## 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 seci	Social security number							
YASHWANTH VARRE	882-2								
Spouse's name	Spouse's s	's social security number							
Part I Tax Return Information — Tax Year Ending December 31, 202	3 (Enter year you	r 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		,944.					
2 Total tax		2		,384.					
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		3,710.					
4 Amount you want refunded to you		4	2	2,326.					
5 Amount you owe	et and keep a co	py of v	our retu	ırn)					
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in P return (original or amended) I am now authorizing. I consent to allow my intermediate service provide	art I above are the a	mounts f	rom the in	come tax					
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reas for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I autho Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution ac 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 cancell business days prior to the payment (settlement) date. I also authorize the financial institutions involvaxes 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 ame Electronic Funds Withdrawal Consent.	rize the Ú.S. Treasury count indicated in the al institution to debit to terminate the authon ation requests must used in the processing to the payment. If	and its of tax prepare entry ization. The received of the elurther accordance is to be and the elurther accordance in the elury in the el	designated paration so to this according revoke wed no lat ectronic parking which we have the control of the co	Financial ftware for ount. This (cancel) a er than 2 ayment of a that the					
Taxpayer's PIN: check one box only									
	enerate my PIN	9   9   7	7   8   2	as my					
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	•		digits, but r all zeros	,					
I will enter my PIN as my signature on the income tax return (original or amender if you are entering your own PIN <b>and</b> your return is filed using the Practitioner F below.									
Your signature ▶	Date ▶								
Spouse's PIN: check one box only	_								
· _	enerate my PIN			as my					
ERO firm name			digits, but	_					
signature on the income tax return (original or amended) I am now authorizing.			r all zeros						
I will enter my PIN as my signature on the income tax return (original or amender if you are entering your own PIN <b>and</b> your return is filed using the Practitioner Fibelow.									
<u>-  </u>	Date ►								
Practitioner PIN Method Returns Only—continue	e below								
Part III Certification and Authentication — Practitioner PIN Method Only									
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2 4 9	6 0	8 2 7	7 1					
	25/110	20							
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Proventies.	am submitting this re	eturn in a	accordance						
ERO's signature ►	Date ▶								
ERO Must Retain This Form — See Instruction Don't Submit This Form to the IRS Unless Request									

# E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



<b>1040</b>		artment of the Treasury—Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this spac	e.	
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, ending , 20							See separate instructions.				
Your first name	and m	iddle initial	Last na	me							Your social security number				
YASHWAN'	ГН		VARR	E							882	29	9782		
		s first name and middle initial	Last na								Spouse's social security nu				
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	nne					Apt. no.		Drooido	ntial Ele	etion Comp		
6125 ROS			, ii iSti dotiv	J113.					502	1	Presidential Election Campa Check here if you, or your				
		ice. If you have a foreign address, also co	mplete s								spouse if filing jointly, want \$				
SANDY SI		,			GA 303						•		nd. Checking	j a	
Foreign countr			F	oreign pr	rovince/state/				n postal c		your tax		not change ind.		
J	•			0 1			•		'		,	Yo		use	
Filing Status	s 🗵	Single	'				Head of he	ouseh	old (HOH	<del>-</del> 1)					
Check only		Married filing jointly (even if only o	ne had i	ncome)			_								
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spo	use (0	QSS)				
		you checked the MFS box, enter the			pouse. If you	u che	ecked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the		
	qu	ualifying person is a child but not you	ur depen	ident:											
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	d, award, or	payr	nent for prope	rty or	services	); or (	b) sell,				
Assets	exch	nange, or otherwise dispose of a dig	ital asse					et)? (Se	e instru	ction	s.)	☐ Ye	es 🗵 No		
Standard		neone can claim: 🔲 You as a de	pendent	t 🗌	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 bl	ind <b>Sp</b>	ouse	: Was bor	n befo	ore Janua	ary 2,	, 1959		s blind		
Dependent	s (see	instructions):		(2) S	Social security	,	(3) Relationsh	<sub>iip</sub> (4	) Check t	he bo	x if quali	fies for (	see instructio	ns):	
If more	(1) F	1) First name Last name			number to you				Child t	ax cre	edit	Credit fo	r other depend	lents	
than four															
dependents, see instruction	e —														
and check	. —								[						
here L															
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		97,500	<u>).</u>	
Attach Form(s)	b	Household employee wages not re	•								1b				
W-2 here. Also attach Forms	C	Tip income not reported on line 1a (see instructions)													
W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									1d				
1099-R if tax	e	Taxable dependent care benefits f									1e				
was withheld.	f	Employer-provided adoption bene	TITS Trom	ı Form 8	839, line 29	•					1f				
If you did not get a Form	g	Wages from Form 8919, line 6 .	• • •								1g			O .	
W-2, see	h :	Other earned income (see instruct	,					i.			1h			٠.	
instructions.	i _	Nontaxable combat pay election (s	see instr	uctions)			<u>1i</u>				- 4-		97,500	<b>1</b>	
AH		Add lines 1a through 1h	 20		· · i	 ьт	 axable interest				1z		685		
Attach Sch. B if required.	2a	· –	2a 3a				axable interest Ordinary divide:				2b 3b			<del>-</del>	
	3a_ 4a	· · ·	4a				axable amoun				4b				
Standard	5a	_	<del>4</del> а 5а				axable amoun				5b				
Deduction for— Single or	6a	_	6a								6b				
Married filing	C	,								7					
separately, \$13,850	7	·	If you elect to use the lump-sum election method, check here (see instructions)												
Married filing jointly or	8	. • ,	Additional income from Schedule 1, line 10								<u>7</u>   8		-11,241	1 .	
Qualifying	9		, 7, and 8. This is your <b>total income</b>							9		86,944			
surviving spouse, \$27,700	10	Adjustments to income from Sche		•							10			<u> </u>	
Head of household,	11	Subtract line 10 from line 9. This is									11		86,944	1.	
\$20,800	12	Standard deduction or itemized	•	-	_						12		13,850		
If you checked any box under	13	Qualified business income deduct				-					13			·	
Standard Deduction,	14										14		13,850	J.	
see instructions.	15	Subtract line 14 from line 11. If zer									15		73 094		

Form 1040 (202	3)							Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from For	rm(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	11,384.
Credits	17					[	17	
	18	Add lines 16 and 17		18	11,384.			
	19	Child tax credit or credit for other depende	[	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	22	11,384.				
	23	Other taxes, including self-employment tax	23	0.				
	24	Add lines 22 and 23. This is your total tax	24	11,384.				
Payments	25	Federal income tax withheld from:						,
	а	Form(s) W-2			<b>25a</b> 13	,710.		
	b	Form(s) 1099			25b	·		
	c	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	13,710.
16	26	2023 estimated tax payments and amount					26	
If you have a qualifying child,	27	Earned income credit (EIC)			27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 88		_	28	-		
	29	American opportunity credit from Form 88			29	-		
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15			31			
	32	Add lines 27, 28, 29, and 31. These are yo					32	
	33	Add lines 25d, 26, and 32. These are your					33	13,710.
Refund	34	If line 33 is more than line 24, subtract line					34	2,326.
riciana	35a	Amount of line 34 you want <b>refunded to y</b>			•	i in t	35a	2,326.
Direct deposit?	b	Routing number 0 2 1 2 0 0 1		<b>c</b> Type:		Savings		
See instructions.		Account number 3 8 1 0 6 0 1				9-		
	36	Amount of line 34 you want applied to you			36	- 1		
Amount	37	Subtract line 33 from line 24. This is the ai						
You Owe	0.	For details on how to pay, go to www.irs.g	37					
	38	Estimated tax penalty (see instructions)			38			
Third Party Designee		you want to allow another person to ditructions	iscuss this retu			mplete be	elow.	⊠ No
Designee		signee's	Phone			nal identific		<u></u>
	na		no.			er (PIN)		
Sign Here		der penalties of perjury, I declare that I have examinef, they are true, correct, and complete. Declaration		, , ,		,		, ,
пеге	Yo	ur signature	Date	Your occupation	If the I	If the IRS sent you an Identity		
						Protection (see in		IN, enter it here
Joint return? See instructions.			-	SOFTWARE I				<del> </del>
Keep a copy for your records.		ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupati	Identit	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Ph	one no. (201)360-1325	Email address	YASHWANTHVAR	RE02@GMAIL.CO	M		
Deid	Pre	parer's name Preparer's sign	nature		Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	A RAM SAGAR	GUPTA TALLAM	01/31/2024	P02082	703	Self-employed
Preparer	Fir	n's name GLOBAL TAXES LLC		one no. (678)965-9522				
Use Only	Fir	n's address 245 ROONEY CT E BF	RUNSWICK N	J 08816		Firm's	EIN	84-3171965
Go to www irs o	ov/Forr	1040 for instructions and the latest information		DAA	DEV 01/21/24 DDO			Form 1040 (2023)

# 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

YASHWANTH VARRE

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.

Your social security number 882-29-9782

Pai	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	-11,241.
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		
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:			
_		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			11 047
	1040. 1040-SR. or 1040-NR. line 8		10	-11,241.

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-b					
	officials. Attach Form 2106				12	<u> </u>
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	<u> </u>
16	Self-employed SEP, SIMPLE, and qualified plans				16	<u> </u>
17	Self-employed health insurance deduction				17	
18	Penalty on early withdrawal of savings				18	
19a	Alimony paid				19a	
b	Recipient's SSN					1
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					1
	· · · · · · · · · · · · · · · · · · ·	24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					1
	• • • • • • • • • • • • • • • • • • • •	24c				
d	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	24d				1
е	Repayment of supplemental unemployment benefits under the Trade					
		24e				
f		24f			-	1
g	• • • • • • • • • • • • • • • • • • • •	24g				
h	Attorney fees and court costs for actions involving certain unlawful					
	,	24h			-	1
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					
	<u>-</u>	24i			-	1
j	<u> </u>	24j			_	1
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	1414				
_	,	24k			-	
Z	Other adjustments. List type and amount:	24z				
25					25	
25 26	Total other adjustments. Add lines 24a through 24z				25	
20	Form 1040, 1040-SR, or 1040-NR, line 10				26	
	1011111010, 1040 011, 01 1040 1111, 11110 10	<u> </u>	· · ·	• •		

#### **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

YASI	ZASHWANTH VARRE 88								882	882-29-9782					
Par	Note: If you a	re in the	From Rental Real e business of renting per from Form 4835 on pag	sonal proper			e C. See	instru	ctions. If you ar	re an i	individua	, repo	ort far	m	
			ts in 2023 that would		to file	Form(s)	1099? S	ee ins	structions		[	Yes	s X	No	
В	lf "Yes," did you or	will you	u file required Form(s)	1099? .							[	Yes	S _	No	
1a	Physical address of each property (street, city, state, ZIP code)														
Α															
В															
С															
1b	Type of Property (from list below)		For each rental real es above, report the nun	nber of fair i	rental	and	Fair Rental Days			Personal Use Days			QJV		
Α	3		personal use days. Cl				Α		365		C	1	[		
В			if you meet the require qualified joint venture				В						[		
С			quaimed joint venture	. 000 1113114	Ctions		С						[		
1	of Property: Single Family Resid Multi-Family Resid		3 Vacation/Short 4 Commercial	t-Term Ren	tal	5 Land 6 Roya	-		Self-Rental Other (descri						
									Propertie	es:					
Incor							Α		В				С		
3					3		5	80.							
_ 4		d			4										
	nses:				_						ŀ				
5			· · · · · · · · · · · · · · · · · · ·		5 6										
6 7			ructions)		7		1,4	52							
8	Cleaning and maintenance						1,4	54.							
9					9										
10			onal fees		10										
11					11		9	12.							
12			o banks, etc. (see inst		12			12.							
13					13										
14					14		1,5	64.							
15					15		1,9								
16					16										
17					17		2,3	60.							
18	Depreciation expe	ense or	depletion		18		3,6	17.							
19	Other (list)				19										
20	Total expenses. A	Add line	s 5 through 19		20		11,8	21.							
21		see inst	e 3 (rents) and/or 4 (retructions to find out if	you must	21		-11,2	41.							
22			state loss after limitati uctions)		22	(	11,24	1.)	(		)(			)	
23a	Total of all amour	nts repo	orted on line 3 for all r	ental prope	rties			23a		580	0.				
b			orted on line 4 for all r					23b							
С			orted on line 12 for all					23c							
d	Total of all amour	nts repo	orted on line 18 for all	properties				23d		,617					
е		-	orted on line 20 for all					23e	11	,821					
24			mounts shown on line			-				_	24				
25	Losses. Add royal	ty losse	es from line 21 and rent	al real estate	e losse	es from lir	ne 22. Er	nter to	tal losses here	2	25 (	1	1,2	41.)	
26			and royalty income												
			IV, and line 40 on pa , line 5. Otherwise, inc							- 1	26	_	11,	241.	