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)

Тахрау	er's name	Social secu	rity numb	er	
SID	IDDHANT RATH 117-06-309				
Spouse's name Spouse's social security				rity number	
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	er year you	are aut	horizing.)	
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	152,159.	
2	Total tax		2	26,594.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	29,173.	
4	Amount you want refunded to you		4	2,579.	
5	Amount you owe		5		
Part			by of y	our 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

X	l authorize	GLOBAL TAXES LLC	to enter or generate my PI
	rautionze		

6	3	0	9	7	as			
Enter five digits, but don't enter all zeros								

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

to.	ontor	~r	gonorato	mu	
το	enter	or	generate	my	PIIN

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 signature 🕨	Date ►
Practitioner PIN Metho	d Returns Only—continue below
Part III Certification and Authentication – Practit	ioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your fi	ve-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1

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 F Don't Submit This Form to the I			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/07/24 PRO	Form 8879 (Rev. 01-2021)

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use	Only—	Do not wi	rite or sta	aple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ding			, 20		See sep	oarate i	instructions.
Your first name	and m	iddle initial	Last r	name							Your so	cial sec	urity number
SIDDHANT	-		RAT	Н									3097
		s first name and middle initial	Last r										security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.	F	Presider	ntial Ele	ection Campaigr
930 E 15	5тн :	ST				_		2	62				ou, or your
City, town, or p	ost offi	ice. If you have a foreign address, also co	mplete	spaces be	elow.	Sta	ate	ZIP co	ode				jointly, want \$3 nd. Checking a
PLANO						TΣ	X	750	74				not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal co	ode)	our tax	_	_
												Yo	ou 🔄 Spouse
Filing Status	; 🗵	Single					Head of he	ouseh	old (HOH	I)			
Check only		Married filing jointly (even if only or	ne hac	l income)									
one box.		Married filing separately (MFS)							- .		,		
		you checked the MFS box, enter the alifying person is a child but not you			pouse. If yo	u che	ecked the HOF	l or Q	SS box, e	enter	the chil	d's na	me if the
	qu		i depe										
Digital		ny time during 2023, did you: (a) rec	•								, .	_	
Assets	exch	hange, or otherwise dispose of a dig			nancial inter	est ir	n a digital asse	et)? (Se	e instruc	ctions	s.)	∐ Ye	es 🛛 No
Standard		neone can claim: 🗌 You as a de	•		•		a dependent						
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	1						
Age/Blindness	S You	: 🗌 Were born before January 2, 1	959	Are b	lind Spo	ouse	: 🗌 Was bor	n befo	ore Janua	ıry 2,	1959	🗌 ls	s blind
Dependents	s (see	instructions):		(2) 5	Social security	/	(3) Relationsh	_{ip} (4) Check th	ne box	if qualif	ies for (see instructions):
If more	(1) F	(1) First name Last name			number to you				Child tax credit		dit	Credit fo	r other dependents
than four													
dependents, see instructions	s ——												
and check	. —												
here 🗌													
Income	1a	Total amount from Form(s) W-2, b				• •		• •	• •		1a	_	166,288.
Attach Form(s)	b	Household employee wages not re	•					• •	• •	• •	1b		
W-2 here. Also attach Forms	с с		Tip income not reported on line 1a (see instructions)						1c 1d				
W-2G and	d e	Taxable dependent care benefits for				nstru		• •	• •	• •	10		
1099-R if tax was withheld.	f	Employer-provided adoption bene			<i>,</i>	• •		• •	• •	• •	1f		
If you did not	a	Wages from Form 8919, line 6			5000, iiiic 20	•		• •	• •	• •	1g		
get a Form	9 h	Other earned income (see instruct	ions)								1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,	structions))		1i						
	z	Add lines 1a through 1h									1z		166,288.
Attach Sch. B	2a	Tax-exempt interest	2a			bΤ	axable interest	t.			2b		
if required.	3a	Qualified dividends	3a			bС	Ordinary divider	nds .			3b		
	4a	IRA distributions	4a			bΤ	axable amount	t			4b		
Standard Deduction for—	5a		5a			bΤ	axable amoun	t			5b	_	
 Single or Married filing 	6a	,	6a				axable amount	t	· ·	· _	6b	-	
Married filing separately,	С	If you elect to use the lump-sum e				•	,			. Ц			
\$13,850 Married filing	7	Capital gain or (loss). Attach Schee		•	•					. 🗆	7		
jointly or Qualifying	8	Additional income from Schedule						• •	• •		8		-14,129.
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7				com	е	• •	• •		9		152,159.
 Head of 	10	Adjustments to income from Sche				••••		• •			10		150 150
household, \$20,800	11	Subtract line 10 from line 9. This is Standard deduction or itemized						• •	• •	• •	11		152,159.
If you checked any box under	<u>12</u> 13	Qualified business income deduct				,		• •	• •	• •	12		13,850.
Standard	14	Add lines 12 and 13				. 033	ю л	• •	• •	• •	13		13,850.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	· · o or le	ss. enter	-0 This is v	 /our f	taxable incom	ie .	• •		15		138,309.
			5 51 10		5io io y				• •	• •			

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

Form **1040** (2023)

Form 1040 (2023	3)							Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌	1	6 26,594.
Credits	17	Amount from Schedule 2, lin	ne3				1	7
	18	Add lines 16 and 17					1	8 26,594.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		1	9
	20	Amount from Schedule 3, lin	ne8				2	0
	21	Add lines 19 and 20					2	1
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			2	2 26,594.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		2	3 0.
	24	Add lines 22 and 23. This is	your total tax				2	4 26,594.
Payments	25	Federal income tax withheld						
•	а	Form(s) W-2				25a 29	,173.	
	b	Form(s) 1099				25b		
	с	Other forms (see instructions	s)			25c		
	d	Add lines 25a through 25c					25	id 29,173.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	22 return		2	6
qualifying child,	27	Earned income credit (EIC)			No .	27		
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28		
	29	American opportunity credit	from Form 8863	8, line 8		29		
	30	Reserved for future use .				30		
	31	Amount from Schedule 3, lin	ne 15			31		
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits	3	2
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments			3	3 29,173.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid	3	4 2,579.
	35a	Amount of line 34 you want	refunded to you	. If Form 8888	is attached, che	ck here	. 🗌 35	5a 2,579.
Direct deposit?	b	Routing number 1 1 0 0 6 1 4 c Type: X Checking Savings						
See instructions.	d	Account number 2 5 0	6 3 0 9	2 5				
	36	Amount of line 34 you want a	applied to your	2024 estimate	edtax	36		
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe				
You Owe		For details on how to pay, g	o to <i>www.ir</i> s.gov	//Payments or	see instructions		3	7
	38	Estimated tax penalty (see in	nstructions) .			38		
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?			
Designee	ins	structions				🗌 Yes. Co	omplete belov	w. 🗙 No
	De nai	signee's		Phone no.			onal identificati per (PIN)	on
0:		der penalties of perjury, I declare th	nat I have examined		accompanying sch		()	est of my knowledge and
Sign		ief, they are true, correct, and com						
Here	Yo	ur signature		Date	Your occupation		If the IRS	sent you an Identity
				Dato			Protection	n PIN, enter it here
Joint return?					SOFTWARE :	ENGINEER	(see inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, k	ooth must sign.	Date	Spouse's occupat	tion		sent your spouse an
your records.							(see inst.)	rotection PIN, enter it here
	Dh	(60) (01) (01)	2	Email address			,	·
		one no. (682)812-326 eparer's name	3 Preparer's signat		SIDDHANT/	84@GMAIL.CO		Check if:
Paid					גיייריזי) סגי			
Preparer		M PRIYA RAM SAGAR GUPTA		A RAM SAU	JAR GUPIA	03/20/2024	P0208270	
Use Only		m's name GLOBAL TAX	Y CT E BRU		J 08816			<u>. (678)965-9522</u>
				MOWICK N			Firm's Ell	Form 1040 (2023)
GO IO WWW.Irs.go	JV/FOM	n1040 for instructions and the late	sumormation.		BAA	REV 03/07/24 PRO		Form 1040 (2023)

REV 03/07/24 PRO

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	Your social security number		
SIDDHANT RATH	117-06	-3097	
Part I Additio	onal Income		

Par	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. Att	ach Schedule E .	5	-14,129.
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		
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		
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 . Ente	r here and on Form		14 100
	1040, 1040-SR, or 1040-NR, line 8		10	-14,129.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedul	e 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	s 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:			
 a	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the		-	
D	rental of personal property engaged in for profit			
с	Nontaxable amount of the value of Olympic and Paralympic medals		-	
C	and USOC prize money reported on line 8m			
d			-	
	Repayment of supplemental unemployment benefits under the Trade		-	
е	Act of 1974			
			-	
f			-	
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 adjustments to income. Enter	er here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	<u></u>	26	
	BAA REVO)3/07/24 PRO	Schedule 1 (F	orm 1040) 202

SCHEDULE E (Form 1040)		Supplemental Income and Loss								OMB No. 1545-0074		
(FOIII	11040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.) Attach to Form 1040, 1040-SR, 1040-NR, or 1041.								20 23		
Department of the Treasury Internal Revenue Service Go to www.irs.gov/ScheduleE for			·				formation		Attachn	nent ice No. 1	-	
Name(s) shown on return				i insu u			itest ii		our soci	al security		
``	DHANT RATH							6-3097				
Par		or Los	s From Rental Real Estate an	nd Ro	valties				117 0	0 0007		
	Note: If yo	ou are in t	he business of renting personal proper	rty, use	Schedule	c . See	instru	ctions. If you are	an indiv	/idual, rep	ort farn	n
			ss from Form 4835 on page 2, line 40.			0000 0	<u>,</u> ,	:				
	d you make any payments in 2023 that would require you to file Form(s) 1099? See instructions											
						• •				те	<i>!</i> S	No
1a	Physical addr	ress of each property (street, city, state, ZIP code)										
Α	SHAILASHR	EE VIHAR,PHASE 7 BHUBANESWAR ODISHA IN 751021										
В												
C												
1b	Type of Prope			For each rental real estate property listed above, report the number of fair rental and			Fair Rental		Personal Use		QJV	
	(from list below)		personal use days. Check the Q					Days	Days		+	
 	3		if you meet the requirements to t			 		365		0		<u>_</u>
<u>с</u>		_	qualified joint venture. See instru	uctions	s	C						<u></u>
	of Property:					0						
	Single Family R	esidence	e 3 Vacation/Short-Term Ren	ital	5 Land		7	Self-Rental				
	Multi-Family Re				6 Roya			Other (describ	be)			
	,,,,,				· · · · · · · · · · · · · · · · · · ·		-					
						•		Properties	s:			
Incon		L		2		<u>Α</u>	32.	В			С	
3 4				3		0	52.					
Expe		iveu .		4								
5				5								
6	-		structions)	6								
7		leaning and maintenance				1,7	94.					
8						-,.						
9				9								
10	Legal and othe	10										
11	Management f	11		1,3	86.							
12	Mortgage inter	rest paid	I to banks, etc. (see instructions)	12								
13	Other interest			13								
14	Repairs			14		2,0						
15				15		2,3	17.					
16				16								
17						2,894. 4,356.						
18		xpense	or depletion	18		4,3	56.					
19 20	Other (list)		pag 5 through 10	19 20		1/ 7	61					
			nes 5 through 19	20		14,7	01.					
21			ine 3 (rents) and/or 4 (royalties). If astructions to find out if you must									
	file Form 6198	b		21	-	-14,1	29.					
22	Deductible ren	tal real o	estate loss after limitation, if any,									
					22 (14,1			()()
23a	Total of all amo	otal of all amounts reported on line 3 for all rental proper						23a 632				
b	Total of all amounts reported on line 4 for all royalty prope						23b					
с		I of all amounts reported on line 12 for all properties					23c					
d		all amounts reported on line 18 for all properties				23d			4,356.			
е	Total of all amounts reported on line 20 for all properties						23e	14,	761.			
24			amounts shown on line 21. Do no t				• •		24	/		
25			ses from line 21 and rental real estat						25	(14,12	29.)
26			te and royalty income or (loss). d IV, and line 40 on page 2 do no									
			0), line 5. Otherwise, include this a						26		-14,1	129.

-14,129.