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

- Internal n	leveriue de vice										
Submis	ssion Identification Number (SID)										
Taxpayer	r's name			Social	securit	ty numb	er				
NAGA	A KARTHIK JAYAM			358	3-17-	-6193	3				
Spouse's				Spouse's social security number							
Part		2023 (Enter	year	you a	re aut	horiz	zing.)			
	whole dollars only on lines 1 through 5.										
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							47	240		
	Adjusted gross income					2			248. 785.		
	Total tax					3					
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099					4			307.		
	Amount you want refunded to you					5		2,	522.		
Part I	Amount you owe	ou get :	and k	een a	COD		OUL	retur	n)		
,	penalties of perjury, I declare that I have examined a copy of the income tax return (original times)										
to send for any of Agent to payment authorize payment business taxes to persona	original or amended) I am now authorizing. I consent to allow my intermediate service part my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt of delay in processing the return or refund, and (c) the date of any refund. If applicable, I o initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institut to find from the financial institution of the financial force and effect until I notify the U.S. Treasury Financial Agest, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment of the financial information information for receive confidential information necessary to answer inquiries and resolve issues all identification number (PIN) below is my signature for the income tax return (original onlice Funds Withdrawal Consent.	or reason authorize tion accouring accouring to tercancellation involved related to	for rejective the Unit indicated in the properties of the properti	ection o S. Trea cated in on to de the au uests m proces ayment	f the tr sury and the tabilit the object the substance of sust be sing of the true the true true the true true true true true true true tru	ransmise and its coax prepare entry to attend to a to	sion, lesign aratic o this o rev ectror knowl	(b) the lated Fon softe account oke (continuous pay ledge	e reason inancial ware for unt. This ancel) a than 2 ment of that the		
	yer's PIN: check one box only										
X		er or gen	orata	my DIN	, [7	6 1	. 9	3	ac my		
	Signature on the income tax return (original or amended) I am now authorizi		erale	IIY EIIV	Ent	ter five on't ente			as my		
	I will enter my PIN as my signature on the income tax return (original or amif you are entering your own PIN and your return is filed using the Practition below.	nended) I									
Your si	ignature ▶	Date	e▶_								
Snouse	e's PIN: check one box only										
Ороца	,	er or gen	orato	my DIN	.				ae my		
	ERO firm name	er or gern	ciale	ily i ilv		ter five	ligits.	but	as my		
	signature on the income tax return (original or amended) I am now authorizi	ing.				n't ente					
	I will enter my PIN as my signature on the income tax return (original or am if you are entering your own PIN and your return is filed using the Practitic below.										
Spouse	e's signature ▶	Date	e ▶								
	Practitioner PIN Method Returns Only—co	ntinue b	elow								
Part II	Certification and Authentication — Practitioner PIN Method (Only									
FRO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected F	INIC	2 2	2 4	9	6 0	8	2 7	1		
LNO 3	Li III/FIII. Litter your six-digit Li III lollowed by your live-digit self-selected i	IIN	2 2	-		er all ze					
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic indicated to file for tax year indicated above for the taxpayer(s) indicated above. I confirmments of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file	that I am	subm	ıx returi itting th	n (origi nis retu	nal or a ırn in a	ameno ccorc	lance '			
ERO's	signature >	Date	e ►								
	ERO Must Retain This Form — See Ins										
	Don't Submit This Form to the IRS Unless Rec			o So							

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

2023

OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space

For the year Jan	. 1–Dec	. 31, 2023, or other tax year beginning		, 2023, end	ling			, 20		See se	parate ins	structions.	
Your first name	and mi	ddle initial	Last na	ame						Your so	cial secur	rity number	
NAGA KAF	THIE	ζ	JAYA	MA						358	17 6	5193	
If joint return, s	pouse's	s first name and middle initial	Last na	ame						Spouse	's social se	ecurity number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.			/	Apt. no.		Preside	ntial Elect	tion Campaign	
12802 VA	ARSI:	TY CLUB CT						04			here if you		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	ite	ZIP c	ode		spouse if filing jointly, want \$3 to go to this fund. Checking a			
TAMPA				177 122612				box below will not change					
Foreign country	name			Foreign province/state/o	count	ty	Forei	ın postal c	ode	your tax or refund.			
											You	Spouse	
Filing Status	\mathbf{x}	Single				☐ Head of ho	ouseh	old (HOF	- I)				
Check only	☐ Married filing jointly (even if only one had income)												
one box.		Married filing separately (MFS)				☐ Qualifying	survi	ing spou	use (C	QSS)			
	If y	ou checked the MFS box, enter the	name	of your spouse. If you	u che	ecked the HOH	d or Q	SS box,	enter	the ch	ild's nam	e if the	
	qu	alifying person is a child but not you	ır depe	ndent:									
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	navr	ment for prope	rtv or	services): or (l	b) sell.			
Assets		ange, or otherwise dispose of a digi									☐ Yes	⊠ No	
Standard	Som	eone can claim: You as a de	pender	nt Your spouse	e as	a dependent							
Deduction		Spouse itemizes on a separate return		•		•							
A (DU. d									- 0	1050		. P d	
		Were born before January 2, 1	959 [ouse							olind	
Dependents				(2) Social security number	1	(3) Relationsh to you	nip (4	Child t		-		e instructions): other dependents	
If more	(1) F	irst name Last name		Humber		to you		011110		uit	Oredit for 0		
than four dependents,							+	[<u> </u>			片	
see instructions	s —						_	l	<u> </u>			 	
and check here							-	l	<u> </u>			 	
-	10	Total amount from Form(s) W 2 by	ov 1 /oc	o instructions)				<u> </u>		10	\Box	53,408.	
Income	1a b	Total amount from Form(s) W-2, be	•	,						1a 1b		33,400.	
Attach Form(s)		Tip income not reported on line 1a (see instructions) Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								10			
W-2 here. Also attach Forms	c d									1d			
W-2G and	e									16			
1099-R if tax was withheld.	f									1f			
If you did not	g g	Wages from Form 8919, line 6.								1g			
get a Form	9 h	Other earned income (see instructi								1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	,			1i	. j						
instructions.	z	Add lines to through th								1z	,	53,408.	
Attach Sch. B	2a	· ·	2a		b T	axable interest	t .			2b			
if required.	3a	· —	3a			ordinary divider				3b			
	4a		4a			axable amount				4b	,		
Standard Deduction for—	5a		5a			axable amount				5b	,		
Single or	6a	Social security benefits	6a			axable amount				6b	,		
Married filing separately,	С	If you elect to use the lump-sum el	lection	method, check here	(see	instructions)			. \square				
\$13,850	7	Capital gain or (loss). Attach Scheo	dule D i	if required. If not requ	uired,	, check here			. \square	7			
 Married filing jointly or 	8	Additional income from Schedule	1, line 1	0						8		-6,160.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	come	e				9		47,248.	
\$27,700	10	Adjustments to income from Schee	dule 1,	line 26						10	1	<u> </u>	
Head of household,	<u>11</u>	Subtract line 10 from line 9. This is	your a	djusted gross incor	ne					11		47,248.	
\$20,800 If you checked	12	Standard deduction or itemized	deduct	tions (from Schedule	A)					12		13,850.	
any box under	13	Qualified business income deducti	on fron	n Form 8995 or Form	899	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	ss, enter -0 This is y	our t	taxable incom	ne .			15	; <u></u>	33,398.	

Form 1040 (2023	3)							Page 2		
Tax and	16	Tax (see instructions). Check if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌		16	3,785.		
Credits	17	Amount from Schedule 2, line 3					17			
	18	Add lines 16 and 17					18	3,785.		
	19	Child tax credit or credit for other dependen	ts from Sched	ule 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	3,785.		
	23	Other taxes, including self-employment tax,					23	0.		
	24	Add lines 22 and 23. This is your total tax					24	3,785.		
Payments	25	Federal income tax withheld from:								
,	а	Form(s) W-2			25a 6	5,307.				
	b	Form(s) 1099			25b					
	С	Other forms (see instructions)			25c					
	d	Add lines 25a through 25c					25d	6,307.		
If you have a	26	2023 estimated tax payments 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 Schedule 8812	2		28					
	29	American opportunity credit from Form 8863	3, line 8		29					
	30	Reserved for future use			30					
	31	Amount from Schedule 3, line 15			31					
	32	Add lines 27, 28, 29, and 31. These are your	total other pa	ayments and refu	indable credits		32			
	33	Add lines 25d, 26, and 32. These are your to	otal payments				33	6,307.		
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	2,522.		
	35a	Amount of line 34 you want refunded to you		is attached, chec	ck here	. 🗆	35a	2,522.		
Direct deposit?	b	Routing number 2 6 7 0 8 4 1		c Type: 🛛	Checking	Savings				
See instructions.	d	Account number 7 6 7 0 7 7 5	2 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 amo	•							
You Owe		For details on how to pay, go to www.irs.go	-		1 1		37			
	38	Estimated tax penalty (see instructions) .			38					
Third Party		you want to allow another person to disc structions			_	amplete k	برمامیر	⊠ No		
Designee		structions	Phone			omplete bonal identif		△ NO		
		me	no.			ber (PIN)	ication			
Sign		der penalties of perjury, I declare that I have examine						,		
Here	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							er has any knowledge.		
11010	Yo	ur signature	Date	Your occupation				nt you an Identity		
l=:-tt0				SOFTWARE ENGINEER				IN, enter it here		
Joint return? See instructions.	Sn	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupati			(see inst.) If the IRS sent your spouse an			
Keep a copy for	Op	oude o digitature. Ir a joint rotarri, boar must digit.	Buio	opouco o occupan	011			ection PIN, enter it here		
your records.						(see	inst.)			
		one no. (813)330-4051	Email address	NAGAKARTHIKJ	AYAM@GMAIL.C	MC				
Paid	Pre	eparer's name Preparer's signat	ture		Date	PTIN		Check if:		
Preparer	SYA	M PRIYA RAM SAGAR GUPTA SYAM PRIY	A RAM SAG	GAR GUPTA	03/28/2024	P0208	2703	Self-employed		
Use Only							ie no. (no. (678)965-9522		
	Fir	m's address 245 ROONEY CT E BRU	NSWICK N	J 08816		Firm	s EIN			
o	-	40406 1 1 11 11 11 11 6 11						- 1040		

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence 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.

Internal Revenue Service		Sequence No. 01				
Name(s) shown on	Your social security numb					
NAGA KARTHIK	358-17-6193					
Part I Addi	ional Income					
1 Taxable ref	unds, credits, or offsets of state and local income taxes		1			

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	-6,160.
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		
1	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. Enter	r here and on Form		
	1040 1040-SR or 1040-NR line 8		10	-6 160

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.

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.

Attachment Sequence No. 13

OMB No. 1545-0074

NAG	A KARTHIK JAYAM						358-1	7-6193		
Par	Income or Loss From Rental Real Estate an 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	are an indi	vidual, rep	oort farm	
Α	Did you make any payments in 2023 that would require you	to file	Form(s)	1099? 5	See ins	structions.		. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	es 🛛 No	
	If "Yes," did you or will you file required Form(s) 1099? .									
1a	Physical address of each property (street, city, state, ZII									
Α	7/120 RAGHAVIAHA STREET MADANAPALLE,AN			ALDID V	ע מע	DEGR IN	517225			
В	//120 RAGHAVIAHA SIREEI MADANAPALLE,AI	MINEMINE	AIIA AI	NDHKA	PNA	DESH IN	<u> </u>			
C										
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair						Person		QJV	
Α	personal use days. Check the Q	JV box	x only	Α		365		0	П	
В	if you meet the requirements to t			В						
С	qualified joint venture. See instru	actions	5.	С						
Туре	of Property:			•						
1	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Land	b		Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)			
						Propert				
Incor	ne.			Α		В	103.		С	
3	Rents received	3			10.					
4	Royalties received	4								
Expe	nses:	<u> </u>								
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,1	50.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		7	00.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14		2,0	70.					
15	Supplies	15		1,7	00.					
16	Taxes	16								
17	Utilities	17		8	50.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		6,4	70.					
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		-6,1	60.					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(50.)	()	(
23a	Total of all amounts reported on line 3 for all rental prope				23a		310.			
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					
е	Total of all amounts reported on line 20 for all properties				23e	6	5,470.			
24	Income. Add positive amounts shown on line 21. Do not		de any lo	sses	·		. 24			
25	Losses. Add royalty losses from line 21 and rental real estat		-		nter to	tal losses he	re 25	(6,160.	
26	Total rental real estate and royalty income or (loss).	Comb	ine lines	24 and	25. E	nter the resi	ult			
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this at	ot appl	ly to you	, also e	nter t	his amount o			-6,160.	