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 securi	ty number		
FNU	J DEEKSHA POORNASHRI	270-77	-3260		
Spouse	ial security	number			
Par	Tax Return Information — Tax Year Ending December 31, 202	 3 (Enter vear vou a	re author	rizing.)	
	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	Adjusted gross income		1	80,	101.
2	Total tax		2	9,	888.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12,	064.
4	Amount you want refunded to you		4		176.
5	Amount you owe		5		
Part		et and keep a cop	y of you	r returr	1)
return to sen for any Agent payme author payme taxes persor Electro	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in P (original or amended) I am now authorizing. I consent to allow my intermediate service provided my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reasing the return or refund, and (c) the date of any refund. If applicable, I authorize to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution actent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial rization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancell ess days prior to the payment (settlement) date. I also authorize the financial institutions involve to receive confidential information necessary to answer inquiries and resolve issues related and identification number (PIN) below is my signature for the income tax return (original or amenonic Funds Withdrawal Consent. **Payer's PIN: check one box only**	er, transmitter, or electron for rejection of the trize the U.S. Treasury a count indicated in the tradination to debit the terminate the authorization requests must be ded in the processing of to the payment. I furtended) I am now author	onic return ransmission nd its designax preparate entry to the attion. To received the rackno izing and, i	originator n, (b) the gnated Fi- tion softw his account evoke (ca no later onic payr wledge the	or (ERO) reason inancial vare for nt. This ancel) a than 2 ment of
>	X I authorize GLOBAL TAXES LLC to enter or g	ienerate mv PIN 🗀	ter five digit		as my
	ERO firm name		n't enter all		
_	signature on the income tax return (original or amended) I am now authorizing.	N.I	01 1		
L	I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN and your return is filed using the Practitioner F below.				
Your	signature >	Date ►			
Snou	ise's PIN: check one box only				
Г		generate my PIN			as my
	ERO firm name	·	ter five digit		uo iiiy
	signature on the income tax return (original or amended) I am now authorizing.		n't enter all		
	I will enter my PIN as my signature on the income tax return (original or amender if you are entering your own PIN and your return is filed using the Practitioner F below.				
Spou	se's signature ►	Date ►			
	Practitioner PIN Method Returns Only—continu	e below			
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 er all zeros	2 7	1
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I ements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Prov	am submitting this retu	ırn in acco	rdanće w	
ERO's	's signature ► [Date ▶			
	ERO Must Retain This Form — See Instruc				

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

£1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		urn	202	3	OMB No. 1545-0	074	IRS Use Only	∕—Do not v	write or staple in	this space.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	parate instr	uctions.
Your first name FNU If joint return, s		iddle initial s first name and middle initial	Last na	KSHA E	POORNASH	RI				270	ocial security 77 32	260
2114 WH	EATG:	er and street). If you have a P.O. box, see RASS WAY ice. If you have a foreign address, also co			elow.	Sta		ZIP co		Check spouse	ential Election here if you, one if filing joint to this fund. O	or your ly, want \$3
MELISSA Foreign countr				Foreign p	rovince/state/c	TX	ty		n postal code	1	low will not on a contract of the contract of	change Spouse
Check only one box.	□ □ If y	Single Married filing jointly (even if only or Married filing separately (MFS) you checked the MFS box, enter the lalifying person is a child but not you	name (of your s	pouse. If you	ı che	☐ Qualifying secked the HOH	urviv	ing spouse	. ,	ild's name i	f the
Digital Assets Standard	exch	ny time during 2023, did you: (a) recenange, or otherwise dispose of a digneone can claim: You as a de	ital asse	et (or a fi	nancial intere	est ir	•	-	,	. ,	Yes	⊠No
Deduction		Spouse itemizes on a separate retur : Were born before January 2, 1	n or you		dual-status a	alien		hofo	ore January 2	2 1050	☐ Is blir	
Dependent	-		909 [T	lind Spo Social security		(3) Relationship	14	Check the b			
If more	(1) First name			number to you			Child tax c			Credit for other		
than four												
dependents, see instruction]
and check	اه ا]
here L	<u></u>	Tatal and a set from Farmer(a) NA O. In	1 /		-4:\							7 002
Income	1a	Total amount from Form(s) W-2, b	•		,							7 , 083.
Attach Form(s)		Household employee wages not re			. ,							
W-2 here. Also	С.	Tip income not reported on line 1a (see instructions)								. 10		
attach Forms W-2G and	d										l k	
1099-R if tax	е	Taxable dependent care benefits f			•					. 16		
was withheld.	Ť	Employer-provided adoption bene	etits fror	n Form 8	3839, line 29	•				. 11		
If you did not get a Form	g	Wages from Form 8919, line 6.								. 10	3	
W-2, see	h	Other earned income (see instruct	,							. <u>1</u> ł	1	0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions))		<u>li</u>					
	z	Add lines 1a through 1h								. 12	<u>z</u> 8	7,083.
Attach Sch. B	2a	Tax-exempt interest	2a				axable interest			. 2k)	
if required.	3a_	Qualified dividends	3a			b C	ordinary dividend	ds .		. 3k	י	
Chandand	4a	IRA distributions	4a			b T	axable amount			. 4k	י	
Standard Deduction for—	5a	Pensions and annuities	5a			b T	axable amount			. 5k)	
Single or	6a	Social security benefits	6a			b T	axable amount			. 6k)	
Married filing separately,	С	If you elect to use the lump-sum e	mp-sum election method, check here (see instructions)									
\$13,850 • Married filing	7	Capital gain or (loss). Attach Sche	dule D i	if require	d. If not requ	iired	, check here		[□		
 Married filing jointly or 	8	Additional income from Schedule	1, line 1	0						. 8	-	6,982.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is y	our total inc	ome	e			. 9	8	0,101.
\$27,700	10	Adjustments to income from Sche	stments to income from Schedule 1, line 26)		
 Head of household, 	11	Subtract line 10 from line 9. This is	s your a	djusted	gross incon	ne				. 11	8	0,101.
\$20,800 • If you checked	12	Standard deduction or itemized	deduct	tions (fro	m Schedule	A)				. 12		3 , 850.
any box under	13	Qualified business income deduct	ion fron	n Form 8	995 or Form	899	5-A			. 13		
Standard Deduction,	14	Add lines 12 and 13								. 14	1 1	3 , 850.
see instructions.	15	Subtract line 1/1 from line 11. If zer	n or les	ontor	0 This is w	our t	tavabla incomo			15		6 251

Form 1040 (2023	3)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	9,888.	
Credits	17	Amount from Schedule 2, lir	ne 3					17		
	18	Add lines 16 and 17						18	9,888.	
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lir	ne 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	9,888.	
	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 total tax					24	9,888.	
Payments	25	Federal income tax withheld	l from:							
	а	Form(s) W-2				25a 1	2,064			
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	12,064.	
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return	.,		26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27				
attaci Scii. Lio.	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								
	32	Add lines 27, 28, 29, and 31	32							
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	12,064.	
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		34	2,176.	
	35a	Amount of line 34 you want			is attached, che	ck here	🗆	35a	2,176.	
Direct deposit?	b	Routing number 1 1 1			c Type: 🛛	Checking] Savings	:		
See instructions.	d	Account number 2 8 4	0 1 6 9	1 4 4						
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37		
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	n with the IRS?	See			_	
Designee	ins	structions				LYes.	Complete	below.	⋉ No	
		Designee's Phone Personal name no. number (I						l identification		
Cian		der penalties of perjury, I declare t	hat I have examined		accompanying sche		, ,	the best	of my knowledge and	
Sign		lief, they are true, correct, and com								
Here	Yo	ur signature	Date	Your occupation	If ti	ne IRS se	nt you an Identity			
		-					Protection PIN, enter it here			
Joint return?					FULL STAC	1/ ,	e inst.)			
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.			Date	Spouse's occupat	Ide	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)			
		one no. (682) 263-797	0	Email address	DEEKSHA79	70@GMAIL.C	OM			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY.	A RAM SAC	GAR GUPTA	03/24/2024	P0208	32703	Self-employed	
Use Only	Fir	Firm's name GLOBAL TAXES LLC Ph						one no.	(678) 965-9522	
————	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816							m's EIN		

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

FNU DEEKSHA POORNASHRI

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.

Attachment Sequence No. 01 Your social security number 270-77-3260

	Additional Income			
	Taxable refunds, credits, or offsets of state and local income taxes			
a	Alimony received		. 2a	
b	Date of original divorce or separation agreement (see instructions):			
}	Business income or (loss). Attach Schedule C			
ŀ	Other gains or (losses). Attach Form 4797			
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att			-6 , 982
•	Farm income or (loss). Attach Schedule F			
7	Unemployment compensation		. 7	
3	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	

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 governr	nent		
	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		9a	
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)			
b	Deductible expenses related to income reported on line 8I 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			
_	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 here and			
	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.

Your social security number

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

OMB No. 1545-0074

FNU	DEEKSHA POORNASHRI						270-7	7-3260	
Part	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	ty, use	Schedule						
A [Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions .							Ye	s 🛚 No
ΒΙ	f "Yes," did you or will you file required Form(s) 1099? .							. <u> </u>	s 🗌 No
1a	Physical address of each property (street, city, state, ZIF	ode?	e)						
Α	D-807, BRIGADE GATEWAY DR RAJKUMAR ROA	AD MA	ALLESHW	JARAM	(W)	, BANGALO	RE IN	560055	 5
В	,					·			
С									
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental	and	Fair Rental Days			Persor Da	QJV	
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru	ne as ictions	a S.	В					
С				С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya		-	Self-Rental Other (descr			
						Propertie	es:		
ncon				Α		В			С
3	Rents received	3		5.	50.				
4	Royalties received	4							
Exper		_							
5	Advertising	5							
6	Auto and travel (see instructions)	7		1 01	= 0				
7 8	Cleaning and maintenance	8		1,0	50.				
9	Commissions	9							
10	Insurance	10							
11	Management fees	11		Ω.	30.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		0.	30.				
13	Other interest	13							
14	Repairs	14		1,82	20				
15	Supplies	15		1,63					
16	Taxes	16		,					
17	Utilities	17		2,20	00.				
18	Depreciation expense or depletion	18		•					
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		7,53	32.				
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		-6,98					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(6,98		()	(
23 a	Total of all amounts reported on line 3 for all rental prope	erties			23a		550.		
b	Total of all amounts reported on line 4 for all royalty prop			. [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			L	23e	7	,532.		
24	Income. Add positive amounts shown on line 21. Do not		•				. 24		
25	Losses. Add royalty losses from line 21 and rental real estate							(6,982.
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 Schedule 1 (Form 1040), line 5. Otherwise, include this ar						n . 26		-6,982.