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)

Taxpayer's name		Social security n	umber
ANUDEEP DALE		790-47-0	626
Spouse's name		Spouse's social	security number
Part I Tax Return Information – Tax Year Ending December 31	2023 (Enter	year you are	authorizing)
Enter whole dollars only on lines 1 through 5.	, 2023 (Entor	your you are	ddirion2ing.)
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1 Adjusted gross income			<b>1</b> 69,399.
<b>2</b> Total tax			<b>2</b> 7,523.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			<b>3</b> 13,112.
4 Amount you want refunded to you		🗌	<b>4</b> 5,589.
<b>5</b> Amount you owe		🗌	5
Part II Taxpayer Declaration and Signature Authorization (Be su	ire you get and k	eep a copy o	of your return)

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

GLOBAL TAXES	LLC	to enter or generate my PIN

Ì		er fiv n't er				as
	7	0	6	2	6	

my

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.

Your signature

Date

Spouse's	PIN:	check	one	box	only	
----------	------	-------	-----	-----	------	--

I authorize

X I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

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 sig	nature Da	ate 🕨				 			
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III (	Certification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/	<b>PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		 0 all zer	 2	7 1	L

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 🕨	
D	ERO Must Retain This F on't Submit This Form to the		
For Denemory's Deduction Act No.	ing and warm tow wathing instructions		Earm 8879 (Bay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

For the year Jar	. 1–Dec	2. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20		See ser	oarate inst	tructions.
Your first name			Last r							cial securi	
ANUDEEP	ana m		DAL							47 0	-
	oouse's	s first name and middle initial	Last r								o∠o curity numbe
n john rotaini, o			Laot						opouloo		
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.			Apt. no.		Preside	ntial Electi	on Campaigr
6118 SOU	лтн ч	JOLIE CT								nere if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete	spaces below.	Stat	te	ZIP code				tly, want \$3
SAN ANTO	ONIO				TX	X I	78240		•	ow will not	Checking a change
Foreign country	name			Foreign province/state/	count	.y	Foreign postal			or refund.	•
										You	Spouse
Filing Status	; 🛛	Single				Head of ho	ousehold (HO	H)			
Check only		Married filing jointly (even if only o	ne had	l income)		_					
one box.		Married filing separately (MFS)					surviving spo		,		
		ou checked the MFS box, enter the			u che	ecked the HOH	or QSS box,	enter	the chi	ld's name	if the
	qu	alifying person is a child but not you	ur depe	endent:							
Digital	At ar	ny time during 2023, did you: (a) rec	eive (a	s a reward, award, or	payn	nent for proper	ty or services	s); or (	b) sell,		
Assets	exch	hange, or otherwise dispose of a dig	ital ass	set (or a financial inter	est in	n a digital asset	t)? (See instru	uction	s.)	Ves	🗙 No
Standard	Som	<b>eone can claim:</b> 🗌 You as a de	epende	nt 🗌 Your spous	e as a	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a dual-status	alien						
Age/Blindnes	You:	: 🗌 Were born before January 2, 1	959	Are blind Spo	ouse:	: 🗌 Was borr	n before Janu	arv 2	1959	🗌 ls bl	ind
Dependent				(2) Social security		(3) Relationshi	(A) Cheele				instructions)
•	•	irst name Last name		number	′	to you		tax cre	· · ·		her dependents
If more than four											
dependents,								Π			
see instructions and check	s ——										
here											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instructions)					1a		83,967.
	b	Household employee wages not re	eporte	d on Form(s) W-2.					1b		
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	a (see i	nstructions)					1c	:	
attach Forms	d	Medicaid waiver payments not rep	oorted	on Form(s) W-2 (see i	nstru	ctions)			1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	from Fo	orm 2441, line 26					1e		
was withheld.	f	Employer-provided adoption bene	efits fro	m Form 8839, line 29					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	ions)						1h		0.
instructions.	i	Nontaxable combat pay election (	see ins	structions)		<b>1</b> i					
	z	Add lines 1a through 1h	· ;						1z		83,967.
Attach Sch. B	2a	' –	2a			axable interest			2b		
if required.	<u>3a</u>		3a			rdinary dividen			3b		
Standard	4a		4a			axable amount			4b		
Deduction for –	5a		5a			axable amount		• •	5b		
Single or Married filing	6a	,	6a			axable amount		• -	6b		
separately,	_c	If you elect to use the lump-sum e						• L			
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche						. L			14 500
jointly or Qualifying	8	Additional income from Schedule						• •	8		14,568.
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						• •	9		69,399.
Head of	10	Adjustments to income from Sche						• •	10		<u> </u>
household, \$20,800	11	Subtract line 10 from line 9. This is	-						11		<u>69,399.</u> 12.050
If you checked any box under	12	Standard deduction or itemized				 5 A			12		13,850.
Standard	13 14	Qualified business income deduct				5-А			13		13 050
Deduction, see instructions.	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer		$\cdot$		avable incom	• • • •	• •	14		13,850. 55,549.
	10			ss, enter -0 This is y		avanie incom	<u>e</u>	• •	15		JJ,J43.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	3)							Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3	10	<b>6</b> 7,523.
Credits	17	Amount from Schedule 2, lin	e3				1	7
	18	Add lines 16 and 17					18	<b>B</b> 7,523.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		19	9
	20	Amount from Schedule 3, lin	e8				20	D
	21	Add lines 19 and 20					2	1
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			2	<b>2</b> 7,523.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		2	<b>3</b> 0.
	24	Add lines 22 and 23. This is	your total tax				24	<b>4</b> 7,523.
Payments	25	Federal income tax withheld						
<b>,</b>	а	Form(s) W-2				<b>25a</b> 13	,112.	
	b	Form(s) 1099				25b		
	с	Other forms (see instructions	s)			25c		
	d	Add lines 25a through 25c	,				25	id 13,112.
If you have a	26	2023 estimated tax payment					20	
qualifying child,	27	Earned income credit (EIC)				27		
attach Sch. EIC.	28	Additional child tax credit from				28		
	29	American opportunity credit				29		
	30	Reserved for future use .				30		
	31	Amount from Schedule 3, lin				31		
	32	Add lines 27, 28, 29, and 31.				-	3	2
	33	Add lines 25d, 26, and 32. T	•		-			10.110
Refund	34	If line 33 is more than line 24					34	
nerana	35a	Amount of line 34 you want				•		
Direct deposit?	b	Routing number 2 5 4					Savings	
See instructions.	ď	Account number 6 7 8					Jarnigo	
	36	Amount of line 34 you want a			ed tax	36		
Amount	37	Subtract line 33 from line 24	•• •					
You Owe	0/	For details on how to pay, ge					37	7
	38	Estimated tax penalty (see in				38		
Third Party		you want to allow another	,					
Designee		structions	•				mplete belov	w. 🔀 No
	De	signee's		Phone			nal identificatio	on
	nai			no.			er (PIN)	
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com						
Here			piete. Declaration	、				, 0
	Yo	ur signature		Date	Your occupation			sent you an Identity n PIN, enter it here
Joint return?					SOFTWARE 1	DEVELOPER	(see inst.)	
See instructions.	Sp	ouse's signature. If a joint return, <b>k</b>	ooth must sign.	Date	Spouse's occupat		If the IRS	sent your spouse an
Keep a copy for	- 1-						Identity P	rotection PIN, enter it here
your records.							(see inst.)	
	Ph	one no. (703) 343-667	6	Email address	anudeep.da	le@gmail.co	m	
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	02/10/2024	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	N 84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 02/05/24 PRO		Form <b>1040</b> (2023)

SCHEDULE	1
(Form 1040)	

ANUDEEP DALE

# 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 20

Attachment Sequence No. **01** 

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security	number
790-47-0626	

## Part 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. Attac	h Schedule E	5	-14,568.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	a (		
b		b		
С	Cancellation of debt	c		
d		d (		
е		e		
f		Bf		
g	Alaska Permanent Fund dividends	g		
ĥ		ĥ		
i	Prizes and awards	Bi		
j	Activity not engaged in for profit income	Bj		
k		k		
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	31		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	m		
n	Section 951(a) inclusion (see instructions)	n		
ο	Section 951A(a) inclusion (see instructions)	0		
р	Section 461(I) excess business loss adjustment	р		
q	Taxable distributions from an ABLE account (see instructions) 8	q		
r	Scholarship and fellowship grants not reported on Form W-2	Br		
S	Nontaxable amount of Medicaid waiver payments included on Form			
		s (		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	Bt		
u	Wages earned while incarcerated	u		
z	Other income. List type and amount:			
		z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter h			
	1040, 1040-SR, or 1040-NR, line 8		10	-14,568.
or Pa	nerwork Reduction Act Notice, see your tay return instructions		Sahadul	o 1 (Eorm 1040) 2023

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 20

1	Educator expenses					11	
2	Certain business expenses of reservists, performing artists, and fee				nont		
2	officials. Attach Form 2106	-Dasi	s go	venin	lent	12	
3	Health savings account deduction. Attach Form 8889	• •	• •	•••	•	13	
4	Moving expenses for members of the Armed Forces. Attach Form 3903					14	
- 5	Deductible part of self-employment tax. Attach Schedule SE					15	
6	Self-employed SEP, SIMPLE, and qualified plans					16	
7	Self-employed bealth insurance deduction					17	
8	Penalty on early withdrawal of savings					18	
9a						19a	
b	Recipient's SSN						
C	Date of original divorce or separation agreement (see instructions):					00	
20	IRA deduction					20	
1	Student loan interest deduction					21	
2	Reserved for future use					22	
3	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		24d					
е	Repayment of supplemental unemployment benefits under the Trade						
		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	Housing deduction from Form 2555	24j					
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form						
		24k					
z	Other adjustments. List type and amount:						
		24z					
5	Total other adjustments. Add lines 24a through 24z					25	
6	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b>				don		
-	Form 1040, 1040-SR, or 1040-NR, line 10					26	

SCHEDULE	Ε
(Form 1040)	

L

### Supplemental Income and Loss

OMB No. 1545-0074

Cuppiono														
(Form	Form 1040) (From rental real estate, royalties, partnershi					hips, S corporations, estates, trusts, REMICs, etc.)								
						, 1040-SR, 1040-NR, or 1041. or instructions and the latest information.								
Internal														
Name(s	) shown on return								Your socia	al security r	umber			
ANUDEEP DALE									790-4	7-0626				
Part			s From Rental Real Estate a											
	Note: If yo	ou are in t	the business of renting personal propersonal propersonal properson s from <b>Form 4835</b> on page 2, line 40	erty, use	Schedul	e C. See	instructions.	lf you	are an indiv	/idual, repo	ort farm			
<b>A</b> [			ents in 2023 that would require yo		Form(s)	10992 5	ee instructio	ากร			s X No			
			ou file required Form(s) 1099?											
 1a			each property (street, city, state, Z											
		ess 01 e	ach property (street, city, state, z	IF COU	e)									
	IN													
<u> </u>														
<u>C</u>														
1b	Type of Prope (from list below							Fair Rental		Personal Use				
•	`	<i>w</i> )	above, report the number of fai personal use days. Check the C		boy only				Days					
<u>А</u> В	3		if you meet the requirements to			A B	31	55		0				
 С			qualified joint venture. See instr	ructions	s.	C								
	of Property:					U								
	Single Family R	esidence	e 3 Vacation/Short-Term Re	ntal	5 Land	4	7 Self-F	Pontal						
	Multi-Family Re			III.ai	6 Roya									
~	Watti-r army rie	5100100	4 Commercial			antes	0 01161	lacar	ribe)					
							P	ies:						
Incon						A E			C		С			
3				3		6	42.							
4	Royalties rece	ived		4										
Exper														
5	0			5										
6			structions)	6										
7			ance	7		2,8	36.							
8				8										
9				9										
10	•	•	ssional fees	-	10									
11					<b>11</b> 2,796.									
12		•	to banks, etc. (see instructions)	12										
13				13		1 0	~ ~ ~							
14	Repairs			14		1,9	20.							

14	Repairs	14	1,9	20.				
15	Supplies	15	2,5	13.				
16	Taxes	16						
17	Utilities	17	2,6	574.				
18	Depreciation expense or depletion	18	<b>18</b> 2,471.					
19	Other (list)	19						
20	Total expenses. Add lines 5 through 19	20	15,210.					
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 <b>Form 6198</b>	21	-14,5	68.				
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)							
23a	Total of all amounts reported on line 3 for all rental proper	otal of all amounts reported on line 3 for all rental properties <b>23a</b>						
b	Total of all amounts reported on line 4 for all royalty prope							
С	Total of all amounts reported on line 12 for all properties		<b>23c</b>					
d	Total of all amounts reported on line 18 for all properties			23d	2,4	71.		
е	Total of all amounts reported on line 20 for all properties			23e	15,2	10.		
24	Income. Add positive amounts shown on line 21. Do not	inclu	de any losses			24		
25	Losses. Add royalty losses from line 21 and rental real estate	Id royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here						
26	Total rental real estate and royalty income or (loss). O here. If Parts II, III, and IV, and line 40 on page 2 do not	арр	ly to you, also e	enter th	nis amount on			
	Schedule 1 (Form 1040), line 5. Otherwise, include this an	nount	t in the total on li	ine 41	on page 2 .	26	-14,568	