## 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

IIILEIIIAI	reveilue del vice							
Subm	ssion Identification Number (SID)							
Taxpaye	pr's name	Social secur	ity numl	oer				
SAI	SANTOSH KUMAR RACHARLA	833-83	833-83-0453					
Spouse		Spouse's so			nber			
Part		year you a	are au	thorizir	ng.)			
	whole dollars only on lines 1 through 5.							
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1.	I				
1	Adjusted gross income		1			350.		
2	Total tax		2			393.		
3 4	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			<u>675.</u>		
<del>4</del> 5	Amount you want refunded to you		5		6,	282.		
Part		een a cor		OUT TE	turr	<u>,, , , , , , , , , , , , , , , , , , ,</u>		
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)							
to send for any Agent to payme authori payme business taxes to person	original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected and processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indigent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution zation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the Indian to the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the page of the Indian Withdraws (Consent).	ection of the the state of the	ransmis and its ax preperently action. The ereceing the election at the electi	ssion, (besignate or this a this a for revoked no ectronice skinowled sides.)	ted Files ted Files software (call later call payred)	reason nancial vare for nt. This ncel) a than 2 nent of nat the		
	nic Funds Withdrawal Consent.				_			
	yer's PIN: check one box only	3	0 4	4   5   3	3			
×	I authorize GLOBAL TAXES LLC to enter or generate BRO firm name	ř Er		digits, b	ut	as my		
	signature on the income tax return (original or amended) I am now authorizing.	do	on't ente	er all zero	os			
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.							
Yours	ignature ▶ Date ▶							
Spaul	se's PIN: check one box only							
Spous	I authorize to enter or generate	my DINI			$\Box$ ,	ne mv		
	ERO firm name	_	ter five	digits, b		as my		
	signature on the income tax return (original or amended) I am now authorizing.			r all zero				
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.							
Spous	e's signature ▶ Date ▶							
	Practitioner PIN Method Returns Only—continue below							
Part	Certification and Authentication — Practitioner PIN Method Only							
FRO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9	6 0	8 2	7	1		
LITO	2   2	Don't en	-   -	$\vdash$	1 ' 1			
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the taxpayer above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Ir	itting this ret	urn in a	accorda	nce w			
ERO's	signature ▶ Date ▶							
	ERO Must Retain This Form — See Instructions							
	Don't Submit This Form to the IRS Unless Requested To I	o 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 Serv  S. Individual Income Tax		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	Do not w	rite or sta	aple in this space.	
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	oarate	instructions.	
Your first name	and m	iddle initial	Last nar	me	· <del></del>						Your so	cial sec	curity number	
SAI SAN'	TOSH	KUMAR	RACH	ARLA							833	83	0453	
		s first name and middle initial	Last nar									•	security number	
		er and street). If you have a P.O. box, see	instruction	ons.				A	Apt. no.	- 1			ection Campaigr	
		N LEAVES LANE ice. If you have a foreign address, also co	mploto si	nacos hole	DW	Sta	to	ZIP c	odo				ou, or your jointly, want \$3	
, , ,	JUST UIII	ice. II you have a loreigh address, also co	nipiete st	paces beit	Jvv.			762			to go to	this fu	nd. Checking a	
AUBREY Foreign countr	v name		F	oreian pro	ovince/state/	TX			<u>∠ /</u> jn postal c		box bel your tax		not change	
. o. o.g ood	,			0.0.g., p	5 v 10 0, 0 tato, 1		,	. 0.0.5	, poota. o		your tur	Yo		
Filing Status	s 🗵	Single					Head of h	ouseh	old (HOI	<del>-</del> 1)				
Check only		Married filing jointly (even if only o	ne had ir	ncome)										
one box.		Married filing separately (MFS)					Qualifying		0 1	,	,			
	lf y	you checked the MFS box, enter the	name o	of your sp	ouse. If you	u che	cked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	
	qu	ualifying person is a child but not you	ır depen	ident:										
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	, award, or	payn	nent for prope	rty or	services	); or (	o) sell,			
Assets	exch	nange, or otherwise dispose of a dig	ital asse	t (or a fin	ancial inter	est ir	n a digital asse	t)? (Se	e instru	ctions	s.)	□ Ye             □ Ye	es 🗵 No	
Standard		neone can claim:   You as a de	pendent	: 🗆 `	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-status	alien								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bli	nd <b>Spc</b>	ouse:	: Was bor	n befo	ore Janua	ary 2,	1959		s blind	
Dependent	s (see	instructions):		<b>(2)</b> S	ocial security	,	(3) Relationsh	ip (4	) Check t	he bo	oox if qualifies for (see instruction			
If more	(1) F	irst name Last name			number		to you		Child t	ax cre	dit	Credit fo	or other dependents	
than four														
dependents, see instruction	s —													
and check _	, —													
here L				<u> </u>										
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		92,557.	
Attach Form(s)	b	Household employee wages not re	•								1b			
W-2 here. Also attach Forms	d	Tip income not reported on line 1a (see instructions)								1c 1d				
W-2G and	e e		Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1e				
1099-R if tax was withheld.	f	Employer-provided adoption bene									1f			
If you did not	g	Wages from Form 8919, line 6.	into morn	11 01111 00	500, III IC 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	,					i i						
motraotiono.	z	Add lines 1a through 1h						<u> </u>			1z		92,557.	
Attach Sch. B	 2a		2a	-	ĺ	b Ta	axable interest	t.			2b		<u> </u>	
if required.	3a	· –	3a			<b>b</b> 0	rdinary divide	nds .			3b			
	4a	IRA distributions	4a				axable amoun				4b			
Standard Deduction for—	5a	Pensions and annuities	5a				axable amoun				5b			
Single or	6a	Social security benefits	6a				axable amoun				6b			
Married filing separately,	С	If you elect to use the lump-sum e	elect to use the lump-sum election method, check here (see instructions)											
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche	dule D if	required	l. If not requ	uired,	check here				7			
jointly or	8	Additional income from Schedule	1, line 10	0							8		-14,707.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8. <sup>-</sup>	This is yo	our <b>total inc</b>	come					9		77 <b>,</b> 850.	
\$27,700 Head of	10	Adjustments to income from Sche	dule 1, li	ine 26							10			
household,	11	Subtract line 10 from line 9. This is	s your <b>ac</b>	djusted g	gross incor	ne					11		77 <b>,</b> 850.	
\$20,800 If you checked	12	Standard deduction or itemized	deducti	i <b>ons</b> (fror	n Schedule	A)					12		13,850.	
any box under Standard	13	Qualified business income deduct	ion from	Form 89	95 or Form	899	5-A				13			
Deduction,	14										14		13,850.	
see instructions.	15	Subtract line 1/1 from line 11 If zer	or loce	ontor	O Thic ic v	Our t	avabla incom				15	1	64 000	

Form 1040 (202)	3)						_		Page Z		
Tax and	16	Tax (see instructions). Check if a	any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	9,393.		
Credits	17	Amount from Schedule 2, line 3	3					17			
	18	Add lines 16 and 17						18	9,393.		
	19	Child tax credit or credit for oth	ner dependent	s from Sched	ule 8812			19			
	20	Amount from Schedule 3, line 8	в					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18. If	zero or less, e	enter -0				22	9,393.		
	23	Other taxes, including self-emp	oloyment tax, t	from Schedule	e 2, line 21			23	0.		
	24	Add lines 22 and 23. This is you	ur <b>total tax</b>					24	9,393.		
<b>Payments</b>	25	Federal income tax withheld from	om:								
-	а	Form(s) W-2				<b>25a</b> 15	5 <b>,</b> 675.				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions)				25c					
	d	Add lines 25a through 25c .						25d	15,675.		
If you have a	26	2023 estimated tax payments a	and amount ap	oplied from 20	122 return			26			
qualifying child,	27	Earned income credit (EIC) .			No .	27					
attach Sch. EIC.	28	Additional child tax credit from S	Schedule 8812			28					
	29	American opportunity credit fro	om Form 8863	, line 8		29					
	30	Reserved for future use				30					
	31	Amount from Schedule 3, line 1	15			31					
	32	Add lines 27, 28, 29, and 31. The	hese are your	total other pa	ayments and refu	ndable credits		32			
	33	Add lines 25d, 26, and 32. The	se are your <b>to</b>	tal payments				33	15,675.		
Refund	34	If line 33 is more than line 24, s	subtract line 24	4 from line 33.	This is the amour	nt you <b>overpaid</b>		34	6,282.		
	35a	Amount of line 34 you want ref	unded to you	ı. If Form 8888	is attached, chec	k here	🗌	35a	6,282.		
Direct deposit?	b	Routing number 0 2 1 0				Checking	Savings				
See instructions.	d	Account number 4 8 3 0	0 7	2 9 7 2	2 8						
	36	Amount of line 34 you want app	plied to your	2024 estimate	ed tax	36					
Amount You Owe	37	Subtract line 33 from line 24. The For details on how to pay, go to						37			
	38	Estimated tax penalty (see instr	_	-		38		J.			
Third Party Designee	Do	you want to allow another pertuctions	erson to disc	uss this retu	n with the IRS?	See	omplete	below.	⊠ No		
gc	De	signee's		Phone		Pers	onal ident	ification			
		me		no.			ber (PIN)				
Sign Here		der penalties of perjury, I declare that lief, they are true, correct, and comple									
11010	Yo	ur signature		Date	Your occupation				nt you an Identity		
					COEMMADE	NICTNEED	1	ection P inst.)	IN, enter it here		
Joint return? See instructions.	Sn	ouse's signature. If a joint return, <b>bot</b>	<b>h</b> must sian	Date	SOFTWARE E		,		e IRS sent your spouse an		
Keep a copy for your records.		Specific or organization in a joint rotally, would must sign.		Date	Spouse's occupan	OI I			rotection PIN, enter it here		
	Ph	one no. (571) 577-3149		Email address	SANTOSH.RACHA	RLA21@GMAIL.C	OM				
Paid	Pre	eparer's name Pr	reparer's signati	ure		Date	PTIN		Check if:		
Preparer	SYAN	I PRIYA RAM SAGAR GUPTA TALLAM S	YAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/27/2024	P0208	2703	Self-employed		
Use Only	Fir	m's name GLOBAL TAXE	S LLC				Pho	ne no.	(678) 965-9522		
————	Fir	m's address 245 ROONEY	CT E BRU	NSWICK N	J 08816		Firm	ı's EIN	84-3171965		
	/-	40406 : 1 1' 111 11 11				<del></del>			= 1040 ()		

# 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

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

SAI SANTOSH KUMAR RACHARLA

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 social security number
833-83-0453

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	-14,707.
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		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:			
_	Table the face of Addition On the safe O	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> . Ente			1 / 7 0 7
	1040, 1040-SR, or 1040-NR, line 8		10	-14 <b>,</b> 707.

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				
	<b>-</b>	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			
<b>0</b> -					
25 26	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .	. ∟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. Go to www.irs.gov/ScheduleE for instructions and the latest information.

Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name(s) shown on return Your social security number SAI SANTOSH KUMAR RACHARLA 833-83-0453

Pa	Income or Loss From Rental Real Estate and Note: If you are in the business of renting personal propert rental income or loss from Form 4835 on page 2, line 40.	d Ro ty, use	yalties Schedule	C. See	e instru	ctions. If you a	re an indi	vidual, rep	ort farm	
Α		to file	Form(s) 1	0002 9	Soo in	etructions			e X No	—
В	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions									
1a										
A	PLOT NO.14 NARAYANA REDDY NARAYANA REDDY	COL	ONY HAS	TINAF	NIR AII	HYDERABAI	D TELA	NGANA T	N 50007	7
			0111 11110	<u> </u>	Oldin	. III DEI GIDIII		110711171 1	30007	
										—
1k					Fair Rental Days			nal Use ays	QJV	
A	personal use days. Check the QJ			Α		365		0		_
В	if you meet the requirements to fi			В						_
С	qualified joint venture. See instruc	CLIOIR	s.	С						
Тур	e of Property:									
1	Single Family Residence 3 Vacation/Short-Term Rent	tal	5 Land			Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	lties	8	Other (descr	ibe)			
						Propertie				—
Inco	me:			Α		В			С	—
3	Rents received	3			21.					
4	Royalties received	4								—
	enses:	<u> </u>								
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,8	79.					
8	Commissions	8								
9	Insurance	9								_
10	Legal and other professional fees	10								_
11	Management fees	11		2,3	10.					_
12	Mortgage interest paid to banks, etc. (see instructions)	12								_
13	Other interest	13								
14	Repairs	14		3,2	01.					
15	Supplies	15		2,8	97.					
16	Taxes	16								
17	Utilities	17		2,3	45.					
18	Depreciation expense or depletion	18		2,7	96.					
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		15,4	28.					
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	١		1 4 7	07					
	file Form 6198	21	-	-14,7	0 / .					
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22	(	14,70		(	)	(		)
238					23a		721.	-		
k	1 , 3 , 1 ,				23b					
C	• • • • • • • • • • • • • • • • • • • •				23c	_	700			
C	' '				23d		,796.	-		
24	• • • • • • • • • • • • • • • • • • • •				23e	15	,428.			
24	Income. Add positive amounts shown on line 21. <b>Do not</b>		-				. 24	/	1 4 5 0 5	
25	Losses. Add royalty losses from line 21 and rental real estate							(	14,707.	
26	Total rental real estate and royalty income or (loss). On here. If Parts II, III, and IV, and line 40 on page 2 do not	t app	ly to you,	also e	nter t	his amount o	n			
	Schedule 1 (Form 1040), line 5. Otherwise, include this an	nount	t in the tot	al on li	ine 41	on page 2	. 26	l .	-14.707	