## 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	y number		
SRIDHAR MAJETY	749-05-	-2321	
Spouse's name	al security numbe	r	
SHRAVYA DHARBA	578-77-	-7535	
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter	er year you ai	re 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		<b>1 1</b> 57	7,047.
<b>2</b> Total tax		2 3	3,079.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 4	1,295.
4 Amount you want refunded to you		4 1	,216.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy	y of your retu	ırn)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboreturn (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termina payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation rebusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I Electronic Funds Withdrawal Consent.	nitter, or electro- ijection of the tra J.S. Treasury ardicated in the ta- ion to debit the te the authoriza quests must be e processing of payment. I furti	nic return original ansmission, (b) to dissert designated as preparation so entry to this accution. To revoke received no late the electronic per acknowledge.	ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the
Taxpayer's PIN: check one box only			
▼ I authorize GLOBAL TAXES LLC to enter or generate	my PIN	2 3 2 1	as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	* Ent	er five digits, but i't enter all zeros	asiny
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN met below.  Your signature ▶			
Your signature ► Date ►	02-18-	2024	
Spouse's PIN: check one box only			
I authorize GLOBAL TAXES LLC to enter or generate FRO 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 if you are entering your own PIN and your return is filed using the Practitioner PIN met	Ent dor now authorizir		
below.  Spouse's signature ▶ Date ▶	02-18-2	024	
Practitioner PIN Method Returns Only—continue belov	v		
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.		6 0 8 2 5 er all zeros	7 1
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sub requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of	mitting this retu	rn in accordance	
ERO's signature ▶ Date ▶			
ERO Must Retain This Form — See Instructions			

Don't Submit This Form to the IRS Unless Requested To Do So

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



<b>1040</b>		artment of the Treasury-Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	ple in this sp	pace.
For the year Jan	ı. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ding			, 20		See ser	oarate i	nstruction	ns.
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	urity numb	ber
SRIDHAR			MAJE	TY							749	05	2321	
	pouse's	s first name and middle initial	Last na								Spouse's		security n	umbei
SHRAVYA			DHAR	BA							578	77	7535	
	(numbe	er and street). If you have a P.O. box, see						A	Apt. no.				ction Cam	npaign
2950 POF	RTAGI	F. BAY W							233	- 1			ou, or you	
		ce. If you have a foreign address, also co	mplete s	paces bel	low.	Sta	te	ZIP c			•	<b>.</b>	jointly, wa	
DAVIS						CA	4	956	16		•		nd. Checki not change	•
Foreign country	/ name		F	Foreign pr	rovince/state/			Foreig	ın postal c		your tax		•	C
												Yo	u 🗌 Si	pouse
Filing Status	<u>.                                     </u>	Single					Head of h	ouseh	old (HOH	H)				
Check only	$\overline{\mathbf{X}}$	Married filing jointly (even if only o	ne had i	ncome)					•	•				
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spou	use (0	QSS)			
	lf y	ou checked the MFS box, enter the	name c	of your sp	pouse. If yo	u che	ecked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	
	qu	alifying person is a child but not you	ır deper	ndent:										
Digital	Δt ar	ny time during 2023, did you: (a) rec	oivo (ac	a reward	d award or	navr	ment for prope	rty or	convices	): or (	h) call			
Digital Assets		nange, or otherwise dispose of a dig										ΠYe	s 🗵 N	lo
Standard		neone can claim:  You as a de		•			a dependent	7.57. (0.			<u> </u>			
Deduction	_	Spouse itemizes on a separate retur	•											
						anon								
Age/Blindness	You	: Were born before January 2, 1	959 _	_ Are bli	ind <b>Sp</b>	ouse	: U Was bor						blind	
Dependents				<b>(2)</b> S	Social security	/	(3) Relationship						see instruc	-
If more	(1) F	irst name Last name			number		to you		Child t	ax cre	edit	Credit fo	r other depe	endents
than four										<u> </u>			Щ_	
dependents, see instructions	s									<u> </u>			Щ_	
and check	, —								l	<u> </u>			ᆜ	
here L				L					Į			_		0.0
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		66,98	87.
Attach Form(s)	b	Household employee wages not re									1b			
W-2 here. Also	С.	Tip income not reported on line 1a (see instructions)								1c				
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	ictions)				1d			
1099-R if tax	e	Taxable dependent care benefits f									1e			
was withheld.	f	Employer-provided adoption bene	tits from	n Form 8	839, 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 instruct	,					i.			1h			0.
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		• •	<u>li</u>						66 0	07
AII	Z	Add lines 1a through 1h			· · i	 					1z		66,98	67. 16.
Attach Sch. B if required.	2a	· —	2a		35.		axable interes				2b			35.
	3a_		3a				ordinary divide				3b			<u>. cc</u>
Standard	4a		4a				axable amoun				4b			
Deduction for—	5a 6a		5a 6a				axable amoun axable amoun				5b 6b			
Single or Married filing	6a	Social security benefits Lif you elect to use the lump-sum e		method	chack bara			ι			7 00			
Separatery,						`	,				] ] <b>7</b>			
Married filing	7 8	Additional income from Schedule		•						٠ ـ	8		-10,39	91
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	•								9	+	57,0	
surviving spouse, \$27,700	10	Add lifes 12, 25, 35, 45, 35, 65, 7, Adjustments to income from Sche		-							10	+	37,0	<u> </u>
Head of	11	Subtract line 10 from line 9. This is									11		57,0	47
household, [	12	Standard deduction or itemized	•	-	_						12		27,7	
If you checked any box under	13	Qualified business income deduct				-					13			<del>.</del> .
Standard	14						о-A				14	1	27,70	0.0
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer									15	+	20 3	

Form 1040 (2023	3)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 4972	3 🗌			16	3,079.
Credits	17	Amount from Schedule 2, lir	ne 3						17	
	18	Add lines 16 and 17							18	3,079.
	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	B. If zero or less,	enter -0					22	3,079.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .				23	0.
	24	Add lines 22 and 23. This is	your total tax						24	3,079.
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25a	4	,295.		
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c							25d	4,295.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return				26	
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	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, lir	ne 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable	credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments					33	4,295.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you <b>c</b>	verpaid		34	1,216.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	s is attached, che	ck here		. 🗆	35a	1,216.
Direct deposit?	b	Routing number 0 3 1	1 7 6 1	1 0	c Type: 🛛	] Check	ing 🔲	Savings		
See instructions.	d	Account number 3 6 2	4 6 8 3	8 3 0 9	9					
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36	_			
Amount	37	Subtract line 33 from line 24	. This is the <b>amo</b>	ount you owe.						
You Owe		For details on how to pay, g	o to www.irs.gov	//Payments or	see instructions				37	
	38	Estimated tax penalty (see in	nstructions) .			38				
<b>Third Party</b>	Do	you want to allow another	person to disc	cuss this retu	n with the IRS?	See				
Designee	ins	structions				[	Yes. C	omplete	below.	<b>⋉</b> No
		Designee's Phone Personal identification no. number (PIN)							tification	
0:		der penalties of perjury, I declare t	hat I have examined		accompanying sch	dulos an		, ,	the best	of my knowledge and
Sign		ief, they are true, correct, and com								, ,
Here	Υo	ur signature		Date	Your occupation			l If th	e IRS se	nt vou an Identity
	10	ur signature M. Aidht	<b>–</b> .		Tour occupation					IN, enter it here
Joint return?		11.1.51	•	02-18-2024	SOFTWARE 1	ENGIN	EER	(see	e inst.)	
See instructions.		ouse's signature. If a joint return,	<b>both</b> must sign.	Date	Spouse's occupat	ion				nt your spouse an
Keep a copy for your records.		Y		02-18-2024 SOFTWARE ENGINEER					ntity Prot e inst.)	ection PIN, enter it here
•		(500) 400, 506	0							
		one no. (5 <sup>4</sup> 3 0)4 0 2 – 5 9 6 eparer's name	8 Preparer's signat	Email address	MAJETY.SRII	DATE Date	MAIL.CC	)M PTIN		Check if:
Paid		•	1 .		מווחשת שתודת.		0/2024		2772	Self-employed
Preparer		PRIYA RAM SAGAR GUPTA TALLAM	1	KAM SAGAR	GUPTA TALLAM	102/1	9/2024	P0208		
Use Only									678)965-9522	
	Fin	m's address 245 ROONE	I CI E BRU	INSWICK No	J 08816			Firr	n's EIN	84-3171965

# SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR SRIDHAR MAJETY & SHRAVYA DHARBA

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

_		Sequence No. <b>01</b>
	Your soci	ial security number
	7/0_05	_ 2221

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	-10,391.
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 additional income. Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-10,391.

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				
	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				
	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	24i		-	
J	Housing deduction from Form 2555	24j		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k			
Z	Other adjustments. List type and amount:				
0E	Total ather adjustments Add lines 04s through 04s	24z		0-	
25 06	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	nere and on	06	
				26	I- 4 (F 4040) 2222
	BAA	REV 02/	11/24 PRO	ocnedu	le 1 (Form 1040) 2023

#### **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

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.

Sequence No. 13

OMB No. 1545-0074

SRIDHAR MAJETY & SHRAVYA DHARBA 749-05-2321 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 . Physical address of each property (street, city, state, ZIP code) 1a 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 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 3 512. Rents received . 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 1,687. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . . . 11 1,350. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 1,254. 14 Repairs . . . . 15 Supplies 15 1,789. 16 16 Taxes 17 Utilities . . . . . . . 17 1,546. 18 3,277. 18 Depreciation expense or depletion . . . . . . 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 . . . . . 10,903. 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 -10,391. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . 22 10,391.) 512. 23a 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 3,277. 23d Total of all amounts reported on line 18 for all properties 10,903. 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 10,391. 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

-10,391.

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