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 securit	y number			
RUPESH G KHAPLE	011-94-4754				
Spouse's name	Spouse's soc	ial security	y number		
CHETANA NAGHATE	991-81				
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re autho	orizing.)		
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 1			
1 Adjusted gross income		1		811.	
2 Total tax		2		,575.	
Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	4,	966.	
4 Amount you want refunded to you		5			
5 Amount you owe			ır rotur	609.	
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)					
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit o send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejet for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indipayment 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 terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requipusiness 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 ar Electronic Funds Withdrawal Consent.	ection of the traction of the traction of the traction to debit the traction to debit the authorization must be processing of ayment. I furt	ansmission dits des ax prepara entry to tation. To a received the elect	on, (b) the signated Fation soft this accourevoke (cd no later tronic payowledge	e reason Financia ware for unt. This cancel) a r than 2 ment of that the	
Taxpayer's PIN: check one box only					
■ I authorize GLOBAL TAXES LLC to enter or generate in the state of t	my DINI 4	4 7	5 4	ac my	
ERO firm name	Ent	er five dig		as my	
signature on the income tax return (original or amended) I am now authorizing.	doi	n't enter al	i zeros		
I will enter my PIN as my signature on the income tax return (original or amended) I am notify you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.					
Your signature ▶ Date ▶					
Spouse's PIN: check one box only	_				
X I authorize GLOBAL TAXES LLC to enter or generate I ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	9 1 ter five dig n't enter al		as my	
☐ I will enter my PIN as my signature on the income tax return (original or amended) I am n	ow authorizii	na. Ched	k this bo	ox only	
if you are entering your own PIN and your return is filed using the Practitioner PIN meth- 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		6 0 8 er all zeros		1	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income ta authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of Ir	itting this retu	ırn in acc	ordance		
ERO's signature ▶ Date ▶					
ERO Must Retain This Form — See Instructions					

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

Page 2 Form 1040-V (2022) 2023

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V** 2023

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service

Form 1040-V Payment Voucher

▶ Use this voucher when making a payment with Form 1040.

► Do not staple this voucher or your payment to Form 1040.

► Make your check or money order payable to the 'United States Treasury.'

► Write your social security number (SSN) on your check or money order.

Enter the amount of your payment . . 1555

609.

REV 03/07/24 PRO

RUPESH G KHAPLE CHETANA NAGHATE 2495 S MASON RD 633 KATY TX 77450

INTERNAL REVENUE SERVICE P.O. BOX 1214 CHARLOTTE, NC 28201-1214

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



1040		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 s	space.
For the year Jan	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	oarate i	nstructio	ons.
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	urity nun	nber
RUPESH (3		KHAP	LE							011	94	4754	
		s first name and middle initial	Last na										security	
CHETANA			NAGH	ATE							991	81	9103	
	(numbe	er and street). If you have a P.O. box, see						A	Apt. no.				ction Ca	
2495 S N	(ASO	N RD						16	533		Check h	nere if y	ou, or yo	our
		ce. If you have a foreign address, also co	mplete s	paces bel	low.	Sta	te	ZIP c				0.	jointly, w	
KATY						ТХ	Σ	774	50		•		nd. Checl	•
Foreign country	y name		F	Foreign pr	rovince/state/	count	ty	Foreig	n postal c	ode	your tax			90
												Yo	u 🔲 🤅	Spouse
Filing Status	, [Single					Head of h	ouseh	old (HOI	H)				
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)			
	If y	ou checked the MFS box, enter the	name c	of your s	pouse. If you	ı che	ecked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	3
	qu	alifying person is a child but not you	ır depen	ndent:										
	Λ± α.	ny time during 2023, did you: (a) rec	sive (se											
Digital Assets		nange, or otherwise dispose of a dig										□Y€	es 🛛 I	No
Standard		neone can claim: You as a de					a dependent	,,, (0	30 1113114	Otion	J.,	<u> </u>		
Deduction	_	Spouse itemizes on a separate retur	•		-		•							
Deddotton	<u> </u>		11 O1 yOu	- WCIC a	duai Status	ancri								
Age/Blindness	s You	: Were born before January 2, 1	959	☐ Are bl	ind Sp	ouse	: U Was bor						blind	
Dependents	s (see	instructions):		(2) Coolar Coounty				1		see instru				
If more	(1) F	irst name Last name		number to you			Child tax c		ax cre	edit	Credit fo	r other dep	pendents	
than four														
dependents, see instructions	s													
and check	. —									<u> </u>			_ <u>_</u>	
here L														
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruc	ctions) .						1a		97,7	752.
Attach Form(s)	b	Household employee wages not re	•								1b			
W-2 here. Also	С	Tip income not reported on line 1a	•		•						1c			
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d					
1099-R if tax	е	Taxable dependent care benefits f									1e			
was withheld.	f	Employer-provided adoption bene	fits 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	,					· ·			1h			0.
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)			<u>1</u> i						0.7	750
	<u>z</u>	Add lines 1a through 1h			· · ·	 . –					1z		91,1	752.
Attach Sch. B if required.	2a	· —	2a				axable interes				2b			
	3a_		3a				ordinary divide							
Standard	4a		4a				axable amoun							
Deduction for—	5a		5a				axable amoun							
Single or Married filing	6a	,	6a		ah a alu biri		axable amoun	τ			6b			
separately, \$13,850	c	If you elect to use the lump-sum e		-		•	,				- I			
Married filing	7	Capital gain or (loss). Attach Sche		•	•					. L	J 7		10 (0.41
jointly or Qualifying	8	Additional income from Schedule									8		-19,9	
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7									9		_ / / , &	811.
Head of	10	Adjustments to income from Sche									10		777	011
household, [11	Subtract line 10 from line 9. This is	-	-	_						11			811.
If you checked	12	Standard deduction or itemized		•		,					12			700.
any box under Standard	13	Qualified business income deduct									13		27 5	700
Deduction, see instructions.	14 15	Add lines 12 and 13									14		50 1	700. 111

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	5,575.	
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	5,575.	
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	5,575.	
	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 total tax					24	5,575.	
Payments	25	Federal income tax withheld	from:							
-	а	Form(s) W-2				25a	4,966			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	4,966.	
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20)22 return			26		
qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from	n 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, 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. T	hese are your to	tal payments				33	4,966.	
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34		
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	ck here	🗆	35a		
Direct deposit?	b	Routing number X X X	X X X X	XX	c Type:	Checking	Savings			
See instructions.	d	Account number X X X	X X X X	X X X Z	X X X X	XX				
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe						
You Owe		For details on how to pay, go	o to <i>www.ir</i> s.go	//Payments or	see instructions .			37	609.	
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party		you want to allow another	•			_				
Designee						-	•		⊠ No	
		signee's me		Phone no.			sonal iden nber (PIN)	tification		
Sign	Un	der penalties of perjury, I declare the	nat I have examine	d this return and	accompanying sche	dules and stateme	nts, and to	the best	of my knowledge and	
Here	be	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which						ch prepar	er has any knowledge.	
пеге	Yo	ur signature		Date	Your occupation				nt you an Identity	
		-						otection PIN, enter it here		
Joint return?				IT PROFESSIONAL			`	(see inst.)		
See instructions. Keep a copy for		ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupati	on			nt your spouse an ection PIN, enter it here	
your records.		HOME MAKER				2	I	e inst.)		
	Ph	one no. (347)322-358	9	Email address	RUPESH.KHAE		OM			
Daid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Paid	SYA	SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/13/2024 P0208					32703	Self-employed		
Preparer	Fir							one no. (678)965-9522		
Use Only								n's EIN	84-3171965	
_ · ·		10106 : 1 1: 111 11							- 1010	

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 RUPESH G KHAPLE & CHETANA NAGHATE

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

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

•		S	equence	No. 01
	Your soci	al s	ecurity	number
	011_0/	_ 17	E /	

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	-19,941.
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 ()	
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:			
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	-19,941.

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-				
	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	,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b		_	
С	Nontaxable amount of the value of Olympic and Paralympic medals	_			
	· · · · · · · · · · · · · · · · · · ·	24c			
d		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				
		24k			
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 Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	here and on	26	
	, - , - , - , , , , , ,		-		

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 011-94-4754 RUPESH G KHAPLE & CHETANA NAGHATE 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) 709, RD NO 12,SYMPHONY PAR BEERAMGUDA,HYDERABAD TELANGANA IN 502032 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:** В C Income: 3 Rents received . 3 1,120. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 2,580. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 2,492. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 5,769. 14 Repairs 15 Supplies 15 5,374. 16 16 Taxes 17 Utilities 17 4,846. 18 18 Depreciation expense or depletion 19 Other (list) 19 20 20 Total expenses. Add lines 5 through 19 21,061. 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 -19,941. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 19,941.) 1,120. 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 23d Total of all amounts reported on line 18 for all properties 21,061. 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 19,941. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26

-19,941.

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