Form **8879**

(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	nission Identification Number (SID)			
Taxpay	yer's name	Social securit	y number	
SRA	-7170			
Spouse	ial security number			
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Ent.	 er year you a	re authorizing.)	
	whole dollars only on lines 1 through 5.	, ,	3 /	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1 6 8,	,322.
2	Total tax		2 7,	,292.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 10,	,500.
4	Amount you want refunded to you		4 3,	208.
5	Amount you owe		5	
Par	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of your retur	'n)
return to sen for an Agent payme author payme busine taxes persor	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I ab (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans and my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for my delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in ent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminatent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recess 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 nal identification number (PIN) below is my signature for the income tax return (original or amended) I onic Funds Withdrawal Consent.	mitter, or electro- ejection of the tr U.S. Treasury ar dicated in the ta tion to debit the atte the authoriza quests must be the processing of payment. I furt	anic return originate ansmission, (b) the dist designated for any preparation soft entry to this according. To revoke (control of the electronic payher acknowledge)	or (ERO) e reason Financial tware for unt. This cancel) a r than 2 yment of that the
Taxn	ayer's PIN: check one box only			
	▼ I authorize GLOBAL TAXES LLC to enter or generate	e mv PIN	7 1 7 0	as my
_	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, but i't enter all zeros	,
	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 me below.			
Your	signature ▶ Date ▶			
Snou	ise's PIN: check one box only			
Spou		a my DINI		00 1001
L	I authorize to enter or generate to enter or generate	,	er five digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.		't enter all zeros	
	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 me below.			
Spou	se's signature ▶ Date ▶			
	Practitioner PIN Method Returns Only—continue below	w		
Part	Certification and Authentication — Practitioner PIN Method Only			
ERO'	's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 0 8 2 7 er all zeros	1
autho	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subtements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	mitting this retu	rn in accordance	
EDO,	s signature ▶ Date ▶			
ENU	s signature ► Date ► ERO Must Retain This Form — See Instructions			
	LITO MUSI NEGIN MIS FULLI — SEE MISHACHUMS			

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 Is		S. Individual Income Tax c. 31, 2023, or other tax year beginning		, 2023, en	ding	OMB No. 1545		, 20	<u> </u>			n this space.
					uii ig			, 20				ructions.
Your first name	iddle initial	Last nam	ne								y number	
SRAVIKA		THAT							091 13 7170			
If joint return, s	spouse's	s first name and middle initial	Last nam	ne					Spou	ise's s	ocial sec	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ns.			Α	pt. no.	Pres	identia	al Election	on Campaign
714 EWE	LL F	ARM DR							Che	ck here	e if you,	or your
City, town, or	post offi	ce. If you have a foreign address, also co	mplete sp	aces below.	Sta	ite	ZIP co	ode			0,	tly, want \$3
SPRING	HILL				TN	1	371	74	-		will not	Checking a change
Foreign countr	y name		Fo	oreign province/state	/count	ty	Foreig	n postal cod	- 1		refund.	oago
											You	Spouse
Filing Statu	s 🗵	Single				☐ Head of h	ouseh	old (HOH)				
Check only		Married filing jointly (even if only or	ne had in	come)		_						
one box.		Married filing separately (MFS)				☐ Qualifying		• .	. ,			
		you checked the MFS box, enter the			u che	ecked the HOF	or QS	SS box, er	nter the	child's	s name	if the
	qu	alifying person is a child but not you	ır depend	dent:								
Digital	At a	ny time during 2023, did you: (a) rec	eive (as a	reward, award, o	payr	ment for prope	rty or	services);	or (b) se	ell,		
Assets		nange, or otherwise dispose of a digi					-			_	Yes	⊠ No
Standard	Som	neone can claim:	pendent	☐ Your spou	se as	a dependent						
Deduction	<u> </u>	Spouse itemizes on a separate retur	n or you	were a dual-status	alien	1						
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind Sp	ouse	: Was bor	n befo	re Januar	v 2. 195	9 [ls bli	nd
Dependent		•		•			14				_	instructions):
-		irst name Last name		(2) Social securit number	.y	(3) Relationsh to you	Child tax cre				,	ner dependents
If more than four	(1)					,			1			1
dependents,									1			
see instruction	ıs —								1			
and check here]]			
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	instructions) .					.	1a	8	<u> </u>
	b	Household employee wages not re	eported o	on Form(s) W-2 .					. [1b		
Attach Form(s) W-2 here. Also	_	Tip income not reported on line 1a	(see inst	tructions)						1c		
attach Forms	d	Medicaid waiver payments not rep	orted on	Form(s) W-2 (see	instru	ıctions)			. [1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f							. [1e		
was withheld.	f	Employer-provided adoption bene			9 .				. [1f		
If you did not	g	Wages from Form 8919, line 6 .							. [1g		
get a Form W-2, see	h	Other earned income (see instructi	ions) .						. [1h		0.
instructions.	i	Nontaxable combat pay election (s	see instru	uctions)		<u>1</u> i						-
	z	Add lines 1a through 1h		,					. [1z	8	32,905.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interest	t.		. [2b		
if required.	3a_	Qualified dividends	3a		b C	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 m	ethod, check here	(see	instructions)						
\$13,850	7	Capital gain or (loss). Attach Sche	dule D if ı	required. If not rec	uired	, check here				7		
Married filing jointly or	8	Additional income from Schedule	1, line 10						. [8	-1	4,583.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8. T	his is your total ir	com	e				9	6	8,322.
\$27,700	10	Adjustments to income from Sche	dule 1, lir	ne 26						10		
Head of household,	11	Subtract line 10 from line 9. This is	your ad	justed gross inco	me				. [11	6	58 , 322.
\$20,800 If you checked	12	Standard deduction or itemized	deductio	ons (from Schedul	e A)				. [12	1	3,850.
any box under Standard	13	Qualified business income deduct	ion from	Form 8995 or Forr	n 899	5-A				13		
Deduction,	14									14		3,850.
see instructions.	15	Subtract line 1/1 from line 11 If zer	o or loop	ontor O This is		tavabla inaam				15	_	1 172

Form 1040 (202	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	7,292.
Credits	17	Amount from Schedule 2, line						17	
	18	Add lines 16 and 17						18	7,292.
	19	Child tax credit or credit for o	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, line	e8					20	
	21	·						21	
	22	Subtract line 21 from line 18.						22	7,292.
	23	Other taxes, including self-er	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is y			•			24	7,292.
Payments	25	Federal income tax withheld							,
,	а	Form(s) W-2				25a 10	,500.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	10,500.
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20)22 return			26	·
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit fron	n Schedule 8812			28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line	e 15			31			
	32	Add lines 27, 28, 29, and 31.				indable credits		32	
	33	Add lines 25d, 26, and 32. The						33	10,500.
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	3,208.
	35a	Amount of line 34 you want r	efunded to you	ی. If Form 8888	is attached, ched	ck here		35a	3,208.
Direct deposit?	b	Routing number 1 1 1				_	Savings		
See instructions	d	Account number 4 8 8	0 7 5 1	5 3 2 9	9 0 " -		•		
	36	Amount of line 34 you want a	pplied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24.	This is the amo	ount you owe.					
You Owe		For details on how to pay, go						37	
	38	Estimated tax penalty (see in	structions) .			38			
Third Party		you want to allow another	person to disc	cuss this retu	n with the IRS?				
Designee		structions					mplete b		⊠ No
	De na	signee's me		Phone no.			nal identif er (PIN)	ication	
Sign		der penalties of perjury, I declare th	at I have examine		accompanying sche			ne best	of my knowledge and
Sign		lief, they are true, correct, and comp							
Here	Yo	ur signature		Date	Your occupation		If the	IRS se	nt you an Identity
					·		l l		IN, enter it here
Joint return?					SOFTWARE I		(see i		
See instructions. Keep a copy for		ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occupati	on	Ident	e IRS sent your spouse an ntity Protection PIN, enter it her	
your records.							(see i	nst.)	
	Ph	one no. (832) 888-391(Email address	SRAVIKATHAT	I.7@GMAIL.CO			_
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/24/2024	P02082	2703	Self-employed
Use Only	Fin	m's name GLOBAL TAX	KES LLC				Phon	e no.	(678) 965-9522
	Fin	m's address 245 ROONE	CT E BRU	NSWICK N	J 08816		Firm'	s EIN	84-3171965
Go to www.irs.o	ov/Forn	n1040 for instructions and the lates	st information		DAA	DEV 02/16/24 DDO			Form 1040 (2023)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

SRAVIKA THATI

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.

	Sequence No. 01
Your soc	ial security number
091-13	-7170

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	-14,583.
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 (
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 additional income. Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-14 , 583.

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-				
	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	Nontaxable amount of the value of Olympic and Paralympic medals	04			
_1	• • • • • • • • • • • • • • • • • • • •	24c		_	
d		24d		-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		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				
	-	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			
05					
25 26	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. ∟nter	nere and on		
	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,

Attachment

Department of the Treasury Go to www.irs.gov/ScheduleE for instructions and the latest information. Internal Revenue Service

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number SRAVIKA THATI 091-13-7170 Part I **Income or Loss From Rental Real Estate and Royalties** 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 1a Physical address of each property (street, city, state, ZIP code) H.NO:12-114/7, MAIN ROAD KODAD SURYAPET TELANGANA IN 508206 Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 642. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 2,230. 7 Cleaning and maintenance . . . 7 8 Commissions 8 9 9 Insurance . . . 10 Legal and other professional fees 10 2,756. 11 Management fees 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 14 2,879. Repairs 2,633. 15 15 16 16 Taxes 17 Utilities 17 2,451. 18 2,276. 18 Depreciation expense or depletion Other (list) 19 19 20 20 15,225. Total expenses. Add lines 5 through 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 -14,583. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 14,583.) 642. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 2,276. 23d Total of all amounts reported on line 18 for all properties 23e 15,225. Total of all amounts reported on line 20 for all properties 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 14,583.

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 .

-14**,**583.

26