### **IRS e-file Signature Authorization**

OMB No. 1545-0074

Internal Revenue Service

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

Submission Identification Number (SID)

Taxpaver's name

Taxpay	er's name	Social security	y number
AIS	HWARYA SRINIVASA RAMANUJAN	732-44-	-8984
Spouse	's name	Spouse's soci	ial security number
Part	<b>Tax Return Information – Tax Year Ending December 31,</b> 2023 (Enter	year you ai	re authorizing.)
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	Adjusted gross income		<b>1</b> 77,612.
2	Total tax		<b>2</b> 9,338.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		<b>3</b> 13,456.
4	Amount you want refunded to you		4 4,118.
5	Amount you owe		5
Part			y of your return)

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 lauthorize GLOBAL TAXES LLC to enter or generate my PIN

4	8	9	8	4					
Enter five digits, but don't enter all zeros									

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.

Your signature

Date

#### Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

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	► Da	ate 🕨					 				
	Practitioner PIN Method Returns Only—continue	bel	ow								
Part III Certific	ication and Authentication – Practitioner PIN Method Only										
ERO's EFIN/PIN. En	nter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 nter a		2	7	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 🕨			
	ERO Must Retain This Form — See ubmit This Form to the IRS Unless		
For Denominaria Deduction Act Nation	very tex vehicle inclusions	DEV/ 02/07/24 DBO	Earm 8879 (Bay, 01 2021)

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

<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Ta</b> >		turn	202	3	OMB No. 1545	-0074	IRS Use Only	y—Do not w	vrite or sta	aple in this space.	
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	See separate instructions.		
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number	
AISHWARY	ζA		SRI	NIVASA								8984	
If joint return, s	pouse's	s first name and middle initial	Last r									I security numbe	
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.	Preside	ntial Ele	ection Campaigr	
134 FRAN	IKLII	N STREET										ou, or your	
		ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	te	ZIP c	ode	1 1	0	jointly, want \$3	
ALLSTON						MZ	ł	021	34			nd. Checking a not change	
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code			und.	
Filing Status	; X	Single					Head of ho	ouseh	old (HOH)				
-		] Married filing jointly (even if only o	ne hac	d income)					( )				
Check only one box.		Married filing separately (MFS)					Qualifying	surviv	ing spouse	(QSS)			
	lf y	ou checked the MFS box, enter the	name	of your s	pouse. If you	u che	ecked the HOH	l or Q	SS box, ent	er the ch	ild's na	me if the	
	qu	alifying person is a child but not you	ır depe	endent:									
Digital	At ar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d, award, or	payr	nent for prope	rty or	services); o	r (b) sell,			
Assets		hange, or otherwise dispose of a digi									<b>Y</b>	es 🛛 No	
Standard	_	eone can claim: 🗌 You as a de	•				a dependent						
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	<u> </u>						
		Were born before January 2, 1	959	Are bl	lind <b>Spo</b>	ouse	: 🗌 Was bor		ore January			s blind	
Dependents				(2) 8	Social security	/	(3) Relationsh	ip <b>(4</b>	Check the t Child tax c			(see instructions): or other dependents	
If more	(1) F	irst name Last name			number		to you			reuit	Great		
than four dependents,													
see instructions	s ——												
and check here	ı ——												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	see instruc	ctions) .					. 1a		92,838.	
	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .					. 1b	)		
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	(see i	nstruction	ns)					. 10	;		
attach Forms	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see ii	nstru	ictions)			. 1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom F	orm 2441,	, line 26					. 1e	,		
was withheld.	f	Employer-provided adoption bene								. 1f			
If you did not	g	Wages from Form 8919, line 6 .								. 1g			
get a Form W-2, see	h	Other earned income (see instruction	ions)					· ·		. <u>1</u> h		0.	
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			<b>1</b> i						
	Z	Add lines 1a through 1h	• ;		· · · ·					. 1z		92,838.	
Attach Sch. B	<b>2</b> a	· · -	2a				axable interest			. <b>2</b> b			
if required.	3a		3a				ordinary divider			. 3b			
Standard	4a		4a				axable amount			. 4b			
Deduction for—	5a		5a				axable amount			. 5b			
<ul> <li>Single or Married filing</li> </ul>	6a	, _	6a				axable amount	ι		. 6b	)		
separately, c If you elect to use the lump-sum election method, check here (see instructions)													
• Married filing								_15 226					
jointly or Qualifying	8							• •		· 8	-	-15,226. 77,612.	
surviving spouse, \$27,700	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						• •		· 9		11,012.	
<ul> <li>Head of</li> </ul>	10 11	Adjustments to income from Sche			aross incor			• •				77 610	
household, [ \$20,800	11 12	Subtract line 10 from line 9. This is Standard deduction or itemized	-	-	-			• •		· 11	-	77,612.	
<ul> <li>If you checked any box under</li> </ul>	13	Standard deduction or itemized Qualified business income deduction						• •		. 13	-	13,850.	
Standard	13 14	Add lines 12 and 13	01110			033	υπ	• •		. 14		13,850.	
Deduction, see instructions.	14	Subtract line 14 from line 11. If zer	o or le		-0- This is v	 /01.1r1	taxable incom	 Ie		. 15	1	63,762.	
			5 51 10	, ontor	5 . 1115 13 y	Juil				. 10	<u> </u>	00,102.	

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

Form **1040** (2023)

Form 1040 (2023	3)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	9,338.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17					🔽	18	9,338.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	9,338.
	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	9,338.
Payments	25	Federal income tax withheld							
, <b>,</b>	а	Form(s) W-2				<b>25a</b> 13	,456.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction:				25c			
	d	Add lines 25a through 25c	,				2	5d	13,456.
If you have a	26	2023 estimated tax payment						26	· · · · · · · · · · · · · · · · · · ·
qualifying child,	27	Earned income credit (EIC)		• •		27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit				29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27, 28, 29, and 31						32	
	33	Add lines 25d, 26, and 32. T			-			33	13,456.
Refund	34	If line 33 is more than line 24						34	4,118.
neruna	35a	Amount of line 34 you want	-					5a	4,118.
Direct deposit?	b	Routing number 0 1 1	0 0 0 1	3 8			Savings		
See instructions.	ď	Account number 4 6 6					Jarmige		
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24							
You Owe	07	For details on how to pay, g						37	
	38	Estimated tax penalty (see in				38			
Third Party		you want to allow another							
Designee		structions	•				mplete belo	ow.	🗙 No
	De	signee's		Phone		Perso	nal identificat	tion	
	nai			no.			er (PIN)		
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com							, ,
Here		· · · ·	piete. Declaration of		,	ased on an informatio		•	
	Yo	ur signature		Date	Your occupation				t you an Identity N, enter it here
Joint return?					MANIIFACTIIR	ING ASSOCIAT			, enter it here
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sian.	Date	Spouse's occupat			S sent	your spouse an
Keep a copy for	-1-		j				Identity I	Protec	ction PIN, enter it here
your records.							(see inst	.)	
		one no. (617)380-873	5	Email address	AISHWARYA.RAM	IANUJAN@GMAIL.CC	М		
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAG	GAR GUPTA	03/23/2024	P020827	03	Self-employed
Use Only	Fir	m's name GLOBAL TA	XES LLC				Phone n	o. (6	578)965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's E	IN	
Go to www.irs.go	ov/Form	n1040 for instructions and the late	st information.		BAA	REV 03/07/24 PRO			Form <b>1040</b> (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 www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074 \_\_\_\_

Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR AISHWARYA SRINIVASA RAMANUJAN

	20 <b>23</b>
	Attachment Sequence No. <b>01</b>
Your soc	ial security number
732-44	-8984

1       Taxable refunds, credits, or offsets of state and local income taxes       1         2a       Alimony received       1         b Date of original divorce or separation agreement (see instructions):       3         3       Business income or (loss). Attach Schedule C       3         4       Other gains or (losse). Attach Schedule F       5         7       Rental real estate, royalites, partnerships, S corporations, trusts, etc. Attach Schedule E       6         6       Farm income or (loss). Attach Schedule F       6         7       Unemployment compensation       8a (         9       Other income:       8a (         9       Toxicome from Form 883       8a (         9       Toxicome from Form 883       8a (         9       Toxicome from Form a All property company       8a         9       Toxicome from Form a All paralympic medal and USOC       8a         9       Toxicome from Form a All paralympic medals and USOC prize money (see instructions)       8a         1       Activity not engaged in for profit income       8a         1       Income from form a ABLE account (see instructions)       8a         1       Activity not engaged in for profit income       8a         1       Activity not engaged in for profit income       8a	Par	t I Additional Income			
2a       2a         b       Date of original divorce or separation agreement (see instructions):       3         c       Business income or (loss), Attach Schedule C       3         4	1	Taxable refunds, credits, or offsets of state and local income taxes		1	
b Date of original divorce or separation agreement (see instructions):       3         3 Business income or (loss). Attach Schedule C       3         4 Other gains or (losse). Attach Form 4797       4         5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E       5         6 Farm income or (loss). Attach Schedule F       5         7 Unemployment compensation       7         8 Other income:       8a (         a Net operating loss       8a (         b Gambling       8b         c Cancellation of debt       8c         d Foreign earned income exclusion from Form 2555       8d (         e Income from Form 8853       8e         f Income from Form 8853       8e         g Alaska Permanent Fund dividends       8g         h Jury duty pay       8h         i Activity not engaged in for profit income       8i         j Activity not engaged in for profit income       8i         n Stock options       8n         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       8n         g Section 951(a) inclusion (see instructions)       8n       8n         g Taxable distributions from an ABLE account (see instructions)       8n       8r	2a			2a	
3       Business income or (loss). Attach Schedule C       3         4       Other gains or (losse). Attach Schedule F       4         5       Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E       5       -15,226.         6       Farm income or (loss). Attach Schedule F       6       7         7       Unemployment compensation       8a (       6         7       Unemployment compensation       8a (       6         7       Other income       8a (       7         8       Net operating loss       8a (       7         6       Grambling       8a (       7         7       Concellation of debt       8a (       7         8       Cancellation of debt       8c       7         9       Income from Form 8853       8d (       7         9       Ataska Permanent Fund dividends       8g       8h       8h         1       Prizes and awards       8i       8k       8h       8k         1       Income from the rental of personal property if you engaged in the rental al for profit but were not in the business of renting such property       8n       8n         1       Income from S14(a) inclusion (see instructions)       8n       8n	b	Date of original divorce or separation agreement (see instructions):			
5       Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E       5       -15,226.         6       Farm income or (loss). Attach Schedule F       7         8       Other income:       8a (       7         9       Gambling       8a (       7         9       Total other income:       8a (       7         9       Total other income:       8a (       7         9       Total other income.       8a (       7         7       8b       6       6         7       8a (       7       7         8       Cancellation of debt       8a (       7         9       Income from Form 8853       8a (       7         9       Alarka Permanent Fund dividends       8a (       8d (         1       Income from Torm 8889       8d (       8d (         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       8d (       8d (         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       8d (       8d (         1       Income from 551A(a) inclusion (see instructions)       8d (       8d ( <th>3</th> <th></th> <th></th> <th>3</th> <th></th>	3			3	
6       Farm income or (loss). Attach Schedule F       6         7       Unemployment compensation .       6         8       Other income:       8a (         9       Total other income and online income. Add lines & a through 8z .       9         10       Total other income. Add lines & a through 8z .       9         10       Calable income from Add lines & a through 8z .       9         10       Calable income from Form 255 .       8d (         11       Prizes and awards .       8e         12       Prizes and awards .       8i         13       Prizes and awards .       8i         14       Prizes and awards .       8i         15       Activity not engaged in for profit income .       8i         16       prizes and awards .       8i         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 .       8i         16       Section 951(A) inclusion (see instructions) .       8a         10       Section 951(A) inclusion (see instructions) .       8a         10       Combine from an ABLE account (see instructions) .       8a         10       Combine inset Not reported on Form W-2 .       8a         10       Cad	4	Other gains or (losses). Attach Form 4797		4	
7       Unemployment compensation       7         8       Other income:       8a (         9       Net operating loss       8b         0       Gambling       8b         0       Cancellation of debt       8c         1       Foreign earned income exclusion from Form 2555       8d (         2       Back       8e         1       Income from Form 8853       8e         1       Income from Form 8853       8d         1       Income from Form 8853       8d         1       Income from Form 8889       8d         1       Income from Form 8889       8d         1       Income from the rental of personal property if you engaged in the rental for profit income       8i         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       8d         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       8d         1       Incore from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property       8d         2       Section 951A(a) inclusion (see instructions)       8d         3       Section 951A(a) inclu	5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ch Schedule E	5	-15,226.
8       Other income:       Ba       Ba         a       Net operating loss       Ba       Ba         b       Gambling       Ba       Ba         c       Cancellation of debt       Bc       Bc         d       Foreign earned income exclusion from Form 2555       Bd       Bd         e       Income from Form 8853       Be       Bd         f       Income from Form 8853       Be       Bd         g       Alaska Permanent Fund dividends       Bg       Bd         h       Jury duty pay       Bh       Bd         j       Activity not engaged in for profit income       Bi       Bi         j       Activity not engaged in for profit income       Bk       Bd         l       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       Bk       Bd         l       Income from 51(a) inclusion (see instructions)       Ba       Ba       Bd         o       Section 951(a) inclusion (see instructions)       Ba       Ba       Ba         g       Taxable distributions from an ABLE account (see instructions)       Ba       Ba       Ba         g       Total other income. Add lines 8a through 8z       Ba <th>6</th> <th>Farm income or (loss). Attach Schedule F.</th> <th></th> <th>6</th> <th></th>	6	Farm income or (loss). Attach Schedule F.		6	
a Net operating loss       Ba         b Gambling       Ba         c Cancellation of debt       Bb         c Cancellation of debt       Bc         d Foreign earned income exclusion from Form 2555       Bd         j Anaska Permanent Fund dividends       Bg         j Alaska Permanent Fund dividends       Bg         j Ataska Permanent Fund dividends       Bg         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         m Olympic and Paralympic medals and USOC prize money (see instructions)       Bi         n Section 951(a) inclusion (see instructions)       Bi	7	Unemployment compensation		7	
b       Gambling       Bb         c       Cancellation of debt       Bc         d       Foreign earned income exclusion from Form 2555       Bd         d       Foreign earned income exclusion from Form 2555       Bd         f       Income from Form 8853       Be         f       Income from Form 8853       Bf         g       Alaska Permanent Fund dividends       Bf         g       Alaska Permanent Fund dividends       Bf         j       Activity not engaged in for profit income       Bi         j       Activity not engaged in for profit income       Bi         j       Activity not engaged in for profit income       Bi         j       Activity not engaged in for profit but were not in the business of renting such property       Bi         m       Olympic and Paralympic medals and USOC prize money (see instructions)       Bm         n       Section 951(a) inclusion (see instructions)       Bn         o       Section 951(a) inclusion (see instructions)       Bn         g       Section 951(a) inclusion (see instructions)       Bq         g       Taxable distributions from an ABLE account (see instructions)       Bq         g       Total other incorre Add lines 8a through 8z       Bt         g       I	8	Other income:			
c       Cancellation of debt       8c         d       Foreign earned income exclusion from Form 2555       8d (()         e       Income from Form 8853       8e         f       Income from Form 8859       8f         g       Alaska Permanent Fund dividends       8g         g       Alaska Permanent Fund dividends       8g         j       Activity not engaged in for profit income       8i         i       Prizes and awards       8i         j       Activity not engaged in for profit income       8i         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       8k         l       Income from the rental of personal property if you engaged in the rental for profit inclusion (see instructions)       8n         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8n         m       Section 951(a) inclusion (see instructions)       8a         g       Taxable distributions from an ABLE account (see instructions)       8q         g       Taxable distributions from an onqualifed deferred compensation plan or a nongovernmental section 457 plan       8t         g       Wages earned while incarcerated       8u       8z         g       Total other income. Add li	а	Net operating loss	8a ( )		
d       Foreign earned income exclusion from Form 2555       8d (         e       Income from Form 8883       8e         f       Income from Form 8889       8f         g       Alaska Permanent Fund dividends       8g         h       Jury duty pay       8g         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       More from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property       8i         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8m         n       Section 951A(a) inclusion (see instructions)       8n         s       Section 951A(a) inclusion (see instructions)       8n         g       Taxable distributions from an ABLE account (see instructions)       8g         s       Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d       8s         g	b		8b		
e       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       8i         j       Activity not engaged in for profit income       8i         k       Stock options       8k         l       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       8k         I       Income from Hor mente rental of personal property if you engaged in the rental for profit but were not in the business of renting such property       8m         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8m         n       Section 951(a) inclusion (see instructions)       8n         s Section 951(a) inclusion (see instructions)       8n       8g         g       Taxable distributions from an ABLE account (see instructions)       8g         g       Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d       8s (         g       Total other income. List type and amount:       8z         g       Total other income. Add lines 8a through 8z       <	С		8c		
f       Income from Form 8889       889         g       Alaska Permanent Fund dividends       8g         h       Jury duty pay       8h         i       Prizes and awards       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit but were not in the business of renting such property       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       8k         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8n         o       Section 951(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8n         g       Taxable distributions from an ABLE account (see instructions)       8g         g       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	d		8d ( )		
g Alaska Permanent Fund dividends 8g   h Jury duty pay 8h   i Prizes and awards 8i   j Activity not engaged in for profit income 8i   j Activity not engaged in for profit income 8k   j Activity not engaged in for profit income 8k   j Activity not engaged in for profit income 8k   j Activity not engaged in for profit income 8k   j 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 8k   m Olympic and Paralympic medals and USOC prize money (see instructions) 8n   n Section 951(a) inclusion (see instructions) 8n   o Section 951(a) inclusion (see instructions) 8n   g Section 461(l) excess business loss adjustment 8g   g Taxable distributions from an ABLE account (see instructions) 8g   r Scholarship and fellowship grants not reported on Form W-2 8r   r Section 910	е				
h       Jury duty pay       h       Bh         i       Prizes and awards       i       Bi         j       Activity not engaged in for profit income       Bi       Bi         j       Activity not engaged in for profit income       Bi       Bi         j       Activity not engaged in for profit income       Bi       Bi         j       Activity not engaged in for profit but were not in the business of renting such property       Bk       Bi         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       Bk       Bi         m       Olympic and Paralympic medals and USOC prize money (see instructions)       Bn       Bi         n       Section 951(a) inclusion (see instructions)       Bn       Bo         o       Section 951(a) inclusion (see instructions)       Bo       Bp         q       Taxable distributions from an ABLE account (see instructions)       Br       Br         r       Scholarship and fellowship grants not reported on Form W-2       Br       Br         s       Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d       State       Bu         u       Wages earned while incarcerated       State       Bu       Bt       Bt <th>f</th> <th></th> <th>8f</th> <th></th> <th></th>	f		8f		
i       Prizes and awards       8i         j       Activity not engaged in for profit income       8j         j       Activity not engaged in for profit income       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       8k         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8m         n       Section 951(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8n         g       Taxable distributions from an ABLE account (see instructions)       8g         g       Taxable distributions from an ABLE account (see instructions)       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         g       Total other income. Add lines 8a through 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 here and on Form 1040, 1040-SR, or 1040-NR, line 8       -15,226.	g		8g		
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       8k         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8m         n       Section 951(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8n         g       Taxable distributions from an ABLE account (see instructions)       8g         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 (         u       Wages earned while incarcerated       8u         z       Other income. List type and amount:       8z         g       Total other income. Add lines 8a through 8z       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 here and on Form 1040, 1040-SR, or 1040-NR, line 8       -15, 226.	h				
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       8l         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8n         n       Section 951(a) inclusion (see instructions)       8n         o       Section 951(a) inclusion (see instructions)       8o         p       Section 461(l) excess business loss adjustment       8g         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       8t         u       Wages earned while incarcerated       8u         z       Other income. List type and amount:       8z         y       Total other income. Add lines 8a through 8z       9         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       -15, 226.	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)       81         n Section 951(a) inclusion (see instructions)       8n         o Section 951A(a) inclusion (see instructions)       8n         p Section 461(l) 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       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 here and on Form 1040, 1040-SR, or 1040-NR, line 8       -15, 226.	j				
for profit but were not in the business of renting such property       8         m Olympic and Paralympic medals and USOC prize money (see instructions)       8         n Section 951(a) inclusion (see instructions)       8         o Section 951A(a) inclusion (see instructions)       8         p Section 461(l) excess business loss adjustment       80         g Taxable distributions from an ABLE account (see instructions)       8         r Scholarship and fellowship grants not reported on Form 1040, line 1a or 1d       8         t Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan       8         u Wages earned while incarcerated       8         z Other income. List type and amount:       8         9       Total other income. Add lines 8a through 8z       9         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       10	k		8k		
m       Olympic and Paralympic medals and USOC prize money (see instructions)       8m         n       Section 951(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8o         p       Section 951A(a) inclusion (see instructions)       8o         p       Section 951A(a) inclusion (see instructions)       8o         p       Section 461(l) 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 (         u       Wages earned while incarcerated       8u         z       Other income. List type and amount:       8z         9       Total other income. Add lines 8a through 8z       8z         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       -15,226.	I				
instructions)			81		
n       Section 951(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8o         p       Section 461(l) 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       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 here and on Form 1040, 1040-SR, or 1040-NR, line 8       10       -15,226.	m				
o       Section 951Å(a) inclusion (see instructions)       80         p       Section 461(l) 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       8u         z       Other income. List type and amount:       8z       9         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       9		,			
p       Section 461(l) 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       8z         9       Total other income. List type and amount:       8z       9         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       -15, 226.	n				
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       8z         o       Other income. List type and amount:       8z       9         Total other income. Add lines 8a through 8z       8z       9       10         Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       -15, 226.	0				
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       8u         other income. List type and amount:       8z       9         Total other income. Add lines 8a through 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 here and on Form 1040, 1040-SR, or 1040-NR, line 8       10       -15, 226.				-	
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       8s       ()         u       Wages earned while incarcerated       8u       8u       8u         other income. List type and amount:       8z       9       Total other income. Add lines 8a through 8z       9       9       Total other income. Add lines 8a through 8z       9       10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       9       -15, 226.	q			-	
1040, line 1a or 1d       10       10       10       10       10       -15, 226.	r		8r	-	
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:       8u         9       Total other income. Add lines 8a through 8z       9         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       9	S		- (		
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       9z         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       9			<u>8s (</u> )		
u       Wages earned while incarcerated       8u       8u         z       Other income. List type and amount:       8z       9         9       Total other income. Add lines 8a through 8z       9       9         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       9	t		_		
z       Other income. List type and amount:       8z       9         9       Total other income. Add lines 8a through 8z				-	
8z         9           Total other income. Add lines 8a through 8z	u		<u>8u</u>	-	
9       Total other income. Add lines 8a through 8z	z	Other income. List type and amount:			
10Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 810-15,226.	-		-		
1040, 1040-SR, or 1040-NR, line 8				9	
	10				15 005

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

Schedule 1 (Form 1040) 2

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	s government		
	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:			
 a	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the		-	
D	rental of personal property engaged in for profit			
с	Nontaxable amount of the value of Olympic and Paralympic medals		-	
C	and USOC prize money reported on line 8m			
d			-	
	Repayment of supplemental unemployment benefits under the Trade		-	
е	Act of 1974			
			-	
f			-	
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	er here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	<u></u>	26	
	BAA REVO	)3/07/24 PRO	Schedule 1 (F	orm 1040) 202

	DULE E			Supplementa							OMB No	b. 1545-0074	
(Form	1040)	(From	rental real esta	te, royalties, partnersł		-			trusts, REMIC	s, etc.)	20	23	
	nent of the Treasury Revenue Service		Go to www	Attach to Form 1040, .irs.gov/ScheduleE for					formation		Attachn	nent ce No. <b>13</b>	
	shown on return		do to mm.		moure			test in		Your soci	al security		
( )	WARYA SRIN	TUAGA	ΡΛΜΛΝΠΙΤΛΝ	г							4-8984	number	
Part				tal Real Estate an	d Ro	valties				752 1	1 0 0 0 1		-
rare	Note: If yo	ou are in t	the business of i	renting personal proper 335 on page 2, line 40.			e C. See	instrue	ctions. If you a	re an indiv	vidual, rep	ort farm	
Α				at would require you	to file	Form(s) 1	099? S	see ins	structions .		. 🗌 Ye	s 🛛 No	-
											_	_	
1a	Physical addr	ress of e	each property (	street, city, state, ZIF	o code	e)							
Α	44M NANDA	GOKUI	LAM, AREKER	E BANNERGHATTA	ROF	D BENG	ALURU	J, KAI	RNATAKA I	N 5600	)76		_
В													_
С													
1b	Type of Prope	rty 2	For each rer	ntal real estate prope	rty list	ed		Fa	ir Rental	Person	al Use	QJV	
	(from list below	N)		rt the number of fair					Days	Da	ys	QUV	
Α	3			e days. Check the Q. the requirements to f			Α		365		0		
В				nt venture. See instru			В						
C							С						
	of Property:		0.14					_					
	Single Family R			tion/Short-Term Ren	tal	5 Land			Self-Rental				
2	Multi-Family Re	sidence	e 4 Com	mercial		6 Roya	alties	8	Other (descr	ibe)			
									Properti	es:			
Incom	ne:						Α		В			С	
3					3		5	40.					
4		ived.			4								
Expen													
5	-				5								_
6					6								
7					7		1,7	45.					
8					8								
9 10					9 10								
11	-	-			11		1,3	60					_
12	-			. (see instructions)	12		т,з	00.					-
13					13								-
14					14		4,2	11.					-
15					15		4,5						-
16					16								-
17					17		3,8	70.					
18	Depreciation e	xpense	or depletion .		18								
19	Other (list)				19								
20	Total expenses	s. Add li	nes 5 through	19	20		15,7	66.					
21				nd/or 4 (royalties). If									
				find out if you must			1 - 0						
					21	-	-15,2	26.					
22				er limitation, if any,		,	1 - 00		1	`	/		
00-					22		15,22		(	) 540.	(		ľ
23a b				3 for all rental prope 4 for all royalty prop				23a 23b		540.			
u D				12 for all properties				23D 23C					
d				18 for all properties				23d					
e				20 for all properties				23e	15	,766.			
24				vn on line 21. <b>Do not</b>						. 24			
25				1 and rental real estate		-		nter to	tal losses here		(	15,226.	-
26				y income or (loss).									Í
-				40 on page 2 do no									

For Paperwork Reduction Act Notice, see the	separate instructions.
· · · · · · · · · · · · · · · · · · ·	

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

26

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-15,226.

Form **8889** Department of the Treasury

# Health Savings Accounts (HSAs)

OMB No. 1545-0074

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

Go to www.irs.gov/Form8889 for instructions and the latest information

2023	
Attachment Sequence No. <b>52</b>	

Internal	Revenue Service Go to www.irs.gov/Formodos for instructions and the latest mormation.		Sequence No. <b>52</b>	
Name(s)			er of HSA beneficiary. HSAs, see instructions.	
AISH	IWARYA SRINIVASA RAMANUJAN 73	2-44-8	984	
Befor	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contrac	cts, if re	quired.	
Part	HSA Contributions and Deduction. See the instructions before completing this para and both you and your spouse each have separate HSAs, complete a separate Part			
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 20		_	
	See instructions		Self-only  Family	
2	HSA contributions you made for 2023 (or those made on your behalf), including those made by unextended due date of your tax return that were for 2023. <b>Do not</b> include employer contribution contributions through a cafeteria plan, or rollovers. See instructions	ons,	. 0.	
3	If you were under age 55 at the end of 2023 and, on the first day of <b>every</b> month during 2023, were, or were considered, an eligible individual with the <b>same</b> coverage, enter \$3,850 (\$7,750 family coverage). <b>All others</b> , see the instructions for the amount to enter	for	3,850.	
4	Enter the amount you and your employer contributed to your Archer MSAs for 2023 from Form 88 lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2023, a include any amount contributed to your spouse's Archer MSAs	also	0.	
5	Subtract line 4 from line 3. If zero or less, enter -0			
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had far	mily		
	coverage under an HDHP at any time during 2023, see the instructions for the amount to enter $\$ .	. 6	3,850.	
7	If you were age 55 or older at the end of 2023, married, and you or your spouse had family cover under an HDHP at any time during 2023, enter your additional contribution amount. See instruction		0.	
8	Add lines 6 and 7	. 8	3,850.	
9		00.		
10	Qualified HSA funding distributions		2 600	
11	Add lines 9 and 10			
12	Subtract line 11 from line 8. If zero or less, enter -0			
13	<b>HSA deduction.</b> Enter the <b>smaller</b> of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line <b>Caution:</b> If line 2 is more than line 13, you may have to pay an additional tax. See instructions.	e 13 <b>1</b> 3	3 0.	
Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complet a separate Part II for each spouse.				
14a	Total distributions you received in 2023 from all HSAs (see instructions)	. 14	a	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excontributions (and the earnings on those excess contributions) included on line 14a that w	ess	-	
	withdrawn by the due date of your return. See instructions		b	
С	Subtract line 14b from line 14a	. 14	c	
15	Qualified medical expenses paid using HSA distributions (see instructions)	. 1	5	
16	<b>Taxable HSA distributions.</b> Subtract line 15 from line 14c. If zero or less, enter -0 Also, include amount in the total on Schedule 1 (Form 1040), Part I, line 8f		6	
17a	If any of the distributions included on line 16 meet any of the <b>Exceptions to the Additional 20% Tax</b> (see instructions), check here			
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (For 1040), Part II, line 17c	that orm	b	
Part		tructions		
18	Last-month rule	. 18	8	
19	Qualified HSA funding distribution		9	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f		0	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (For 1040). Part II, line 17d			
	1040), Part II, line 17d	. 2	1	

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

BAA REV 03/07/24 PRO