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

Submission Identification Number (SID)	
Taxpayer's name	Social security number
KALYANI ARUNARTHI	235-71-3602
Spouse's name	Spouse's social security number
Part I Tax Return Information — Tax Year Ending December 31, 2023 (E	Enter year you are authorizing.)
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 53,872.
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	ond keep a copy of your return)
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or ame	
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accour payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial insauthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terr payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved it taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amende Electronic Funds Withdrawal Consent.	ransmitter, or electronic return originator (ERO) or rejection of the transmission, (b) the reason the U.S. Treasury and its designated Financial nt indicated in the tax preparation software for stitution to debit the entry to this account. This minate the authorization. To revoke (cancel) an requests must be received no later than 2 in the processing of the electronic payment of the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
I authorize GLOBAL TAXES LLC to enter or gene signature on the income tax return (original or amended) I am now authorizing.	erate my PIN 1 3 6 0 2
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 below.	
Your signature ▶ Date	e >
Spouse's PIN: check one box only	
I authorize to enter or gene	erate my PIN as my
ERO firm name	Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.	
Spouse's signature Date	
Practitioner PIN Method Returns Only—continue be	9 9
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 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 inco authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Provider	submitting this return in accordance with the
EDO's signature	
ERO's signature Date ERO Must Retain This Form — See Instruction	

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



£104 (partment of the Treasury—Internal Revenue ServS. Individual Income Tax		rn d	2023	3	OMB No. 1545-0	074	IRS Use On	ly—Do not	write or staple	e in this space.
For the year Ja	For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 20							See se	See separate instructions.			
Your first name	e and n	niddle initial	e	<u>-</u>					Your social security number			
KALYANI			ARUNA	RTHI						235	71 3	3602
If joint return, s	pouse	's first name and middle initial	Last nam	ie						Spouse	e's social se	ecurity numbe
Home address	(numb	per and street). If you have a P.O. box, see	instruction	ns.				A	ot. no.	Preside	ential Elect	tion Campaigr
15510 R	anch	n Raod 620 N						1	207		here if you	,
City, town, or p	oost of	fice. If you have a foreign address, also co	omplete spa	aces belov	w. :	State	e Z	ZIP co	de	1000		intly, want \$3 . Checking a
AUSTIN						TX		787	17		low will no	
Foreign countr	y name	Э	Fo	oreign pro	vince/state/co	ounty	/ F	oreigr	n postal code	your ta	x or refund	d. Spouse
Eiling Status	<u> </u>	☑ Single				[☐ Head of hou	iseho	NG (HOH)		100	
Filing Status	, <u>,</u>	Married filing jointly (even if only o	ne had in	come)			Ticad of fice	100110	, (11011)			
Check only one box.	Ī	☐ Married filing separately (MFS)	no naa m	001110)		[Qualifying s	urvivi	na spouse	(QSS)		
one box.	If	you checked the MFS box, enter the	e name of	vour spo	ouse. If you	che					nild's nam	e if the
		ualifying person is a child but not you										
 Digital		any time during 2023, did you: (a) rec	The state of the s		Transport of the same	-						
Assets		hange, or otherwise dispose of a dig						? (Se	e instruction	ons.)		⊠ No
Standard Deduction		neone can claim: You as a de Spouse itemizes on a separate retur					a dependent)			
		·				7	D Week and	L . C .		0.4050		eller el
		u: Were born before January 2, 1	1959	Are blin	•	ıse:		(4)				olind e instructions):
•		e instructions): First name Last name			cial security number		(3) Relationship to you	(4)	Child tax		1	ther dependents
If more than four	(1)	- Hot Hame					,					
dependents,	_							+				Ħ
see instruction and check	s								一片			i i
here []											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	instructi	ons)					. 1	a	59,666.
	b	Household employee wages not re	eported o	n Form(s	s) W-2					. 11	b	
Attach Form(s) W-2 here. Also	C	Tip income not reported on line 1a	a (see inst	ructions)						. 10	С	
attach Forms	d	Medicaid waiver payments not rep	ported on	Form(s)	W-2 (see ins	struc	ctions)			. 10	d	
W-2G and 1099-R if tax	е	Taxable dependent care benefits	from Form	2441, li	ne 26 .					. 10	е	
was withheld.	f	Employer-provided adoption bene	efits from I	Form 88	39, line 29					. 1	f	
If you did not	g	Wages from Form 8919, line 6 .								. 19	g	
get a Form W-2, see	h	Personal and automatical states of course of the state of		. /-				y x		. 11	h	0.
instructions.	i	Nontaxable combat pay election (see instru	ctions)			<u>1i</u>	5				E0 666
	Z	-								. 1		59,666.
Attach Sch. B if required.	2a		2a				xable interest			. 21		
ii required.	3a		3a				rdinary dividend			. 3		
Standard	4a		4a				xable amount . xable amount .			. 41		
Deduction for—	5a		5a 6a				axable amount .			. 5l		
Single or Married filing	6a	If you elect to use the lump-sum e		othod c						. 6	5	
separately, \$13,850	7	Capital gain or (loss). Attach Sche			15						,	
Married filing	8	Additional income from Schedule			153					. 8		-5,794.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9		53,872.
surviving spouse, \$27,700	10	Adjustments to income from Sche								. 10		
Head of household,	11	Subtract line 10 from line 9. This is								. 1		53,872.
\$20,800	12	Standard deduction or itemized								. 13		13,850.
If you checked any box under	13	Qualified business income deduct					5-A			. 1		
Standard Deduction,	14	Add lines 12 and 13								. 1		13,850.
see instructions.	15	Subtract line 1/1 from line 11. If zer	ro or loce	ontor O	This is you	+ .	avabla inaama			4/	e	10 022

Form 1040 (202	3)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	4,583.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	4,583.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	4,583.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	4,583.
Payments	25	Federal income tax withheld from:		
-	а	Form(s) W-2		
	b	Form(s) 1099		
	C	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	7,466.
If you have a	26	2023 estimated tax payments and amount applied from 2022 return	26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)		
allach Sch. ElC.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	7,466.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,883.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	2,883.
Direct deposit?	b	Routing number 1 1 1 0 0 0 0 2 5 c Type: X Checking Savings		
See instructions.	d	Account number 4 8 8 1 1 1 1 7 1 1 1 9 8		
	36	Amount of line 34 you want applied to your 2024 estimated tax		
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
Third Party	Do	you want to allow another person to discuss this return with the IRS? See		
Designee	ins	structions	selow.	⋉ No
		signee's Phone Personal identi	fication	
Cian		me no. number (PIN) der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to t	he hest	of my knowledge and
Sign		lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		,
Here	Yo	ur signature Date Your occupation If the	e IRS ser	nt you an Identity
		Prote		IN, enter it here
Joint return?		SOLIMINAL ENGINEER ,	inst.)	
See instructions. Keep a copy for				nt your spouse an ection PIN, enter it here
your records.			inst.)	ection Firm, enter it here
	Ph	one no. (737)298-5899 Email address KALYANIARUNARTHI86@GMAIL.COM	5 to 7 to	
		eparer's name Preparer's signature Date PTIN		Check if:
Paid		M PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/03/2024 P0208	2703	Self-employed
Preparer				678) 965-9522
Use Only		A RECORD OF THE PROPERTY OF TH	's EIN	84-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

KALYANI ARUNARTHI

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

235-71-3602

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. Att	ach Schedule E .	5	-5,794.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	<u> </u>
8	Other income:			
а	Net operating loss	8a ()	>	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form	0- /		
_	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or	04		
	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	
9 10	Combine lines 1 through 7 and 9. This is your additional income . Ente		3	
10	1040 1040-SR or 1040-NR line 8	i nele and on Foili	10	-5.794

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	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		23	
23 24	Other adjustments:	W	23	
	Jury duty pay (see instructions)			
a 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			
	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			
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 . Ente			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	

SCHEDULE E (Form 1040)

Department of the Treasury

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

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

KALY	YANI ARUNARTH	I				23	35-71-360	2	
Part		Loss From Rental Real Estate ar	nd Royalties						
	Note: If you a	re in the business of renting personal prope or loss from Form 4835 on page 2, line 40.	erty, use Sched u	ı le C . See i	instructions. If y	you are a	an individual, re	eport farm	
A 1		ayments in 2023 that would require you							_
В		will you file required Form(s) 1099? .					🗀 1	es No	_
1a	Physical address	s of each property (street, city, state, ZI	IP code)						
Α	IN							7	_
В									_
С									_
1b	Type of Property	2 For each rental real estate prope		Fair Renta	I P	ersonal Use	0.07		
	(from list below)	above, report the number of fair	rental and	Days			Days	QJV	
Α	3	personal use days. Check the Q		Α	365	7 /	0		
В		if you meet the requirements to qualified joint venture. See instru		В					
С		quaimed joint venture. See instit	uctions.	C					
Туре	of Property:								
1	Single Family Resid	dence 3 Vacation/Short-Term Rer	ntal 5 Lar	nd	7 Self-Rer	ntal			
2	Multi-Family Resid	ence 4 Commercial	6 Ro	yalties	8 Other (d	escribe	e)		
					$\overline{}$	erties:			_
l				A	Prop	B		С	-
Incon 3			3		10.	ь			_
4			4	7 -	10.				-
Exper		d	7						_
⊑xpei 5			5						
6		ee instructions)	6						-
7		ntenance	7	1,23	30.				-
8			8	1,20	,				-
9			9						-
10		rofessional fees	10						-
11		S	11	7.4	10.				-
12		paid to banks, etc. (see instructions)	12						-
13		· · · · · · · · · · · · · · · · · · ·	13						-
14			14	1,98	34.				-
15			15	1,74					-
16			16	-/ /					-
17			17	84	10.				-
18		ense or depletion	18						_
19	Other (list)		19						_
20		add lines 5 through 19	20	6,53	34.				-
21		rom line 3 (rents) and/or 4 (royalties). If		For rectional				-	_
		see instructions to find out if you must							
			21	-5,79	94.				
22	Deductible rental	real estate loss after limitation, if any,							_
		ee instructions)	22 (5,79	4.))()
23 a	Total of all amoun	ats reported on line 3 for all rental prope	erties		23a	7	40.		Ì
b		its reported on line 4 for all royalty prop			23b				
С	Total of all amoun	its reported on line 12 for all properties		[23c				
d		its reported on line 18 for all properties		[23d				
е	Total of all amoun	its reported on line 20 for all properties		[23e	6 , 5	34.		
24	Income. Add pos	itive amounts shown on line 21. Do no	t include any l	osses			24		
25	Losses. Add royal	ty losses from line 21 and rental real esta	te losses from I	ine 22. En	ter total losses	s here	25 (5,794.)
26		estate and royalty income or (loss).							
		I, and IV, and line 40 on page 2 do no							
	Schedule 1 (Form	1040), line 5. Otherwise, include this a	mount in the t	otal on lin	e 41 on page	2 .	26	-5 , 794.	