## 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

Internal Revenue Service Add to WWW.IIS.goV/1 of Moors for the latest mornitations		
Submission Identification Number (SID)		
Taxpayer's name	Social security	number
SAI KUMAR ANKULA	739-92-	0027
Spouse's name		al security number
	nter year you ar	e 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.	ı	1
1 Adjusted gross income	H	<b>1</b> 77,418.
2 Total tax		<b>2</b> 9,294.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	F	<b>3</b> 11,656.
4 Amount you want refunded to you	-	4 2,362.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get as Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amer		
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason fo for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this 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 term payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended the transport of the payment of the payment of the income tax return (original or amended the transport of the payment of the paym	he U.S. Treasury an t indicated in the tax itution to debit the inate the authorizat requests must be the processing of he payment. I furth	d its designated Financia x preparation software for entry to this account. This tion. To revoke (cancel) a received no later than a the electronic payment of the acknowledge that the
Electronic Funds Withdrawal Consent.		
Taxpayer's PIN: check one box only	2	0 0 2 7
X I authorize GLOBAL TAXES LLC to enter or gener	ř Ente	er five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don	't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN n below.		
Your signature ▶ Date	<b>&gt;</b>	
Spauge's DINL shock and havenly		
Spouse's PIN: check one box only		
I authorize to enter or gener		as my
signature on the income tax return (original or amended) I am now authorizing.		er five digits, but 't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN n below.		
Spouse's signature ▶ Date	_	
Spouse's signature ► Date  Practitioner PIN Method Returns Only—continue be		
Part III Certification and Authentication — Practitioner PIN Method Only	10 44	
Oerunication and Address action — Fractitioner Fire Wethod Only		
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 2 4 9 6  Don't ente	.   •   •   -   .   -
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incompation authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am strequirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers	submitting this retur	n in accordance with the
ERO's signature ▶ Date	•	
ERO Must Retain This Form — See Instructions	•	

Don't Submit This Form to the IRS Unless Requested To Do So

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

2023

OMB No. 1545-007

IRS Use Only—Do not write or stable in this space

For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, en	ding	0.11.2 11.01 10.10	, 20	Sec	senar	ate instructions.
Your first name	and m	iddle initial	Last na							I security number
SAI KUMAR ANKULA							92   0027			
If joint return, spouse's first name and middle initial Last r										ocial security number
jo	,pouco									
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.			Apt. no.	Pres	sidentia	al Election Campaigr
332 BURI	NING	BROOK DR								e if you, or your
		ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	te	ZIP code			iling jointly, want \$3 is fund. Checking a
O FALLO	N				MC	)	63366			will not change
Foreign countr	y name			Foreign province/state	/count	ty	Foreign postal co			refund.
										You Spouse
Filing Status	s X	Single				☐ Head of h	ousehold (HOH	)		
Check only		Married filing jointly (even if only o	ne had	income)						
one box.		Married filing separately (MFS)				☐ Qualifying	surviving spou	se (QSS	S)	
	If y	ou checked the MFS box, enter the	name o	of your spouse. If yo	u che	ecked the HOF	l or QSS box, e	nter the	child's	s name if the
	qu	alifying person is a child but not you	ır depei	ndent:						
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward, award, or	pavr	ment for prope	rtv or services):	or (b) s	ell.	
Assets		nange, or otherwise dispose of a dig								<b>Yes</b> ⊠ No
Standard	Som	neone can claim:	penden	t Your spous	se as	a dependent				
Deduction		Spouse itemizes on a separate retur	n or you	u were a dual-status	alien					
Ago/Blindnes	e Vou	: Were born before January 2, 1	050 [	Are blind Sp	ouse	· Mac box	n before Janua	n/2 10	50 [	ls blind
			909 [	<del>-</del>			(4) Chook the	•		for (see instructions):
Dependent		instructions): irst name Last name		(2) Social securit number	У	(3) Relationsh to you	''P	x credit	1	edit for other dependents
If more than four	(1)1	iist name Last name		namber		to you				
dependents,										
see instruction	s						<u> </u>	<u></u> 7		
and check here [	1									
	 1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions)					1a	85 <b>,</b> 229.
Income	b	Household employee wages not re	•	•					1b	00,223.
Attach Form(s)	c	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	Wages from Form 8919, line 6 .						†	1g	
get a Form	h	Other earned income (see instruct						[	1h	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		1i		Ī		
	z	Add lines 1a through 1h							1z	85 <b>,</b> 229.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	t	[	2b	
if required.	3a	Qualified dividends	3a		<b>b</b> 0	ordinary divide	nds	[	3b	
	4a	IRA distributions	4a		b T	axable amoun	t	[	4b	
Standard Deduction for —	5a	Pensions and annuities	5a		b T	axable amoun	t	[	5b	
Single or	6a	Social security benefits	6a		b T	axable amoun	t	[	6b	
Married filing separately,	С	If you elect to use the lump-sum e	lection	method, check here	(see	instructions)		. 🗆		
\$13,850	7	Capital gain or (loss). Attach Sche	dule D i	f required. If not req	uired	, check here		. 🗆	7	
Married filing jointly or	8	Additional income from Schedule	1, line 1	0					8	-7,811.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is your <b>total in</b>	come	e			9	77,418.
\$27,700 Head of	10	Adjustments to income from Sche	dule 1,	line 26					10	
household,	11	Subtract line 10 from line 9. This is	-	-					11	77,418.
\$20,800 If you checked	12	Standard deduction or itemized							12	13,850.
any box under Standard	13	Qualified business income deduct	ion fron	n Form 8995 or Forn	n 899	5-A			13	
Deduction,	14	Add lines 12 and 13							14	13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter -0 This is	your <b>1</b>	taxable incom	ne		15	63 <b>,</b> 568.

orm 1040 (2020		<b>-</b> ( ) , " ) O   1" ( - <b>-</b> ( ) ,   <b>-</b> ( ) - <b>-</b> ( )   <b>-</b> ( )	10	Page
ax and	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🗌 4972 3 🗌	16	9,294
redits	17	Amount from Schedule 2, line 3	17	0.001
	18	Add lines 16 and 17	18	9,294
	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	0.004
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	9,294
	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	9,294
ayments	25	Federal income tax withheld from:		
	а	Form(s) W-2	-	
	b	Form(s) 1099	4	
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	11,656
ou have a	26	2023 estimated tax payments and amount applied from 2022 return	26	
llifying child, ich Sch. EIC. 1	27	Earned income credit (EIC)		
	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 <b>total other payments and refundable credits</b>	32	
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	11,656
efund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	2,362
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	2,362
rect deposit?	b	Routing number 1 0 1 1 0 0 0 4 5 c Type: ☐ Checking ☒ Savings		
e instructions.	d	Account number 5 1 8 0 0 6 3 9 4 5 9 0		
	36	Amount of line 34 you want <b>applied to your 2024 estimated tax 36</b>		
mount ou Owe	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .  For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37	
	38	Estimated tax penalty (see instructions)		
hird Party esignee		you want to allow another person to discuss this return with the IRS? See tructions	elow.	⊠ No
	De: nar	signee's Phone Personal identif ne no. number (PIN)	ication	

	Phone no.	(785) 770-5992	2	Email address	SKANKULA.	K@GMAIL.COM	M		
Date	Preparer's name		Preparer's signature			Date	PTIN		Check if:
Paid	SYAM PRIYA RAM	SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAN	1 01/12/2024	P0	2082703	Self-employed
Preparer Use Only	Firm's name	GLOBAL TAX	KES LLC					Phone no.	(678) 965-9522
Use Offig	Firm's address	245 ROONE	CT E BR	UNSWICK N	J 08816			Firm's EIN	84-3171965
Go to www.irs.gov	//Form1040 for ins	structions and the late	st information.		BAA	REV 01/08/24 PRO			Form <b>1040</b> (2023)

Your occupation

Spouse's occupation

IT SOFTWARE ENGINEER

Date

Date

Your signature

Spouse's signature. If a joint return,  $\boldsymbol{both}$  must sign.

Joint return?

See instructions.

Keep a copy for your records.

If the IRS sent you an Identity Protection PIN, enter it here

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

(see inst.)

### 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
SAI KUMAR ANKULA

Your social security number
739-92-0027

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
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	ch Schedule E .	5	-7,811.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (	)	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (	)	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (	<u>)</u>	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter			_
	1040, 1040-SR, or 1040-NR, line 8		10	-7,811.

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-basis govern	ment		
	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	t t	22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
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)			
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			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
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> . Enter here are			
	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

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

SAI	KUMAR ANKULA						739-9	2-0027	
Par	Income or Loss From Rental Real Estate at Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	erty, use <b>S</b> o		e C. See	instru	ctions. If you	are an indiv	vidual, rep	ort farm
Α	Did you make any payments in 2023 that would require you		rm(s)	1099? S	ee ins	tructions .			s 🛚 No
	If "Yes," did you or will you file required Form(s) 1099?								
1a	Physical address of each property (street, city, state, Z								
A	PLOT NO:1-1-267/23 SRINIVAS NAGAR, KAP		RAO	NACAI	S HA.	DERABAD	TELANCI	ΔΝΔ ΤΝ	500062
B		101 11 0	1010	11/10/11	\ III.		1 11111101	111/1 111	300002
1b	Type of Property (from list below)  2 For each rental real estate propabove, report the number of fair	r rental an	id		Fair Rental Days			Personal Use Days	
A	gersonal use days. Check the C if you meet the requirements to	JJV box o	nly	Α		365		0	
В	qualified joint venture. See instr	ructions.		В					
C	i i			С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Removed 4 Commercial		5 Land 6 Roya			Self-Rental Other (desc			
						Propert	ies:		
Incor				Α	20	В			С
3 4	Rents received	3 4		٥.	20.				
	Royalties received	4							
5	<b>nses:</b> Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		6	58.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,0	59.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		1,0	55.				
13	Other interest	13							
14	Repairs	14		1,6	58.				
15	Supplies	15		2,4					
16	Taxes	16							
17	Utilities	17		2,5	41.				
18	Depreciation expense or depletion	18							
19	Other (list)	40							
20	Total expenses. Add lines 5 through 19	20		8,3	31.				
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>			-7 <b>,</b> 8	11				
22	Deductible rental real estate loss after limitation, if any,			,, , ,					
	on Form 8582 (see instructions)	22 (		7,81		(	<u> </u>	(	)
23a	Total of all amounts reported on line 3 for all rental prop				23a 23b		JZU.		
b	Total of all amounts reported on line 4 for all royalty proportion of all amounts reported on line 12 for all properties				23c				
q	Total of all amounts reported on line 12 for all properties  Total of all amounts reported on line 18 for all properties				23c 23d				
d	Total of all amounts reported on line 18 for all properties  Total of all amounts reported on line 20 for all properties				23a 23e		3,331.		
e 24	Income. Add positive amounts shown on line 21. <b>Do no</b>				23e		0.4		
2 <del>4</del> 25	Losses. Add royalty losses from line 21 and rental real esta		-					(	7,811.)
26	Total rental real estate and royalty income or (loss).							\	,, o <sub>±</sub> ±. )
20	here. If Parts II, III, and IV, and line 40 on page 2 do no								
	Schedule 1 (Form 1040), line 5. Otherwise, include this a						26		-7,811.