Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name	Social security number
RAMAKRISHNA GOV	ARDHANA 763-37-3008
Spouse's name	Spouse's social security number
AMITHA MADHABHU	SHANA 346-37-2135
Part I Tax Retur	n Information – Tax Year Ending December 31, 2023 (Enter year you are authorizing.)
Enter whole dollars only	on lines 1 through 5.
Note: Form 1040-SS file	rs use line 4 only. Leave lines 1, 2, 3, and 5 blank.
1 Adjusted gross i	come
2 Total tax	.
3 Federal income t	x withheld from Form(s) W-2 and Form(s) 1099
4 Amount you war	refunded to you
5 Amount you owe	

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN
			ERO firm name	

7	3	0	0	8	as mv
Ent don	aomy				

1

Enter five digits, but don't enter all zeros

5 3

as mv

7 2

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 now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC ERO 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 now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature >	Date									
Practitioner PIN Method Returns Only—continue below										
Part III Certification and Authentication – Practitioner PIN Method O	nly									
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PI	N. 2	2	2				0 {	_	7 1	1

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨	
	Retain This Form — S Form to the IRS Unles	See Instructions ss Requested To Do So	
E. D			E 9970 (D 01 0001)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA Date

to enter or generate my PIN

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		turn	202	3	OMB No. 1545	-0074	IRS Use C)nly—Do	o not wr	ite or sta	ple in this	s space.
For the year Jar	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, ending , 20					Se	See separate instructions.			
Your first name	and m	iddle initial	Last n	ame						Yc	our soo	cial sec	urity nu	mber
RAMAKRIS	зниа		GOV	ARDHAN	ΤΔ						763		3008	
	-	s first name and middle initial	Last n							_				y number
AMITHA	•		MAD	HABHUS	сидид					·	346		2135	
	(numbe	er and street). If you have a P.O. box, see						A	pt. no.					ampaign
		S ROAD, SUITE 4100											ou, or ye	
		ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	te	ZIP c	ode			,	, ,	want \$3
ALPHARET		,				GZ		300						cking a
Foreign country				Foreian p	rovince/state/o	-			n postal co			or refu	not char nd.	nge
				5 5 1			5			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yo		Spouse
Eiling Status		Single					Head of h	ausah						
Filing Status		Married filing jointly (even if only o	ne had	income)				Jusch						
Check only		Married filing separately (MFS)		income)			Qualifying	surviv	ina snous		(22			
one box.	lf v	ou checked the MFS box, enter the	name	of your s	nouse If voi	ı che			- .	•	,	d's nar	no if th	
		alifying person is a child but not you										u s nai		C
Digital		ny time during 2023, did you: (a) rec												9
Assets		hange, or otherwise dispose of a dig					-	et)? (Se	e instruc	tions.)		Ye	s X	No
Standard	_	eone can claim: 🗌 You as a de	•		•		a dependent							
Deduction		Spouse itemizes on a separate retur	n or yc	ou were a	dual-status	alien	1							
Age/Blindness	s You	: 🗌 Were born before January 2, 1	959	🗌 Are b	lind Spo	ouse	: 🗌 Was bor	n befo	ore Janua	y 2, 1	959	🗌 Is	blind	
Dependent	s (see	instructions):		(2) 5	Social security	,	(3) Relationsh	ip (4) Check the	e box i	f qualif	ies for (s	see instr	ructions):
- If more		irst name Last name		number to you			to you	Child tax o			t	Credit for	other de	ependents
than four														
dependents,]				
see instructions and check	s —]				
here]]				
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	ctions) .						1a		114,	632.
	b	Household employee wages not re	eported	d on Form	n(s) W-2 .						1b			
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	a (see ii	nstructior	is)						1c			
attach Forms	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see ir	nstru	ictions)				1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	orm 2441,	line 26						1e			
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8	839, line 29						1f			
If you did not	g	Wages from Form 8919, line 6 .									1g			
get a Form W-2, see	h	Other earned income (see instruct	ions)								1h			0.
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)			1 i							
	z	Add lines 1a through 1h	. <u>.</u>								1z		114,	632.
Attach Sch. B	2a	Tax-exempt interest	2a			bΤ	axable interest	t.			2b			
if required.	3a	Qualified dividends	3a			b C	rdinary divide	nds .			3b			
	4a	IRA distributions	4a			bΤ	axable amoun	t			4b			
Standard Deduction for—	5a	Pensions and annuities	5a			bΤ	axable amoun	t			5b			
 Single or 	6a	Social security benefits	6a			bΤ	axable amoun	t			6b			
Married filing separately,	с	If you elect to use the lump-sum e	lection	method,	check here	(see	instructions)							
\$13,850	7	Capital gain or (loss). Attach Schee	dule D	if require	d. If not requ	ired	, check here				7			
 Married filing jointly or 	8	Additional income from Schedule	1, line	10							8		-18,	008.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8	. This is y	our total inc	come	e				9		96,	624.
\$27,700	10	Adjustments to income from Sche	dule 1,	line 26							10			
 Head of household, 	11	Subtract line 10 from line 9. This is	s your a	adjusted	gross incor	ne					11		96,	624.
\$20,800	12	Standard deduction or itemized	deduc	tions (fro	m Schedule	A)					12			700.
If you checked any box under	13	Qualified business income deduct					5-A				13			
Standard Deduction,	14	Add lines 12 and 13									14		27,	700.
see instructions.	15	Subtract line 14 from line 11. If zer	ro or le	ss, enter	-0 This is y	our 1	taxable incom	ie .			15			924.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌	·	16	7,831.
Credits	17	Amount from Schedule 2, lin	ne3				🗌	17	
	18	Add lines 16 and 17						18	7,831.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ne8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	7,831.
	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	7,831.
Payments	25	Federal income tax withheld							
•	а	Form(s) W-2				25a 7	,848.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c					2	25d	7,848.
If you have a	26	2023 estimated tax payment	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				28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	undable credits		32	
	33	Add lines 25d, 26, and 32. T					[;	33	7,848.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	17.
	35a	Amount of line 34 you want	refunded to you	. If Form 8888	3 is attached, che	ck here	. 🗌 🛛	85a	17.
Direct deposit?	b	Routing number 0 6 1	0 9 2 3	8 7	c Type: 🛛 🗙	Checking	Savings		
See instructions.	d	Account number 9 0 6	1 2 9 2	3 1					
	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, g	o to <i>www.ir</i> s.gov	//Payments or	see instructions .			37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			_
Designee	ins	structions				Yes. Co	omplete belo	ow.	X No
	De nai	signee's		Phone no.			onal identifica per (PIN)	tion	
Ciarra		der penalties of perjury, I declare th	nat I have examined		accompanying sche		. ,	nest o	f my knowledge and
Sign		ief, they are true, correct, and com							, ,
Here	Yo	ur signature		Date	Your occupation		If the IR	S sent	t you an Identity
		0					Protecti	on PIN	N, enter it here
Joint return?					SOFTWARE H		(see inst		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat	ion			t your spouse an ction PIN, enter it here
your records.					HOME MAKER	2	(see inst		JUON FIN, EINER IN HERE
	Ph	one no. (470)796-093	1	Email address		<pre>KRISHNA30@GMAIL.C</pre>	<u>л</u> м		
		eparer's name	⊥ Preparer's signat			Date	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM			СПРТА ТАТ.Т.АМ		P020827		Self-employed
Preparer		n's name GLOBAL TAX		TATH DAGAN	GOLIA INDAM	02/02/2024			578)965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816		Firm's E		84-3171965
Go to www.irs.cr		1040 for instructions and the late		TIONICIC IN					Form 1040 (2023)
		in the instructions and the late	scinomation.		BAA	REV 01/27/24 PRO			10m IUTU (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

Go to usual include Form 1040 for instructions and the latest information

OMB No. 1545-0074 2023 Attachment

Internal	Go to www.irs.gov/Form1040 for instructions and the late	st information.		Sec	quence No. 01
Name	s) shown on Form 1040, 1040-SR, or 1040-NR		Your soci	al se	curity number
RAMA	KRISHNA GOVARDHANA & AMITHA MADHABHUSHANA		763-37	-300	8
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	-18,008.
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			
I	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	8-			
	1040, line 1a or 1d	8s (/		
τ	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 or			
	1040, 1040-SR, or 1040-NR, line 8			0	-18,008.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis govern	ment		
	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			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)			
b	Deductible expenses related to income reported on line 8I 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 24g			
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
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			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
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. Enter here a			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV 01/27/24 PRO		Schedule 1 (F	orm 1040) 202

		-	Supplementa							OMB No	. 1545-0074
(FOIII	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)										23
	ent of the Treasury Revenue Service		Attach to Form 1040, Go to www.irs.gov/ScheduleE for					formation		Attachm	ient 12
	shown on return		Go to www.irs.gov/ScheduleE 10	rinsur		u the la	atest in		Vour sooi	al security	ce No. 13
()		иарриа	NA & AMITHA MADHABHUSHA	עזער						7-3008	lamber
	Part I Income or Loss From Rental Real Estate and Royalties										
- T GI C	Note: If yo	ou are in th	ne business of renting personal proper			c . See	e instru	ctions. If you ar	e an indiv	vidual, repo	ort farm
A [s from Form 4835 on page 2, line 40. nts in 2023 that would require you	to file		0000		tur oti ono			• V No
			bu file required Form(s) 1099?								_
1a			ach property (street, city, state, ZIF								
		633 01 66	ich property (street, city, state, Zi	cout	-)						
 	IN										
C											
	Type of Prope	rty 2	For each rental real estate prope	ntv liet	ted		Fa	ir Rental	Person		
15	(from list below		above, report the number of fair				''	Days	Da		QJV
Α	3		personal use days. Check the Q			Α		365		0	
В			if you meet the requirements to f qualified joint venture. See instru			В					
С					5.	С					
•••	of Property:										
	Single Family R			tal	5 Land			Self-Rental			
2	Multi-Family Re	sidence	4 Commercial		6 Roya	alties	8	Other (descri	be)		
								Propertie	s:		
Incom	e:					Α		В			С
3				3		6	00.				
		ived		4							
Expen				-							
5	0			5 6							
6 7		-	structions)	7		1 9	55.				
8	•			8		т,с	55.				
9				9							
10				10							
11	0	•		11		1,5	00.				
12	Mortgage inter	est paid	to banks, etc. (see instructions)	12							
13	Other interest			13							
14				14			21.				
15				15		3,6	54.				
16				16		4 0	10				
17 18				17 18			10.				
19	Other (liet)	-	or depletion	19			.00.				
20			es 5 through 19	20		18,6	08.				
21	•		ne 3 (rents) and/or 4 (royalties). If								
			structions to find out if you must								
	file Form 6198	·		21	-	-18,0	08.				
22			estate loss after limitation, if any,								
		-	ructions)	22	(18,00		()	()
23a			ported on line 3 for all rental prope				23a		600.		
b			ported on line 4 for all royalty prop				23b				
C											
d							23d		168. 608.		
е 24			ported on line 20 for all properties amounts shown on line 21. Do not		 de anv los		23e		24		
24 25			ses from line 21 and rental real estate				 nter to	tal losses here		(-	L8,008.)
26			e and royalty income or (loss).								,
			I IV, and line 40 on page 2 do no								
), line 5. Otherwise, include this ar					on page 2 .	26	-	-18,008.
For Pa	perwork Reduct	ion Act N	otice, see the separate instructions.		NF	PA		-18,008.	Scl	nedule E (Fo	orm 1040) 2023

Schedule E (Form 1040) 2023