxes are	Dort II Toyngyor Declaration and Signature Authorization (Pagure your		
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Taxpayer's PIN: check one box only    I authorize   GLOBAL TAXES   LC   ERO firm name   Signature on the income tax return (original or amended) I am now authorizing.   I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only   if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.    Spouse's PIN: check one box only   Date   ERO firm name   ERO firm name   Signature on the income tax return (original or amended) I am now authorizing. Check this box only   I authorize   ERO firm name   Signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only   if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III   below.    Spouse's signature   Practitioner PIN Method Returns Only—continue below   Part III   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   Part   Part	to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reafor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I auth Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution a payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancer business days prior to the payment (settlement) date. I also authorize the financial institutions involved to the payment (settlement) date. I also authorize the financial institutions involved to the payment (settlement) date. I also authorize the financial institutions involved to the payment (settlement) date. I also authorize the financial institutions involved to the payment (settlement) date. I also authorize the financial institutions involved to the payment (settlement) below is my signature for the income tax return (original or an expectation of the payment (PIN) below is my signature for the income tax return (original or an expectation of the payment (PIN) below is my signature for the income tax return (original or an expectation of the payment (PIN) below is my signature for the income tax return (original or an expectation of the payment (PIN) below is my signature for the income tax return (original or an expectation of the payment (PIN) below is my signature for the income tax return (original or an expectation of the payment (PIN) below is my signature for the income tax return (original or an expectation of the payment (PIN) below is my signature for the income tax return (original or an expectation of the payment (PIN) below is my signature for the income tax return (original or an expectation of the payment (PIN) below is my signature for the income tax return (original or an expectation of the paym	son for rejection of the trorize the U.S. Treasury ascount indicated in the troial institution to debit the treatment of terminate the authorized lation requests must be alved in the processing of the treatment. I further the processing of the treatment of the payment. I further treatment of the payment.	ransmission, (b) the reason and its designated Financial ax preparation software for entry to this account. This ation. To revoke (cancel) are received no later than 2 the electronic payment of the acknowledge that the
I authorize GLOBAL TAXES LLC  to enter or generate my PIN			
Spouse's PIN: check one box only    a will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.    Spouse's PIN: check one box only		ganarata my BINI 9	
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 I as my signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.  Spouse's 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.    Don't enter all zeros	ERO firm name	En En	ter five digits, but
Spouse's PIN: check one box only	I will enter my PIN as my signature on the income tax return (original or amend if you are entering your own PIN and your return is filed using the Practitioner		
I authorize	Your signature ►	Date ▶	
I authorize	Spouse's PIN: check one box only		
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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 ▶ 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.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶			
Spouse's signature   Practitioner PIN Method Returns Only—continue below  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.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature   Date   ERO Must Retain This Form — See Instructions	signature on the income tax return (original or amended) I am now authorizing.	do	n't enter all zeros
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.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions	if you are entering your own PIN and your return is filed using the Practitioner		
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Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions	Part III Certification and Authentication — Practitioner PIN Method Only	1	
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 <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income Tax Returns.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions	<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.		
ERO Must Retain This Form — See Instructions	authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that	I am submitting this retu	irn in accordance with the
	ERO's signature ▶	Date ►	

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

20**23** OMB No. 1545-0074

						01112 1101 1010		O, D	0 1101 111	no or otapio in tino opacor
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20	Se	ee sep	arate instructions.
Your first name	and m	iddle initial	Last na	ame				Yo	our soc	cial security number
MANJUSHA REDDY PALLERLA				7	794	29   9560				
If joint return, s	pouse's	s first name and middle initial	Last na	ame				Sp	ouse's	s social security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.			Apt. no.	Pr	esiden	ntial Election Campaign
		VEN PARKWAY					5331			ere if you, or your
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Sta	te	ZIP code			f filing jointly, want \$3 this fund. Checking a
LEWISVI					TX		75056	bo	x belo	w will not change
Foreign countr	y name			Foreign province/state/county Fo			Foreign postal c	preign postal code your ta		or refund.
		7 0. 1					1 11/1101	n\		∐ You ☐ Spouse
Filing Status	s ⊬	Single		:\		☐ Head of h	ousehold (HOI	1)		
Check only		Married filing jointly (even if only or Married filing separately (MFS)	ne nad	income)		Qualifying	surviving spor	100 (OS	20)	
one box.	L If √	ou checked the MFS box, enter the	nama	of your english. If you	ı cho					d'e name if the
		alifying person is a child but not you			u Cile	cked the HO	i di Qoo box,	enter ti	ie ci iii	a s name ii tile
Digital		ny time during 2023, did you: (a) reco					-			□ v ▼ N-
Assets		nange, or otherwise dispose of a digi					et)? (See Instru	ctions.)	)	☐ Yes ⊠ No
Standard Deduction	_	neone can claim:	•			a dependent				
				u were a duar-status	allell					
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind Spo	ouse	: Was bor	n before Janua	ary 2, 1	959	☐ Is blind
Dependent	<b>s</b> (see	instructions):		(2) Social security	,	(3) Relationsh	iib İ.,			ies for (see instructions):
If more	(1) F	irst name Last name		number		to you	Child t	ax credi	t (	Credit for other dependents
than four dependents,								<u> </u>		
see instruction	s									
and check	, —							<del> </del>		
here L	10	Total amount from Form(s) W-2, b	ov 1 (o	an instructions)					110	83,754.
Income	1a b	Household employee wages not re	•	•					1a 1b	03,734.
Attach Form(s)		Tip income not reported on line 1a	-						1c	
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep							1d	
W-2G and	e	Taxable dependent care benefits f		` ,					1e	
1099-R if tax was withheld.	f	Employer-provided adoption bene							1f	
If you did not	g			•					1g	
get a Form W-2, see	h	Other earned income (see instructi							1h	0.
instructions.	i	Nontaxable combat pay election (s	see inst	tructions)		1i				
	z	Add lines 1a through 1h							1z	83 <b>,</b> 754.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interest	t		2b	
if required.	3a	Qualified dividends	3a		<b>b</b> 0	rdinary divide	nds		3b	
Nam dand	4a	IRA distributions	4a		<b>b</b> Ta	axable amoun	t		4b	
Standard Deduction for—	5a	Pensions and annuities	5a		b T	axable amoun	t		5b	
Single or Married filing	6a	,	6a			axable amoun	t		6b	
separately,	С	If you elect to use the lump-sum e		·	,	,		. 📙		4
\$13,850 Married filing	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7	0.001
jointly or Qualifying	8		Additional income from Schedule 1, line 10						8	-9,031.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							9	74,723.
\$27,700 Head of	10	Adjustments to income from Sche							10	74 500
household, \$20,800	11	Subtract line 10 from line 9. This is	-						11	74,723.
If you checked	12	Standard deduction or itemized				 E A			12	13,850.
any box under Standard	13	Qualified business income deduction Add lines 12 and 13	ion iror	II FUIIII 8995 OF FORM	1 099	о-A			13	12 050
Deduction, see instructions.	14 15	Subtract line 14 from line 11. If zer	on or loa		 (Our •	avahle incom			14	13,850. 60,873.
	13	Capitali in the 14 HOLLI III to 11. II Zel	J 01 168	, 50, 51115 IS y	our I	avanic ilicali			10	1 00,073.

Form 1040 (2023	3)			Page
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	8,700.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	8,700.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	8,700.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	8,700.
ayments	25	Federal income tax withheld from:		
	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	12,497.
ou have a	26	2023 estimated tax payments and amount applied from 2022 return	26	
ialifying child, tach Sch. EIC.	27	Earned income credit (EIC)		
lacii Scii. Elc.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	12,497.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	3,797.
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	3,797.
irect deposit?	b	Routing number 1 2 1 0 0 0 3 5 8 c Type: ▼ Checking □ Savings		
see instructions.	d	Account number 3 2 5 0 8 5 7 3 4 5 8 4		
	36	Amount of line 34 you want applied to your 2024 estimated tax 36		
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .		
∕ou Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
hird Party		you want to allow another person to discuss this return with the IRS? See structions	nelow.	X No
Designee		signee's Phone Personal identities		<u>ry</u> ITO
	nar		icalion	

Joint return?
See instructions.
Keep a copy for your records.

Your signature

Date
Your occupation
SOFTWARE DEVELOPER

Sopouse's signature. If a joint return, both must sign.

Date
Sopouse's occupation

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Spouse's occupation

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. (619) 200-5094

Email address
MANJUSHAPALLERLA11@GMAIL.COM

Preparer's name Preparer's signature Date PTIN Check if: **Paid** Self-employed SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/09/2024 P02082703 **Preparer** Phone no. (678) 965-9522 GLOBAL TAXES LLC Firm's name **Use Only** 245 ROONEY CT E BRUNSWICK NJ 08816 84-3171965 Firm's EIN Firm's address

### 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

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
MANJUSHA REDDY PALLERLA

Your social security number
794-29-9560

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	ach Schedule E .	5	-9,031.
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	_	
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m	4	
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:			
_	Title of the control	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter			0 001
	1040, 1040-SR, or 1040-NR, line 8		10	-9,031.

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-b	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			
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	The state of the s			
		24c	-	
d		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		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	· · · · · · · · · · · · · · · · · · ·	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
		24k		
Z	Other adjustments. List type and amount:			
		24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .			
	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 Attachment

Department of the Treasury Go to www.irs.gov/ScheduleE for instructions and the latest information. Internal Revenue Service Sequence No. 13 Name(s) shown on return Your social security number 794-29-9560 MANJUSHA REDDY PALLERLA Income or Loss From Rental Real Estate and Royalties Part I Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . If "Yes," did you or will you file required Form(s) 1099? В 1a Physical address of each property (street, city, state, ZIP code) PRAGATHI NAGAR HYDERABAD TELANGANA IN 500090 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Days **Days** personal use days. Check the QJV box only A Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. C C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** В C Α Income: Rents received 987. 3 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 1,021. Cleaning and maintenance. 7 7 8 Commissions 8 9 9 Insurance . . . . . 10 Legal and other professional fees 40

10	Legal and other professional fees	10				
11	Management fees	11	1,1	95.		
12	Mortgage interest paid to banks, etc. (see instructions)	12				
13	Other interest	13				
14	Repairs	14	3,1	56.		
15	Supplies	15	2,5	46.		
16	Taxes	16				
17	Utilities	17	2,1	00.		
18	Depreciation expense or depletion	18				
19	Other (list)	19				
20	Total expenses. Add lines 5 through 19	20	10,0	18.		
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	-9,0	31.		
22	Deductible rental real estate loss after limitation, if any,					
	on Form 8582 (see instructions)	22	9,03	1.)	( )	( )
23a	Total of all amounts reported on line 3 for all rental proper	ties		23a	987.	
b	Total of all amounts reported on line 4 for all royalty prope	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		
е	Total of all amounts reported on line 20 for all properties			23e	10,018.	
24	Income. Add positive amounts shown on line 21. Do not	inclu	de any losses		24	

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

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 ...

25

26

BΔΔ

25

9,031.

-9,031.