## 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	ver's name	Social securit	y number			
KRU	THIKA AGARWAL	027-55-	-3413			
Spouse	o's name	Spouse's soc	ouse's social security number			
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	_ ∣ er year you a	re author	izing.)		
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		1	39 <b>,</b> 531.		
2	Total tax		2	2,861.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	7,077.		
4	Amount you want refunded to you		4	4,216.		
5	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of your	return)		
return to sen for an Agent payme author payme busine taxes persor	conveledge 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 d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rey 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 the 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 hall 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 andicated in the ta- tion to debit the te the authoriza- quests must be e processing of payment. I furt	onic return of ansmission and its design ax preparation entry to this ation. To respond to the electron the acknowledges and the acknowledges and the electron acknowledges are acknowledges and the electron acknowledges and the electron acknowledges and the electron acknowledges are acknowledges and acknowledges are acknowledges and acknowledges acknowledges are acknowledges and acknowledges acknowledges are ackno	originator (ERC), (b) the reasonated Financial on software for account. The voke (cancel) no later than unic payment oveledge that the		
Тахр	ayer's PIN: check one box only	E	2 4 1	$T_{2}$		
	I authorize GLOBAL TAXES LLC to enter or generate signature on the income tax return (original or amended) I am now authorizing.	ř Ent	3 4 1 er five digits n't enter all z	⊔ as my s, but		
	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 <b>and</b> your return is filed using the Practitioner PIN met below.					
Your	signature ▶ Date ▶					
Snou	se's PIN: check one box only					
Г	☐ I authorize to enter or generate	a my PINI		as m		
L	ERO firm name	-	er five digits			
	signature on the income tax return (original or amended) I am now authorizing.		n't enter all z			
	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 <b>and</b> your return is filed using the Practitioner PIN med below.					
Spou	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	N				
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. 2		6 0 8 er all zeros	2 7 1		
author	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 <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of	mitting this retu	ırn in accor	dance with th		
FR∩'	s signature ▶ Date ▶					
LITO	ERO Must Retain This Form — See Instructions					
	ENG MUSI NEW III TO SEE IISUUCUOIS					

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



<b>1040</b>		artment of the Treasury—Internal Revenue Servi		urn	20 <b>2</b>	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	Ť	See se	oarate	instructions.
Your first name	and m	iddle initial	Last nar	me	<del></del>						Your so	cial sec	curity number
KRUTHIKA	A		AGAR	WAL							027	55	3413
		s first name and middle initial	Last nar									•	l security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				A	kpt. no.		Preside	ntial Ele	ection Campaign
2209 W I	PFLU	GERVILLE PKWY											ou, or your
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete sp	paces belo	w.	Sta	te	ZIP c	ode				jointly, want \$3 nd. Checking a
ROUND RO	OCK					TX	Z	786	64		0		not change
Foreign countr	y name		F	oreign pro	vince/state/	count	ry	Foreig	n postal c	code	your tax	or refu	
Filing Status	s 🗵	Single					Head of h	ouseh	old (HOI	H)			
Check only		Married filing jointly (even if only o	ne had ir	ncome)					•	,			
one box.		Married filing separately (MFS)		,			☐ Qualifying	surviv	ing spo	use (0	QSS)		
	If y	you checked the MFS box, enter the	name o	f your sp	ouse. If you	ı che	ecked the HOF	or Q	SS box,	enter	the chi	ld's na	ıme if the
		alifying person is a child but not you											
Digital	At a	ny time during 2023, did you: (a) rec	eive (as a	a reward									
Assets		nange, or otherwise dispose of a dig										□ Y	es 🗵 No
Standard	Som	neone can claim: You as a de	pendent	: <u> </u>	our spous	e as	a dependent				-		
Deduction		Spouse itemizes on a separate retur	n or you	were a d	ual-status	alien	•						
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blir	nd <b>Spc</b>	ouse	: Was bor	n hefo	re Janu	arv 2	1959		s blind
Dependent				Ī	•		(3) Relationsh	14					(see instructions):
-	(2) Social security (3) Relationship (4) Check the bound in to you (4) Check the bound in the bo							or other dependents					
If more than four													
dependents,													
see instruction and check	s —												
here													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instruct	ions) .						1a		52,102.
Attach Form(s)	b	Household employee wages not re	eported (	on Form(	s) W-2 .						1b		
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)								1c	:		
attach Forms W-2G and	d									1d			
1099-R if tax	е	Taxable dependent care benefits f	able dependent care benefits from Form 2441, line 26							1e			
was withheld.	f	. ,								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 (s	see instr	uctions)			<u>1</u> i						
	<b>z</b> _	Add lines 1a through 1h									1z		52,102.
Attach Sch. B	2a	Tax-exempt interest	2a				axable interest				2b		
if required.	3a_		3a				rdinary divide				3b		
Standard	4a	<del>-</del>	4a				axable amoun				4b		
Deduction for—	5a		5a				axable amoun				5b 6b		
Single or Married filing	,				able amount <u>.</u>								
separately,	C	If you elect to use the lump-sum election method, check here (see instructions)							]				
\$13,850 Married filing	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7		10 551		
jointly or Qualifying	8	Additional income from Schedule	•								8		-12 <b>,</b> 571.
surviving spouse,	9		dd lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							9	-	39,531.	
\$27,700 Head of	10	Adjustments to income from Sche									10		20 521
household, \$20,800	11	Subtract line 10 from line 9. This is	•	-							11		39,531.
If you checked	12	Standard deduction or itemized					 E A				12		13,850.
any box under Standard	13	Qualified business income deduct									13		12 050
Deduction, see instructions.	14	Add lines 12 and 13									14		13,850.

Form 1040 (2023	3)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	2,861.	
Credits	17	Amount from Schedule 2, lin	ne 3					17		
	18	Add lines 16 and 17						18	2,861.	
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	ie 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	2,861.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.	
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	2,861.	
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				<b>25a</b> 7	,077.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	7,077.	
If you have a	26	2023 estimated tax paymen	ts 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 from	n Schedule 8812	2		28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	ie 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments			[	33	7,077.	
Refund	34	If line 33 is more than line 24						34	4,216.	
	35a	Amount of line 34 you want	refunded to you	ی. If Form 8888	is attached, che	ck here	. 🗆 🛚	35a	4,216.	
Direct deposit?	b	Routing number 0 1 1	4 0 0 4	9 5	<b>c</b> Type:	Checking :	Savings			
See instructions.	d	Account number 3 8 8	0 0 3 9	6 9 3 3	3 6		- 1			
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24								
You Owe		For details on how to pay, g						37		
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party	Do	you want to allow another				? See				
Designee		structions				<b>Yes.</b> Co	omplete be	low.	<b>⋉</b> No	
_		signee's		Phone			onal identific	ation		
	naı			no.			per (PIN)		f	
Sign		der penalties of perjury, I declare the lief, they are true, correct, and com								
Here									t you an Identity	
	10								N, enter it here	
Joint return?					SOFTWARE :	ENGINEER		ee inst.)		
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat		the IRS sent your spouse an			
Keep a copy for your records.							Identity (see ins		ction PIN, enter it here	
, ca. 1000.ac.					_					
		one no. (603) 417–932		Email address	KRUTHIKAAGAR	WAL401@GMAIL.CO		<del></del>	Ob I. if.	
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:	
Preparer	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	03/14/2024	P020827		Self-employed	
Use Only		m's name GLOBAL TA					Phone		678) 965-9522	
			Y CT E BRU	NSWICK N	J 08816		Firm's	EIN	84-3171965	
Go to www.irs.g	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/04/24 PRO			Form <b>1040</b> (2023)	

# 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

KRUTHIKA AGARWAL

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

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 027-55-3413

Par	t 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	ich Schedule E .	5	-12,571.
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	-12,571.

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-base	sis 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	Jury duty pay (see instructions)	a		
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit	<b>o</b>		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m	_		
d	Reforestation amortization and expenses	d		
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	9		
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	n	-	
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	j	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	K	.	
Z	Other adjustments. List type and amount:			
<b>-</b> -				
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> . En	nter here and on		
	Form 1040, 1040-ŠR, 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

KRU'	THIKA AGARWAL						027-5	5-3413		
Par										
	<b>Note:</b> If you are in the business of renting personal proper rental income or loss from <b>Form 4835</b> on page 2, line 40.	rty, use	Schedule	<b>C</b> . See	instru	ctions. If you a	are an indi	vidual, rep	ort farm	
Α	Did you make any payments in 2023 that would require you	to file	Form(s) 1	0002 5	Soo in	structions			es 🛛 No	
	If "Yes," did you or will you file required Form(s) 1099?									
					•					
1a	Physical address of each property (street, city, state, ZII		-							
A	5-7-90/91 COOLI LANE WATER KOTHAGUDEM	BHAD	RADRII	DIST,	TEL	ANGANA I	N 50710	01		
B										
C										
1b	Type of Property 2 For each rental real estate property			Fair Rental			Persor		QJV	
	(from list below) above, report the number of fair personal use days. Check the Q		and a selection			Days	Da			
_ <u>A</u>	ja personal use days. Check the Q			<u>A</u>		365		0		
<u>B</u>	qualified joint venture. See instru			В						
C	- Comments			С						
	of Property:	4-1	5 Land	ı	7	Self-Rental				
	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	itai	5 Land		-		wib a)			
	Multi-Family Residence 4 Commercial		6 Roya	unes	0	Other (desc	:nbe)			
						Propert	ies:			
Incor				Α		В			С	
3	Rents received	3		5	80.					
4	Royalties received	4								
-	nses:									
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		2,9	23.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		2,2	45.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13 14	Other interest	13		2 0	0.2					
15	Repairs	15			93.					
16	Supplies	16		2,4	JI.					
17	Utilities	17		2 6	39.					
18	Depreciation expense or depletion	18		2,0						
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		13,1	51					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If				~ <del>~·</del>					
	result is a (loss), see instructions to find out if you must									
	file <b>Form 6198</b>	21	-	<b>-</b> 12 <b>,</b> 5	71.					
22	Deductible rental real estate loss after limitation, if any,									
	on Form 8582 (see instructions)	22	(	12,57	71.)	(	)	(	)	
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		580.			
b	Total of all amounts reported on line 4 for all royalty prop	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	13	3,151.			
24	Income. Add positive amounts shown on line 21. Do not		-				. 24			
25	Losses. Add royalty losses from line 21 and rental real estat	te losse	s from lin	e 22. E	nter to	tal losses he	re <b>25</b>	(	12,571.)	
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do no						on		_12 571	
	SCHERING LIFORM HIVIN IIDA'S LITDANNICA IDCUIDA TRIC SI	COLUM	III TIIA TAI	iai an li	1114 /17	On Dade 7	1 00		_   / 5 /	