8879 Form

(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

Internal Revenue Service Control of the latest information.	1	
Submission Identification Number (SID)		
Taxpayer's name	Social security	number
PRUDHVIRAJU HATKAR	153-29-	7560
Spouse's name		al security number
	nter year you ar	e 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.	ı	
1 Adjusted gross income	+	1 65,706.
2 Total tax	+	2 6,720.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	+	3 10,472.
4 Amount you want refunded to you	+	4 3,752.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get as Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amen		
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 the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term 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 in 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).	ne U.S. Treasury and tindicated in the taxitution to debit the cinate the authorizating requests must be the processing of the payment. I furth	d its designated Financial x preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of her acknowledge that the
Electronic Funds Withdrawal Consent.		
Taxpayer's PIN: check one box only	9	7 5 6 0
X I authorize GLOBAL TAXES LLC to enter or gener	ate my PIN Ente	er five digits, but
ERO firm name 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 a if you are entering your own PIN and your return is filed using the Practitioner PIN m below.		
Your signature ▶ Date		
Spouse's PIN: check one box only		
l authorize to enter or gener		as my
ERO firm name		er five digits, but 't enter all zeros
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 a if you are entering your own PIN and your return is filed using the Practitioner PIN m below.		
Construction N		
Spouse's signature Date		
Practitioner PIN Method Returns Only—continue be	iow	
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 Don't ente	. - - -
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incon authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am s requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers	submitting this retur	n in accordance with the
ERO's signature ▶ Date	•	
ERO Must Retain This Form — See Instructions		

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

2023

OMB No. 1545-007

IBS Use Only—Do not write or stable in this space

For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	dina		, 20	Soos	enarate instructions
		, , , , , , , , , , , , , , , , , , , ,	1 4				, 2		separate instructions.
Your first name		iddie initial	Last na						social security number
PRUDHVII		s first name and middle initial	HATK Last na		_	3 29 7560 se's social security number			
ii joint feturii, s	pouses	s ilist name and middle illitial	Lastria	ine				Spous	e s social security number
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ons.			Apt. no.	Presid	dential Election Campaigr
600 WES	ringi	HOUSE RD					# 7103	Check	k here if you, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	Sta	ite	ZIP code	se if filing jointly, want \$3	
GEORGET(NWC				TX	ζ	78626		to this fund. Checking a elow will not change
Foreign countr	y name			Foreign province/state/	count	ty	Foreign postal co		ax or refund.
									You Spouse
Filing Status	\mathbf{x}	Single				☐ Head of h	ousehold (HOH)		
Check only		Married filing jointly (even if only or	ne had i	income)					
one box.		Married filing separately (MFS)				☐ Qualifying	surviving spous	se (QSS)	
		ou checked the MFS box, enter the			u che	ecked the HOH	l or QSS box, e	nter the c	hild's name if the
	qu	alifying person is a child but not you	ır deper	ndent:					
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	pavr	ment for prope	rtv or services):	or (b) sell	 I.
Assets		lange, or otherwise dispose of a digi							☐ Yes ☒ No
Standard	Som	eone can claim:	penden	t Your spous	e as	a dependent			
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien	1			
Age/Blindnes	e Vou	: Were born before January 2, 1	050 F	Are blind Spe	ouse	·	n before Januar	v 2 1050	ls blind
			303 <u> </u>	Ī			(4) Ob l - 4b -	•	alifies for (see instructions):
Dependent		instructions). irst name Last name		(2) Social security number	/	(3) Relationsh to you	Child tax		Credit for other dependents
If more than four	(.,.					. ,	Г	1	
dependents,								<u>-</u> 1	
see instruction and check	s]	
here]]	
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions) .				. 1	79,848.
	b	Household employee wages not re	eported	on Form(s) W-2.				. 1	lb
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	. 1	Ic					
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							ld
W-2G and 1099-R if tax	е	Taxable dependent care benefits f						. 1	le
was withheld.	f	Employer-provided adoption bene	fits fron	n Form 8839, line 29	٠.				1f
If you did not get a Form	g	Wages from Form 8919, line 6 .						. 1	lg
W-2, see	h	Other earned income (see instructi	,					. 1	Ih 0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		<u>1</u> i			F 0.040
	Z	Add lines 1a through 1h	. i					—	1z 79,848.
Attach Sch. B if required.	2a	'	2a			axable interes			2b
	3a		3a			Ordinary divide		_	Bb
Standard	4a		4a			axable amoun		_	łb
Deduction for —	5a		5a			axable amoun			5b
Single or Married filing	6a	,	6a	mathad shook hara		axable amoun			Sb
separately, \$13,850	C 7	If you elect to use the lump-sum e			•	•		H	7
Married filing	7 8	Capital gain or (loss). Attach Sched Additional income from Schedule							8 -12,642.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						_	9 67,206.
surviving spouse, \$27,700	10	Add lines 12, 25, 35, 45, 35, 65, 7, Adjustments to income from Sche		=				-	1,500.
Head of household,	11	Subtract line 10 from line 9. This is						_	11 65,706.
\$20,800	12	Standard deduction or itemized	-	-				—	12 13,850.
If you checked any box under	13	Qualified business income deducti				5-A .			13
Standard Deduction,	14	Add lines 12 and 13						_	14 13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our t	taxable incom	ne		15 51,856.

orm 1040 (2023	P)			Page
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🗌 4972 3 🗌	16	6,720.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	6 , 720.
	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	6 , 720.
	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	6 , 720.
Payments	25	Federal income tax withheld from:		
-	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	10,472.
ou have a	26	2023 estimated tax payments and amount applied from 2022 return	26	
alifying child,	27	Earned income credit (EIC)		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8 29		
	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	10,472.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,752.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	3,752.
irect deposit?	b	Routing number 0 7 1 0 0 0 0 1 3 c Type: X Checking Savings		
See instructions.	d	Account number 5 9 9 5 2 0 0 0 1		
	36	Amount of line 34 you want applied to your 2024 estimated tax		
Amount	37	Subtract line 33 from line 24. This is the amount you owe .		
ou Owe	٠.	For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
hird Party esignee		you want to allow another person to discuss this return with the IRS? See structions	pelow.	⊠ No
, coldinee		signee's Phone Personal identi		
	nar			

Joint return? See instructions. Keep a copy for your records.

Your signature	Date	SOFTWARE ENGINEER	Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
Phone no (312) 202–6326	Email address	DDIIDUVITIIVAACMATI COM	

Paid Preparer Use Only

Preparer's name	Preparer'	's signatu				Date	PT	ΊΝ	Check if:			
SYAM PRIYA RAM SAGAR GUPTA TALLAM		SYAM P	RIYA F	RAM	SAGAR	GUPTA	TALLAM	01/13/2024 PO		2082703	Self-employed	
Firm's name GLOBAL TAXES LLC									Phone no.	(678) 965-9522		
Firm's address	245 ROONE	Y CT E	BRUN	NSW:	ICK N	J 088	16			Firm'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

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
PRUDHVIRAJU HATKAR

Your social security number
153-29-7560

Par	t 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		5	-12,642.
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:			
_	T. I.	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente		, _	10 646
	1040, 1040-SR, or 1040-NR, line 8		10	-12,642.

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	1,500.
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974	-	
f	Contributions to section 501(c)(18)(D) pension plans	-	
g	Contributions by certain chaplains to section 403(b) plans	-	
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	-	
ı	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		
	Housing deduction from Form 2555	+	
J	•	+	
ĸ	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)		
7	Other adjustments. List type and amount:	+	
_	24z		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	26	1,500.

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.

OMB No. 1545-0074

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

Go to www.irs.gov/ScheduleE for instructions and the latest information. Your social security number

Attachment Sequence No. 13

PRUI	DHVIRAJU HATKAR						153-2	9-7560				
Part	Income or Loss From Rental Real Estate and Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			e C. See	instru	ctions. If you a	re an indiv	ridual, rep	ort farm			
Α	Did you make any payments in 2023 that would require you		. <u> </u>	s 🛛 No								
В	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Үе	es 🗌 No			
1a												
Α	H NO:14-5-101, PANDURANGAAP URAM, BALLEPALLE KHAMMAM URBAN, TALANGANA IN 507002											
В						•						
С												
1b	Type of Property (from list below) 2 For each rental real estate proper above, report the number of fair response.	rental	and Days			I	Person Da	QJV				
Α	g personal use days. Check the QJ if you meet the requirements to fi			Α		365		0				
В	qualified joint venture. See instru			В								
C				С								
1	of Property: Single Family Residence 3 Vacation/Short-Term Rent Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (descr						
						Properti	es:					
Incon				Α		В			С			
3	Rents received	3		4	50.							
4	Royalties received	4										
Exper		5										
5 6	Advertising	6										
7	Cleaning and maintenance	7		1.5	48.							
8	Commissions	8		1,0	10.							
9	Insurance	9										
10	Legal and other professional fees	10										
11	Management fees	11		2,5	41.							
12	Mortgage interest paid to banks, etc. (see instructions)	12										
13	Other interest	13										
14	Repairs	14		2,4	41.							
15	Supplies	15		3,4	18.							
16	Taxes	16										
17	Utilities	17		3,1	44.							
18	Depreciation expense or depletion	18										
19	Other (list)	19		12 0	00							
20	Total expenses. Add lines 5 through 19	20		13,0	92.							
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			10 0	40							
00	file Form 6198	21		- 12 , 6	42.							
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(12,64		()	()			
23a	Total of all amounts reported on line 3 for all rental proper				23a		450.					
b	Total of all amounts reported on line 4 for all properties				23b 23c							
c d	Total of all amounts reported on line 12 for all properties Total of all amounts reported on line 18 for all properties				23c 23d							
	Total of all amounts reported on line 18 for all properties Total of all amounts reported on line 20 for all properties				23a	1 2	,092.					
e 24	Income. Add positive amounts shown on line 21. Do not				236	13	. 24					
25	Losses. Add royalty losses from line 21 and rental real estate		-		 nter t∩	tal losses her		(12,642.)			
26	Total rental real estate and royalty income or (loss).								, \)			
	here. If Parts II, III, and IV, and line 40 on page 2 do not schedule 1 (Form 1040) line 5. Otherwise, include this ar	t app	ly to you,	, also e	nter th	nis amount o			_12 6/2			