# 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

SANTHOSH KUMAR SURAMPATTI KULANDASA  Spouse's social security number  RATHIFRIYA THANGAMUTHU  2027-577-7665  RATHIFRIYA THANGAMUTHU  2027-577-7665  Note: Form 1040-S5 filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income  1 1 105, 641. 2 Total tax  2 8, 911. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099  3 1 17, 130. 4 Amount you want refunded to you  5 Amount you owe  Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)  Under penalities of perjury, Ideater that I have examined a copy of the income tax return (original or amended) I am now authorizing come from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason or any delay in processing the return or refund, and (c) the date of any 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 or any delay in some intelligence in the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason or any delay in some intelligence in the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason or any delay in some intelligence in the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason or any delay in some intelligence in 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 tunds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for any refunding the processing the return or refund, and (e) the date of any refund. If applicable, in the time of the processing the return or refund, and (e) the date of any refunding the prepa	Submission Identification Number (SID)					
Spouse's parse    Part   Tax Return Information - Tax Year Ending December 31, 2023 (Enter year you are authorizing.)   Enter whole dollars only on lines 1 through 5.   Note: Form 1040-SS filter use line 4 only. Leave lines 1, 2, 3, and 5 blank.     1	Taxpayer's name	Social security	y number			
Part   Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.)	ANTHOSH KUMAR SURAMPATTI KULANDASA 198-27-3536					
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	Spouse's name	Spouse's soci	ial security number			
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 2 Total tax 2 R, 911. 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 1, 130. 4 Amount you want refunded to you 5 Amount you want refunded to you 5 Amount you want refunded to you 5 Amount you want refunded to you 6 S Amount you want refunded to you 7 Amount you want refunded to you 7 Amount you want refunded to you 8 S Amount you want refunded to you 9 Amount you want to you 9 Amount you 9 Amount you want to you 9 Amount 9	RATHIPRIYA THANGAMUTHU	027-57-	-7665			
Note: Form 1040-SS fliers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1	Part I Tax Return Information — Tax Year Ending December 31, 2023	Enter year you ar	re authorizing.)			
1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 17, 130. 4 Amount you want refunded to you 4 3, 219. 5 Amount you own trefunded to you 5 Amount you own trefunded to you 6 Amount you want refunded to you 7 Amount you want refunded to you 8 Amount you want refunded to you 9 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) 1 Under penalties of perjuny, Ideater that I have assumed a copy of the income tax return (original or nameded) I am now authorizing in the best of my knowledge and belief, it is the, 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 and (c) the date of any return. If applicable, I authorize the U.S. Treasing and (c) the date of any return, If applicable, I authorize the U.S. Treasing and its designator (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 ny delay in gloricable its authorize the U.S. Treasing and (c) the date of any return, If applicable, I authorize the U.S. Treasing and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debt) entry to the inancial institution account indicated in the tax preparation software for payment of my federal taxes over door the treatment (estimated that a. I also authorize the financial institution account institution account institution account institution and the payment of the payment (estimated that a. I also authorize the financial institution account institution to the payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the payment of the section of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment of the el	Enter whole dollars only on lines 1 through 5.					
2	Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
A mount you want refunded to you	1 Adjusted gross income		1 105,64	1.		
Amount you want refunded to you  5 Amount you owe  Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)  Under penalties of perjun, 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 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 racepit or reason for rejection for 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 instinct an ACH electronic funds withdrawal (direct deble) entry to the financial institution account indications on software for the tax preparation software for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury financial Agent and a fifect until I notify the U.S. Treasury Financial Agent in the tax preparation software for authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent at 1 seas 3-34-357. Payment connecilation 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 Corosent.  Taxpayer's PIN: check one box only    I will enter my PIN as my signature on the	2 Total tax		2 8,91	1.		
Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalities of perjury, 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, 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 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 refunct in Implicate, the IAS (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 refunct it applicable, I authorize the IAS (a) and acknowledgement of region or rejection of the paymand in Stephania (b) and the IAS (a) and acknowledgement of region or rejection of the refunding payment of my federal taxes owed on this return and/or a payment of resident tax, and the financial institutions into terminate their to treminate that to terminate that the payment of the payment of the payment of the payment of 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.  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 com	3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		<b>3</b> 17,13	0.		
Part II	4 Amount you want refunded to you		<b>4</b> 8,21	9.		
Under penalties of perjuy, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the less of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above en 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 (e) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termination 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 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 unthorized to interminate the sunthorization in a sunthorization in the processing of the electronic payment of the payment. I must contact the U.S. Treasury Financial Agent at 1-888-353-4637. Payment cancellation requests must be received no later than 2 payment (estiment) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquires and resolve issues related to the payment. I truther acknowledge that the presental dentification number (PN) below in my signature for 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 en	5 Amount you owe		-			
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Taxpayer's PIN: check one box only	return (original or amended) I am now authorizing. I consent to allow my intermediate service provide to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reast for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I author Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution acc payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financia authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancella business days prior to the payment (settlement) date. I also authorize the financial institutions involve taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or amendation).	r, transmitter, or electro on for rejection of the traize the U.S. Treasury ar count indicated in the tall institution to debit the terminate the authorization requests must be ed in the processing of to the payment. I furth	nic return originator (E ansmission, (b) the rea nd its designated Finan ax preparation software entry to this account. ition. To revoke (cance received no later tha the electronic paymen ther acknowledge that	ERO) ason notal er for This el) a an 2 nt of the		
I authorize GLOBAL TAXES LLC 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 GLOBAL TAXES LLC to enter or generate my PIN 7 7 6 6 5 5 as my 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.  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 Method Returns Only—continue below  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 2 2 4 4 9 6 0 8 2 7 1  Don't enter all zeros  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.						
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 GLOBAL TAXES LLC to enter or generate my PIN 7 7 6 6 5 as my 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. 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 ▶ Practitioner PIN Method Returns Only—continue below  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.  Date ▶ Don't enter all zeros  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 ▶	X I authorize GLOBAL TAXES LLC to enter or go	ř Ente	er five digits, but	my		
Spouse's PIN: check one box only    Authorize   GLOBAL TAXES   LLC	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN <b>and</b> your return is filed using the Practitioner P					
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Practitioner PIN Method Returns Only—continue below  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.  Don't enter all zeros  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 ▶	<ul> <li>✓ I authorize GLOBAL TAXES LLC to enter or gone if you are entering your own PIN and your return is filed using the Practitioner P</li> </ul>	Enter don  I) I am now authorizin	er five digits, but o't enter all zeros ng. Check this box o	nly		
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.  Don't enter all zeros  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's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.  Don't enter all zeros  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		e below				
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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 <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income Tax Returns.  ERO's signature ▶  Date ▶	<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.					
<u> </u>	authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I	am submitting this retu	rn in accordance with			
<u> </u>	FRO's signature	lata 🕨				
				—		

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



OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space

For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding	•		, 20		See se	parate ins	structions.
Your first name and middle initial Last name					Your so	cial secur	rity number					
SANTHOSE	ווא ו	MAR	SIIRZ	AMPATTI KULAN	. בחו	SA				198	27 3	3536
		s first name and middle initial	Last na		1011	011						ecurity numbe
RATHIPRI	ΥA		ו מאד	IGAMUTHU						027	57   7	7665
		er and street). If you have a P.O. box, see						Apt. no.				tion Campaigr
242 S BE		• •						260			here if you	
		ce. If you have a foreign address, also co	mplete	spaces below.	Sta	ate	ZIP				0,	intly, want \$3
Tempe					Az	Z	852	281			this fund low will no	l. Checking a
Foreign country	name			Foreign province/state/				gn postal	code		x or refund	
											You	
Filing Status	, [	Single				☐ Head of he	ousel	nold (HO	H)			
Check only	_	Married filing jointly (even if only or	ne had	income)				`	,			
one box.		Married filing separately (MFS)		,		☐ Qualifying	survi	ving spo	use	(QSS)		
0.10 20711	If y	you checked the MFS box, enter the	name	of your spouse. If you	u che						ild's nam	e if the
		ialifying person is a child but not you		ndent:								
	^+		-: (									
Digital		ny time during 2023, did you: (a) rece nange, or otherwise dispose of a digi					-				Yes	⊠ No
Assets		neone can claim: You as a de					1) ! (3	ee iiisiit	JULIOI	15.)		
Standard Deduction			•			•						
Deduction	Ш,	Spouse itemizes on a separate return	ii or yo	u were a duar-status	allei	ı						
Age/Blindness	You	: Were born before January 2, 1	959 [	Are blind Spo	ouse	: Was bor	n bef	ore Janu	ary 2	2, 1959	☐ Is t	olind
Dependents	s (see	instructions):		(2) Social security	,	(3) Relationsh	ip (	4) Check	the b	ox if qual	ifies for (se	e instructions):
If more	(1) F	1) First name Last name		number		to you	Child tax		tax c	redit	Credit for c	other dependents
than four												
dependents, see instructions	. —											
and check												
here											<u> </u>	
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	ee instructions) .						. 1a	1 1	16,491.
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	Tip income not reported on line 1a (see instructions)							. 10	:	
attach Forms W-2G and	d	Medicaid waiver payments not rep	orted o	on Form(s) W-2 (see i	nstru	uctions)				. 1d	1	
1099-R if tax	е	Taxable dependent care benefits f	rom Fo	rm 2441, line 26						. 1e	,	
was withheld.	f	Employer-provided adoption bene	fits fror	n Form 8839, line 29						. 1f		
If you did not get a Form	g	Wages from Form 8919, line 6 .								. 1g	,	
W-2, see	h	Other earned income (see instructi	,				· .			. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		<u>li</u>						1.6 4.01
	Z	· ·								. 1z		16,491.
Attach Sch. B if required.	2a		2a			axable interest				. 2b		
ii required.	<u>3a</u>		3a			Ordinary divider			•	. 3b		
Standard	4a		4a			axable amoun			•	. 4b		
Deduction for—	5a	<del>-</del>	5a			axable amoun			•	. 5b		
Single or Married filing	6a	,	6a			axable amoun	t		٠ ,	. 6b	,	
separately,	_ C	If you elect to use the lump-sum e		•	•	,			. L	╡┞┋		
\$13,850 Married filing	7	Capital gain or (loss). Attach Sched				-			٠ ـ	-         7		10 050
jointly or Qualifying	8	Additional income from Schedule	•							. 8		10,850.
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•						. 9		05,641.
Head of	10	Adjustments to income from Sche							٠	. 10		OF C41
household, [ \$20,800	11	Subtract line 10 from line 9. This is	•	-			•		•	. 11		05,641.
If you checked [	12	Standard deduction or itemized		•	,				•	. 12		27,700.
any box under Standard	13	Qualified business income deducti	ion iron	I FUIII 0995 OF FORM	1 099	ιυ-A			•	. 13		27 700
Deduction, see instructions.	14 15	Add lines 12 and 13	on or lea			tavahle incom			•	. 14		27 <b>,</b> 700 <b>.</b>

Form 1040 (2023	3)								Page <b>Z</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	8,911.
Credits	17	Amount from Schedule 2, lin	ne 3					17	
	18	Add lines 16 and 17						18	8,911.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	8,911.
	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	8,911.
<b>Payments</b>	25	Federal income tax withheld	l from:						
_	а	Form(s) W-2				<b>25a</b> 17	7,130		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	17,130.
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			
allacii Scii. ElC.	28	Additional child tax credit from	m 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	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	17,130.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amoun	t you <b>overpaid</b>		34	8,219.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	B is attached, chec	k here	. 🗆	35a	8,219.
Direct deposit?	b	Routing number 1 2 2			c Type: 🛛	Checking	Savings		
See instructions.	d	Account number 7 9 6	9 1 5 3	2 7					
	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				See			
Designee		structions				. 🗌 Yes. C	omplete	below.	<b>⋉</b> No
		esignee's		Phone			onal iden	tification	
<del></del>		me	hat I have evenine	no.	accompanying ashes		ber (PIN)	the best	of my line wiledge and
Sign		der penalties of perjury, I declare to lief, they are true, correct, and com							
Here	Vo	ur signature		Date	Your occupation		If +1	ne IRS se	nt you an Identity
	10	di Signature		Date	Tour occupation			PIN, enter it here	
Joint return?					SOFTWARE E	NGINEER	(se	e inst.)	
See instructions.	Sp	ouse's signature. If a joint return, I	<b>both</b> must sign.	Date	Spouse's occupation	on			nt your spouse an
Keep a copy for your records.					HOME MARKED	- 1	ntity Prot e inst.)	ection PIN, enter it here	
,		(400) 400 400		- " "	HOME MAKER		(30		
		one no. (480) 409-428 eparer's name	Preparer's signat	Email address	SANTHOZ4G@	Date COM	PTIN		Check if:
Paid		·	'		מיידייי מחחוו			2772	Self-employed
Preparer		4 PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	03/05/2024		32703	
Use Only		m's name GLOBAL TA							(678) 965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	INSWICK N	N NARTP		Fir	n's EIN	84-3171965

### **SCHEDULE 1** (Form 1040)

# **Additional Income and Adjustments to Income**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/l

Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.	Sequence No. <b>01</b>	
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soci	al security number
S SURAMPATTI K	ULANDASA & R THANGAMUTHU	198-27	-3536

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	-10,850.
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. Enter	here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-10,850.

Page **2** Schedule 1 (Form 1040) 2023

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	-basis	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)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b		_	
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c		_	
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e		-	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful	041			
	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 tax law violations	04:			
	Housing deduction from Form 2555	24i 24j		-	
J I	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24j		-	
k		24k			
_	1041)	24K			
Z		24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b>			23	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		23/24 PRO		le 1 (Form 1040) 2023
	BAA	1\L'V UZ/	LUIZA FINO		

#### **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 Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number S SURAMPATTI KULANDASA & R THANGAMUTHU 198-27-3536 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) IN 638011 KUMALAN KUTTAI, ERODE TAMILNADU Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed 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 . 3 650. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 1,250. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 1,755. 11 Management fees . . . . . . . . 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 14 2,245. Repairs . . . . 15 Supplies 15 2,785. 16 16 Taxes 17 Utilities . . . . . . . 17 3,465. 18 18 Depreciation expense or depletion . . . . . . Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 . . . . . 11,500. 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 -10,850.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . 22 10,850.) 650. 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 23d Total of all amounts reported on line 18 for all properties 11,500. Total of all amounts reported on line 20 for all properties 23e 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 10,850. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 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

26

-10,850.

**Passive Activity Loss Limitations** 

See separate instructions.

Attach to Form 1040, 1040-SR, or 1041.

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 Attachment Sequence No. **858** 

Department of the Treasury Internal Revenue Service Name(s) shown on return

S SURAMPATTI KULANDASA & R THANGAMUTHU

2023 Passive Activity Loss

Identifying number 198-27-3536

	Caution: Complete Parts IV and V before completing Part I.		
Renta Allowa			
1a b c d	Activities with net income (enter the amount from Part IV, column (a))	1d	-10,850.
All Ot	ther Passive Activities		
2a b c d	Activities with net income (enter the amount from Part V, column (a))	2d	
3	Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used	3	-10,850.
	If line 3 is a loss and: • Line 1d is a loss, go to Part II.		,
	<ul> <li>Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.</li> </ul>		

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Part | Special Allowance for Rental Real Estate Activities With Active Participation

Special Allowance for Rental Real Estate Activities with Active Participation							
	Note: Enter all numbers in Par	t II as positive amounts. See instruct	ions for an	exam	ole.		
4	Enter the <b>smaller</b> of the loss on line 1	d or the loss on line 3				4	10,850.
5	Enter \$150,000. If married filing separ	rately, see instructions	5		L50 <b>,</b> 000.		
6	Enter modified adjusted gross income	e, but not less than zero. See instruct	tions 6	1	L16,491.		
	<b>Note:</b> If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	I to line 5, skip lines 7 and 8 and ente	er -0-				
7	Subtract line 6 from line 5		7		33,509.		
8 Multiply line 7 by 50% (0.50). <b>Do not</b> enter more than \$25,000. If married filing separately, see instructions							16,755.
9 Enter the <b>smaller</b> of line 4 or line 8. If line 3 includes any CRD, see instructions							10,850.
Par	t III Total Losses Allowed	-					,
10	Add the income, if any, on lines 1a an	id 2a and enter the total				10	0.
11	Total losses allowed from all passiv	ve activities for 2023. Add lines 9 and	d 10. See ir	struct	ions to find		
	out how to report the losses on your tax return						10,850.
Par	t IV Complete This Part Before	e Part I, Lines 1a, 1b, and 1c. Se	ee instruct	ions.			
	Name of activity	Current year	Prior ye	ars	Ove	rall ga	n or loss

None of activity	Currer	nt year	Prior years	Overall gain or loss			
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss		
KUMALAN KUTTAI, ERODE	0.	10,850.			10,850.		
Total. Enter on Part I, lines 1a, 1b, and 1c	0.	10,850.					

Form 8582 (2023) Page **2** 

Part V Complete This Part Before	e Part I, Lines 2	a, 2b,	<b>and 2c.</b> S	ee instru	ctions.			•
Name of activity					Prior years Ove		erall gain or loss	
Name of activity	(a) Net income (line 2a)	(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss
Total. Enter on Part I, lines 2a, 2b, and 2c								
Part VI Use This Part if an Amou	nt Is Shown on I	Part II,	, <b>Line 9.</b> S	ee instrud	ctions.			
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss		<b>(b)</b> Ra	atio	(c) Special allowance		(d) Subtract column (c) from column (a).
KUMALAN KUTTAI, ERODE	E Ln 22		10,850.	1.0000	0000	10,85	0.	0.
Total			10,850.	1.0	0	10,85	0.	0.
Part VII Allocation of Unallowed L	osses. See instr					,		I
Name of activity	Form or sch and line nu to be report (see instruc	mber ed on	(a) l	Loss	(b) Ratio		(с	) Unallowed loss
Total						1.00		
Part VIII Allowed Losses. See instr								
Name of activity	Form or sch and line nu to be report (see instruc	nber ed on	(a) l	(b) U		(b) Unallowed loss		c) Allowed loss
Total								