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

	5.000				
Submi	ssion Identification Number (SID)				
Taxpaye	r's name	Social securi	ty numl	per	
DIV	YA GOALLA	649-23	-369	2	
Spouse's	s name	Spouse's soo	ial seci	urity number	•
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	vear vou a	ro au	thorizina	<u> </u>
	whole dollars only on lines 1 through 5.	year you a	ii e au	uionzing.)
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	121	,339.
2	Total tax		2		,197.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,308.
4	Amount you want refunded to you		4		,111.
5	Amount you owe		5	_	,
Part		еер а сор	y of y	our retu	rn)
my knoreturn (eto send for any Agent to paymer authorize paymer business taxes to personal	penalties 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, transming my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected elay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. so initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the financial taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate at, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requise days prior to the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (settlement) below is my signature for the income tax return (original or amended) I are financial financial or amended). I are financial withdrawal Cancent.	e are the am tter, or electriction of the t S. Treasury a cated in the t in to debit the the authoriz ests must be processing of ayment. I fur	ounts for the counts of the co	rom the industry original sistems, (b) the designated paration soft to this according to the control of the con	come tax tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 syment of that the
	nic Funds Withdrawal Consent. yer's PIN: check one box only				
X		ny PIN 3	3 (5 9 2	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	do my
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN methology.				
Your s	ignature ▶ Date ▶				
Snous	e's PIN: check one box only				
Ороцо	I authorize to enter or generate r	ov PINI			as my
	ERO firm name	-	ter five	digits, but	asiny
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN method below.				
Spous	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 ent	6 0	8 2 7	1
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subminents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	x return (orig tting this ret	inal or urn in a	amended) l accordance	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To D	o So			

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



For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20		Se	e sepa	arate inst	tructions.	
Your first name	and m	iddle initial	Last na	ame					Yo	our soc	ial securit	ty number	
DIVYA			GOAI	.Τ. Δ					6	49	23 3	692	
	pouse's	s first name and middle initial	Last na						-			curity number	
•										1	1	-	
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Apt.	10.	Pr	esiden	tial Election	on Campaign	
210 TER	RACE	AVE, FLOOR 1							Cł	neck he	ere if you,	or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	te	ZIP code				ouse if filing jointly, want \$3 go to this fund. Checking a		
JERSEY (CITY				NJ	т	07307		- 1	•	mis iuna. w will not		
Foreign country	y name			Foreign province/state/o	count	ty	Foreign po	stal co			or refund.		
											You	Spouse	
Filing Status	, X	Single				Head of ho	ousehold	(HOH)					
Check only		Married filing jointly (even if only or	ne had	income)									
one box.		Married filing separately (MFS)				☐ Qualifying	surviving	spous	se (QS	SS)			
	If y	ou checked the MFS box, enter the	name o	of your spouse. If you	ı che	ecked the HOH	l or QSS I	oox, e	nter th	ne child	l'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 serv	rices):	or (b)	sell.			
Assets		nange, or otherwise dispose of a digi									☐ Yes	⊠ No	
Standard	Som	neone can claim: You as a de	penden	t Your spouse	e as	a dependent							
Deduction		Spouse itemizes on a separate return	•	•		•							
		<u> </u>				_				050			
	-	: Were born before January 2, 1	959 [Are blind Spo →	ouse	: 📋 was bor	n before				∐ Is bl		
Dependent				(2) Social security	,	(3) Relationsh	ip	eck the				instructions): her dependents	
If more	(1) F	irst name Last name		number		to you		Tillu ta	T Credi	.	redit for oti		
than four dependents,									<u> </u>		<u>_</u>		
see instruction	s —								<u> </u>		<u>_</u>		
and check	1 —									-			
here L	4 -	T-t-	4 /	:						<u> </u>	L	<u></u>	
Income	1a	Total amount from Form(s) W-2, be	•	•					•	1a	1.5	40,270.	
Attach Form(s)	b	Tip income not reported on line 1a (see instructions) Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1b					
W-2 here. Also attach Forms	C C							1c 1d					
W-2G and								1e					
1099-R if tax was withheld.	e f	Employer-provided adoption bene		•					•	1f			
If you did not		Wages from Form 8919, line 6.		•					•		_		
get a Form	g h	Other earned income (see instructi							•	1g 1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	,		•		i		•				
instructions.	z	A al al 15-a a a d a Alaman anta d la		140(10115)	•					1z	1 14	40,270.	
Attach Sch. B	2 2a		2a	_i .	Ь Т	axable interest	 t		•	2b	†	295.	
if required.	3a		3a			ordinary divider			•	3b			
	4a		4a			axable amount			•	4b			
Standard	5a		5a			axable amount			•	5b			
Deduction for— Single or	6a		6a			axable amount			·	6b			
Married filing	С	If you elect to use the lump-sum e							Ė				
separately, \$13,850	7	Capital gain or (loss). Attach Sched		•	•	,			$\bar{\Box}$	7	1		
Married filing jointly or	8	Additional income from Schedule				•			-	8	-:	19,226.	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	•							9		21,339.	
surviving spouse, \$27,700	10	Adjustments to income from Sche		•						10			
Head of household,	11	Subtract line 10 from line 9. This is								11	1.2	21,339.	
\$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	ie			15		07,489.	

Form 1040 (2023	3)							Page 2
Tax and	16	Tax (see instructions). Check if any from Form	ı(s): 1 881	4 2 4972	3 🗌		16	19,197.
Credits	17	Amount from Schedule 2, line 3				[17	
	18	Add lines 16 and 17				[18	19,197.
	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	19,197.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your total tax				[24	19,197.
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2			25a 23	3,308.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c				[25d	23,308.
If you have a	26	2023 estimated tax payments and amount a	pplied from 20)22 return		[26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)		No .	27			
allacii Scii. Elc.	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	ındable credits		32	
	33	Add lines 25d, 26, and 32. These are your to	tal payments				33	23,308.
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	4,111.
	35a	Amount of line 34 you want refunded to you		3 is attached, ched	ck here	. 🗆	35a	4,111.
Direct deposit? See instructions.	b	Routing number 0 3 1 2 0 7 6		c Type: 🔀	Checking	Savings		
See instructions.	d	Account number 8 0 6 8 3 2 5	0 3 5					
	36	Amount of line 34 you want applied to your	2024 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. This is the amo For details on how to pay, go to <i>www.irs.go</i>	•				37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to disc structions			_	omplete be	elow.	⊠ No
Ü		signee's	Phone			onal identific	cation	
		me	no.			ber (PIN)		
Sign		der penalties of perjury, I declare that I have examine lief, they are true, correct, and complete. Declaration						, ,
Here	Yo	ur signature	Date	Your occupation		If the I	RS ser	nt you an Identity
				·				N, enter it here
Joint return?				SOFTWARE ENGINEER			nst.)	
See instructions. Keep a copy for your records.		ouse's signature. If a joint return, both must sign.	Date	Spouse's occupati	Identit	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
		one no. (201)830-7753	Email address	DIVYAGJN@C	GMAIL.COM			
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	03/21/2024	P02082	703	Self-employed
Use Only						e no. (678)965-9522	
	Fir	m's address 245 ROONEY CT E BRU	NSWICK N	J 08816		Firm's	EIN	
o		40406						- 4040

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	ial security number				
DIVYA GOALLA	649-23-3692				
Part I Addit	ional Income				
1 Tayable 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	ch Schedule E .	5	-19,226.
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			
		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			
	1040. 1040-SR. or 1040-NR. line 8		10	-19,226.

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 Sequence No. 13

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

DIVY	TA GOALLA						649-2	23-3692		
Part	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.	d Roy	alties Schedule	C . See	instru	ctions. If you a	are an ind	ividual, rep	oort farm	
		u make any payments in 2023 that would require you to file Form(s) 1099? See instructions							es 🛮 No es 🗌 No	
1a	Physical address of each property (street, city, state, ZIF									
A	68 BALAJI NILAYAM KATHRIGUPPE KARNATA			185						
С										
1b	Type of Property (from list below) 2 For each rental real estate prope above, report the number of fair	rental a	and	Fair Rental Days				nal Use ays	QJV	
Α	personal use days. Check the Quite most the requirements to			Α		365		0		
В	if you meet the requirements to f qualified joint venture. See instru			В						
C				С						
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (desci				
		-				Properti	es:	1		
Incon				Α	0.0	В			С	
3	Rents received	3		6	00.					
4	Royalties received	4								
Exper		_								
5	Advertising	5 6								
6	Auto and travel (see instructions)	7		1,2	<i>c</i> 1					
7	Cleaning and maintenance	8		1,2	04.					
8	Commissions	9								
9 10	Insurance	10								
11	Legal and other professional fees	11		1 0	ΕΛ					
12	Mortgage interest paid to banks, etc. (see instructions)	12		1,0	50.					
13	Other interest	13								
14	Repairs	14		4,8	56					
15	Supplies	15		4,6						
16	Taxes	16		1,0	57.					
17	Utilities	17		5,6	42					
18	Depreciation expense or depletion	18		2,3						
19	Other (list)	19		2,3	<i>3</i>					
20	Total expenses. Add lines 5 through 19	20		19,8	26.					
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		-19,2	26.					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (19,22	6.)	(,)()	
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		600.			
b	Total of all amounts reported on line 4 for all royalty prop	erties			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		,357.			
е	Total of all amounts reported on line 20 for all properties				23e	19	,826.			
24	Income. Add positive amounts shown on line 21. Do not		-				. 24			
25	Losses. Add royalty losses from line 21 and rental real estate	e losses	s from lin	e 22. Er	nter to	tal losses her	e 25	(19,226.)	
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	t apply	to you,	also e	nter tl	nis amount c	n		10.005	
	Schedule 1 (Form 10/0) line 5. Otherwise, include this ar	malint i	n tha to	ral on li	na /11	on nage o	0.6	1	_10 226	

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

2023 Attachment Sequence No. 179

OMB No. 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number DIVYA GOALLA Sch E 68 BALAJI NILAYAM 649-23-3692 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1,160,000. Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2,890,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property h Residential rental 27.5 yrs. MM S/L 06/23 119,645. 2,357. S/L 27.5 yrs. MM property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. **b** 12-year ММ S/L c 30-year 30 yrs. ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 2,357. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.