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

	515.135 551.105				
Submis	ssion Identification Number (SID)				
Taxpayer	's name	Social secur	ty numl	per	
NAGA	VENKATA RAVI TE THATAVARTHI	874-12	- -295	4	
Spouse's		Spouse's so			
Part	, , ,	year you a	are au	thorizing.)
	hole dollars only on lines 1 through 5.				
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. Adjusted gross income		1 1	1 70	,295.
	Adjusted gross income		2		,721.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,583.
	Amount you want refunded to you		4		,363. ,862.
	Amount you owe		5	J	,002.
Part		eep a cor		our retu	rn)
my know return (of to send for any of Agent to payment authoriz payment business taxes to persona	enalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transminy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate to, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisions are confidential information necessary to answer inquiries and resolve issues related to the poli identification number (PIN) below is my signature for the income tax return (original or amended) I arice Funds Withdrawal Consent.	e are the ameter, or electriction of the test. Treasury a cated in the test to debit the authorizests must be processing cayment. I fur	ounts for onic re- ransmin and its control ax preper entry ation. The receive of the electron and the raceive of the acceptance of the electron on the control of the electron of t	from the inc turn original ssion, (b) the designated paration soff to this accor- fo revoke (eved no late ectronic particularly	come tax tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 hyment of that the
	/er's PIN: check one box only				
X	l authorize GLOBAL TAXES LLC to enter or generate	nv PIN 2	2 !	9 5 4	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Er		digits, but er all zeros	ao my
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN and your return is filed using the Practitioner PIN metholelow.				
Your si	gnature ▶ Date ▶				
Spous	e's PIN: check one box only				
Spous	I authorize to enter or generate	my DINI			00 m)/
	ERO firm name		ter five	digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN and your return is filed using the Practitioner PIN metholelow.				
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part I	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 Don't en	6 0	8 2 7	1
		Don ten	or an Zt	.103	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Inc.	tting this ret	urn in a	accordance	
FR∩'∘	signature ► Date ►				
LI 10 5	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To D	o So			

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



£1040		artment of the Treasury—Internal Revenue Servi		ırn 20 2	3	OMB No. 1545-0	074	IRS Use Only	–Do not v	vrite or staple ir	ı this space.
For the year Ja	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, en	ding _		,	20	See se	parate instr	uctions.
Your first name	e and m	iddle initial	Last nam	ne					Your so	ocial security	/ number
NAGA VE	NKAT.	A RAVI TE	THATA	AVARTHI					874	12 29	954
		s first name and middle initial	Last nam							's social seci	
									812	20 00)39
Home address	(numb	er and street). If you have a P.O. box, see	instruction	ns.			Ap	t. no.		ential Electio	
824 GRA	ND C	ENTRAL DRIVE							Check	here if you, o	or your
City, town, or p	oost off	ice. If you have a foreign address, also co	mplete sp	aces below.	Sta	ate Z	ZIP cod	de		if filing joint	
HAMILTO	N TO	WNSHIP			No	J (0861	.9		o this fund. C low will not a	•
Foreign countr	y name		Fo	oreign province/state/	coun	ty F	oreign	postal code		x or refund.	ago
										You	Spouse
Filing Status	s	Single				Head of hou	ıseho	ld (HOH)			
Check only		Married filing jointly (even if only o	ne had in	icome)							
one box.	×	Married filing separately (MFS)				Qualifying su	urvivii	ng spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name of	fyour spouse. If yo	u che	ecked the HOH o	or QS	S box, ente	r the ch	ild's name i	f the
	qι	ıalifying person is a child but not you	ır depend	dent: DIVYA ED	UVU	LAPATI					
 Digital	At a	ny time during 2023, did you: (a) rec	eive (as a	reward award or	navr	ment for property	v or s	ervices): or	(b) sell		
Assets		nange, or otherwise dispose of a dig	•						. ,	☐ Yes	⊠ No
Standard	Son	neone can claim: You as a de	pendent	☐ Your spous	e as	a dependent			-		
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alier	1					
Age/Rlindnes	s You	: Were born before January 2, 1	959	Are blind Sp	ouse	•	hefor	e January 2	1959	☐ Is blir	
Dependent				(2) Social securit		(3) Relationship	(4)			ifies for (see i	
•		First name Last name		number	y	to you	()	Child tax c		Credit for other	
If more than four											1
dependents,										Ī	
see instruction and check	ıs										<u> </u>
here]										<u> </u>
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	instructions) .					. 1a	7	9,819.
	b	Household employee wages not re	eported o	on Form(s) W-2 .					. 1k	,	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	Tip income not reported on line 1a (see instructions)							;	
attach Forms	d	Medicaid waiver payments not rep	orted on	Form(s) W-2 (see	nstru	uctions)			. 10	t	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	care benefits from Form 2441, line 26							•	
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29					. 11	f	
If you did not	g	Wages from Form 8919, line 6 .							. 10	3	
get a Form W-2, see	h	Other earned income (see instruct	ions) .						. 1 ŀ	1	0.
instructions.	i	Nontaxable combat pay election (s	see instru	uctions)		1i					
	z	Add lines 1a through 1h							. 12	7	9,819.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interest			. 2t)	
if required.	3a_	Qualified dividends	3a		b C	Ordinary dividend	ds .		. 3t)	
Standard	4a	IRA distributions	4a		b T	axable amount .			. 4t)	
Standard Deduction for—	5a	Pensions and annuities	5a		b T	axable amount .			. 5b)	
 Single or 	6a	,	6a			axable amount .			. 6k)	
Married filing separately,	С	•	e lump-sum election method, check here (see instructions)						_		
\$13,850 Married filing	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							□ <u> 7</u>	_	
jointly or	8	Additional income from Schedule							. 8		9,524.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income						. 9	7	0,295.	
\$27,700 • Head of	10	Adjustments to income from Schedule 1, line 26							. 10		
household,	11		Subtract line 10 from line 9. This is your adjusted gross income								0,295.
\$20,800 • If you checked	12	Standard deduction or itemized		•	,				. 12		3 , 850.
any box under Standard	13	Qualified business income deduct	ion from	Form 8995 or Form	1 899	95-A			. 13		
Deduction, see instructions.	14								. 14		3,850.
500 monucions.	15	Subtract line 1/1 from line 11 If zer	o or loce	ontor O Thic ic v	OUR .	tavable income			1.5		6 115

Form 1040 (202	3)								Page 2		
Tax and	16	Tax (see instructions). Check it	f any from Form	(s): 1 881	4 2 4972	3 🗌		16	7,721.		
Credits	17	Amount from Schedule 2, line					- 	17			
	18	Add lines 16 and 17						18	7,721.		
	19	Child tax credit or credit for o	other dependen	ts from Sched	ule 8812			19			
	20	Amount from Schedule 3, line	98					20			
	21	•						21			
	22	Subtract line 21 from line 18.						22	7,721.		
	23	Other taxes, including self-er	nployment tax,	from Schedule	e 2, line 21			23	0.		
	24	Add lines 22 and 23. This is y			·			24	7,721.		
Payments	25	Federal income tax withheld							,		
,	а	Form(s) W-2				25a 11	L,583.				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions)			25c					
	d	Add lines 25a through 25c .						25d	11,583.		
If you have a	26	2023 estimated tax payments	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	3, line 8		29					
	30	Reserved for future use				30					
	31	Amount from Schedule 3, line	e 15			31					
	32	Add lines 27, 28, 29, and 31.				indable credits		32			
	33	Add lines 25d, 26, and 32. Th						33	11,583.		
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	3,862.		
	35a	Amount of line 34 you want r	efunded to you	ی. If Form 8888	s is attached, chec	ck here	🗆	35a	3,862.		
Direct deposit?	b	Routing number 0 2 1				Checking	Savings				
See instructions	d	Account number 3 8 1	0 4 3 4	5 4 4 1	L 3	_					
	36	Amount of line 34 you want a	pplied 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						37			
	38	Estimated tax penalty (see in	structions) .			38					
Third Party		you want to allow another	•					L . L .	₩.		
Designee		structions					omplete		⊠ No		
		signee's me		Phone no.			onal ident ber (PIN)	incation			
Sign		der penalties of perjury, I declare th lief, they are true, correct, and comp									
Here	Yο	ur signature		Date Your occupation				e IRS se	nt vou an Identity		
	. 0	Tour signature			Tour occupation				Protection PIN, enter it here		
Joint return?				NETWORK ENGINEE		IGINEER	(see	inst.)			
See instructions. Keep a copy for your records.	opodoo o olginataro. Il a joint rotarri, botii maot olgin.			10				the IRS sent your spouse an lentity Protection PIN, enter it here ee inst.)			
	Ph	one no. (860) 438-1903	3	Email address	THATAVARTHI	275@GMAIL.C	MC				
Deid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:		
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/30/2024	P0208	2703	Self-employed		
Preparer		m's name GLOBAL TAX				•			(678) 965-9522		
Use Only	Fin	m's address 245 ROONEY		NSWICK N	J 08816		Firn	n's EIN	84-3171965		
Go to www irs o	ov/Form	n1040 for instructions and the lates	t 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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR NAGA VENKATA RAVI TE THATAVARTHI

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

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

	Sequence No. 01
Your soc	ial security number
871-12	-295/

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	-9,524.
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:			
		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	r here and on Form		_
	1040, 1040-SR, or 1040-NR, line 8		10	-9,524.

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	04			
_1	• • • • • • • • • • • • • • • • • • • •	24c		_	
d		24d		-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		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				
	-	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:	24z			
05					
25	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. ∟nter	nere and on		
	Form 1040, 1040-SR, or 1040-NR, line 10			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.

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.

Attachment Sequence No. 13 Your social security number

NAGA	A VENKATA RAVI TE THATAVARTHI						874-12	2-2954	
Par									
	Note: If you are in the business of renting personal proper	ty, use	Schedule	c . See	instru	ctions. If you a	re an indiv	idual, rep	ort farm
	rental income or loss from Form 4835 on page 2, line 40.	4 - CI -		10000	.				- V
	Did you make any payments in 2023 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .							. 🗀 Үе	s U No
1a	Physical address of each property (street, city, state, ZIF	ode	e)						
Α	12-3-9, AG.COLLEGE ROAD BAPATLA ANDHRA	A PRA	ADESH	IN 5	2210	1			
В									
С									
1b	Type of Property 2 For each rental real estate prope				Fa	ir Rental	Person		QJV
	(from list below) above, report the number of fair					Days	Day	ys	
Α	gersonal use days. Check the Quif you meet the requirements to f			Α		365		0	
В	qualified joint venture. See instru			В					
С				С					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Lanc		-	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (descr	ibe)		
						Propertie	es:		
Incon	ne:			Α		В			С
3	Rents received	3		4	50.				
4	Royalties received	4							
Expe									
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		9	56.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,6	85.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14			41.				
15	Supplies	15		3,2	51.				
16	Taxes	16							
17	Utilities	17		1,5	41.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		9,9	74.				
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	l		0 5	0.4				
	file Form 6198	21		-9, 5	24.				
22	Deductible rental real estate loss after limitation, if any,		,			,			
00	on Form 8582 (see instructions)	22	(24.)	(150)
23a	Total of all amounts reported on line 3 for all rental prope				23a		450.		
b	Total of all amounts reported on line 4 for all royalty prop				23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d		074		
e	Total of all amounts reported on line 20 for all properties				23e	9	, 974.		
24	Income. Add positive amounts shown on line 21. Do not		-				. 24	,	0 504 \
25	Losses. Add royalty losses from line 21 and rental real estate								9,524.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no						'' oe		-0 524