## 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

Submis	sion Identification Number (SID)						
Taxpayer'	s name	Social securi	ty numb	er			
SAI	SHASHANK SILAMKOTIDWARAKANATH	838-78-3953					
Spouse's		Spouse's social security number					
Part I	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r vear vou a	re aut	horizina			
,	hole dollars only on lines 1 through 5.	year you a	ii e aui	inonzing	· <i>)</i>		
	orm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
	Adjusted gross income		1 1	112	2,479.		
	Fotal tax		2		7,070.		
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		0,007.		
4 /	Amount you want refunded to you		4		2,937.		
5 /	Amount you owe		5				
Part II	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our retu	ırn)		
my know return (or to send if for any of Agent to payment authoriza payment business taxes to personal	enalties of perjury, I declare that I have examined a copy of the income tax return (original or amended placed and belief, it is true, correct, and complete. I further declare that the amounts in Part I above riginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejuleay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indoff my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminat, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation required adays prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I at a Funds Withdrawal Consent.	we are the amulter, or electroction of the tall. S. Treasury a licated in the tall to debit the entry authorization of the tall the processing opayment. I fur	ounts for ounity retransmission its control of the entry the entry the entry the receivent of the electric ounits in the electric ounits	rom the incurn original sion, (b) to designate of this according to the following process of the	ncome tax ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the		
	er's PIN: check one box only						
$\mathbf{x}$	I authorize GLOBAL TAXES LLC to enter or generate	mv PIN 8	3 9	9 5 3	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Er		digits, but r all zeros	,		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methodow.						
Your sig	gnature ▶ Date ▶						
Spouse	e's PIN: check one box only	_					
	I authorize to enter or generate	my PIN			as my		
	ERO firm name	_	ter five	digits, but	ao my		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methoelow.						
Spouse	's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part II	Certification and Authentication — Practitioner PIN Method Only						
ERO's I	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't en	6 0 er all ze		7 1		
authorize	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the text to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitted the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of I	nitting this ret	urn in a	ccordance			
ERO's	signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To I	Do So					

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



<b>1040</b>		artment of the Treasury—Internal Revenue Servi		ırn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this s	space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	parate i	instructio	ons.
Your first name and middle initial Last na											Your social security number			
SAI SHASHANK SILA				MKOTII	OWARAKA	NAT	ГН				838	78	3953	
If joint return, spouse's first name and middle initial  Last na													security r	numbei
Home address	(numb	er and street). If you have a P.O. box, see	instructio	ons.				A	Apt. no.		Preside	ntial Ele	ection Car	 mpaign
601E PE	re r	OSE WAY						4	137				ou, or you	
City, town, or p	ost off	ice. If you have a foreign address, also co	mplete sp	oaces belo	w.	Sta	te	ZIP c	ode			_	jointly, wa nd. Check	
CINCINN	ATI					OH	I	452	02		•		not chang	•
Foreign countr	y name		F	oreign pro	vince/state/o	count	ty	Foreig	ın postal c	ode	your tax	or refu		Spouse
Filing Status	s 🗵	Single					Head of h	ouseh	old (HO	<del>-</del>				
Check only		Married filing jointly (even if only o	ne had ir	ncome)										
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spo	use (	QSS)			
	lf y	you checked the MFS box, enter the	name o	f your spo	ouse. If you	ı che	ecked the HOF	or Q	SS box,	enter	r the chi	ld's na	me if the	:
	qι	ialifying person is a child but not you	ır depen	dent:										
Digital		ny time during 2023, did you: (a) rec												
Assets		nange, or otherwise dispose of a dig						et)? (Se	e instru	ction	s.)	Y€	es 🗵 N	No
Standard	_	neone can claim:  You as a de	•		•		a dependent							
Deduction	Ш	Spouse itemizes on a separate retur	n or you	were a d	ual-status	alien								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blir	nd <b>Spo</b>	use	: 🗌 Was boı	rn befo	ore Janu	ary 2	, 1959	ls	s blind	
Dependent	s (see	instructions):		<b>(2)</b> Sc	cial security	,	(3) Relationsh	ionship (4) Check the I			x if quali	fies for (	see instru	ctions):
If more	(1) F	irst name Last name		number to you				Child t	ax cre	edit	Credit fo	r other dep	endents	
than four														
dependents, see instruction	s —													
and check	, —												Щ_	
here L												_		
Income	1a	Total amount from Form(s) W-2, b	,		,						1a	_	125,3	17.
Attach Form(s)	b	Household employee wages not re	•	•	,						1b	_		
W-2 here. Also	С	Tip income not reported on line 1a	•		•						1c	_		
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d	_			
1099-R if tax	е	Taxable dependent care benefits f									1e	_		
was withheld.	f	Employer-provided adoption bene	fits from	Form 88	39, line 29	•					1f			
If you did not get a Form	<b>g</b>	Wages from Form 8919, line 6 .									1g			
W-2, see	h	Other earned income (see instruct	,					i ·			1h			0.
instructions.	i	Nontaxable combat pay election (s	see instri	uctions)			<u>1i</u>						125,3	₹17
	<u>z</u>	Add lines 1a through 1h			<u>.</u> .	 L T					1z	_	123,3	
Attach Sch. B if required.	2a	· —	2a				axable interes				2b	_		
	3a_ 4a		3a 4a				ordinary divide axable amoun					_		
Standard	1		<del>4</del> а 5а				axable amoun					_		
Deduction for—	5a 6a		оа 6а				axable amoun axable amoun				6b	_		
Single or Married filing	C	,		nethod o						· ·	7			
separately, \$13,850	7	If you elect to use the lump-sum election method, check here (see instructions)								7				
Married filing	8	Additional income from Schedule		•	•					٠ ـ	8	+	-12,8	 }38
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	-								9	+	112,4	
surviving spouse, \$27,700	10	Adjustments to income from Sche		-							10		,	
Head of household,	11	•	stments to income from Schedule 1, line 26								11		112,4	179
\$20,800	12	Standard deduction or itemized	•	-							12		13,8	
If you checked any box under	13	Qualified business income deduct				-					13			
Standard Deduction,	14										14		13,8	350.
see instructions.	15	Subtract line 14 from line 11. If zer							-		15		98 6	

Form 1040 (2023	3)							Page <b>2</b>		
Tax and	16	Tax (see instructions). Check if any from Fo	orm(s): <b>1</b> 881	4 <b>2</b> 4972	3 🗌		16	17,070.		
Credits	17	Amount from Schedule 2, line 3					17			
	18	Add lines 16 and 17					18	17,070.		
	19	Child tax credit or credit for other depend	ents 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 les	s, enter -0			[	22	17,070.		
	23	Other taxes, including self-employment ta					23	0.		
	24	Add lines 22 and 23. This is your total tax				_	24	17,070.		
Payments	25	Federal income tax withheld from:								
•	а	Form(s) W-2			<b>25a</b> 20	,007.				
	b	Form(s) 1099			25b					
	С	Other forms (see instructions)			25c					
	d	Add lines 25a through 25c					25d	20,007.		
If you have a	26	2023 estimated tax payments and amoun	t applied from 20	022 return			26			
qualifying child,	27	Earned income credit (EIC)		No .	27					
attach Sch. EIC.	28	Additional child tax credit from Schedule 88	312		28					
	29	American opportunity credit from Form 88	363, 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 yo		32						
	33	Add lines 25d, 26, and 32. These are you	total payments			[	33	20,007.		
Refund	34	If line 33 is more than line 24, subtract line	e 24 from line 33	. This is the amou	nt you <b>overpaid</b>		34	2,937.		
	35a	Amount of line 34 you want refunded to		3 is attached, che	ck here	. 🗆	35a	2,937.		
Direct deposit?	b	Routing number 1 2 1 0 0 0			Checking	Savings				
See instructions.	d	Account number 3 2 5 0 3 9	6 5 6 2	7   8						
	36	Amount of line 34 you want applied to yo	ur 2024 estimate	ed tax	36					
Amount	37	Subtract line 33 from line 24. This is the a	mount you owe							
You Owe		For details on how to pay, go to www.irs.	gov/Payments or	see instructions .			37			
	38	Estimated tax penalty (see instructions)			38					
Third Party		you want to allow another person to c			_					
Designee		structions				omplete be		⊠ No		
		signee's me	Phone no.			onal identification (PIN)	ation			
Sign	Un	der penalties of perjury, I declare that I have exam	ined this return and	accompanying sche	dules and statemen	ts, and to the	best o	of my knowledge and		
Here	be	ief, they are true, correct, and complete. Declaration	on of preparer (othe	r than taxpayer) is ba	sed on all informati	on of which p	repare	er has any knowledge.		
пеге	Yo	ur signature	Date	Your occupation		If the IRS sent you an Identity				
				a a	~	/!	Protection PIN, enter it here (see inst.)			
Joint return? See instructions.		average algorithms. If a joint vature, both reversions	Data	SUPPLY CHAIN MANAGER				If the IRS sent your spouse an		
Keep a copy for	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupati	on			ction PIN, enter it here		
your records.								see inst.)		
	Phone no. (818)414-7996 Email address 275SHASHANK@GMAIL.COM									
Doid	Pre	Preparer's name Preparer's signature Date PTIN					Check if:			
Paid	SYA	SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA   03/20/2024   PO20						Self-employed		
Preparer	Firm's name GLOBAL TAXES LLC P						Phone no. (678)965-9522			
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816							Firm's EIN		
<u> </u>	/-	10106						- 1040 ()		

# SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

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

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

Your social security number 838-78-3953

SAI	SHASHANK SILAMKOTIDWARAKANATH	838-78-	78-3953			
Pai	t I Additional Income					
1	Taxable refunds, credits, or offsets of state and local income taxes		1			
2a	Alimony received			а		
b	Date of original divorce or separation agreement (see instructions):					
3	Business income or (loss). Attach Schedule C		3	3		
4	Other gains or (losses). Attach Form 4797		4			
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedu	le E . 5	5	-12,838.	
6	Farm income or (loss). Attach Schedule F		6	;		
7	Unemployment compensation		7	,		
8	Other income:					
а	Net operating loss	8a (	)			
b	Gambling	8b				
С	Cancellation of debt	8c				
d	Foreign earned income exclusion from Form 2555	8d (	)			
е	Income from Form 8853	8e				
f	Income from Form 8889	8f				
g	Alaska Permanent Fund dividends	8g				
h	Jury duty pay	8h				
i	Prizes and awards	8i				
j	Activity not engaged in for profit income	8j				
k	Stock options	8k				
ı	Income from the rental of personal property if you engaged in the rental					
	for profit but were not in the business of renting such property	81				
m	Olympic and Paralympic medals and USOC prize money (see					
	instructions)	8m				
n	Section 951(a) inclusion (see instructions)	8n				
0	Section 951A(a) inclusion (see instructions)	80				
р	Section 461(I) excess business loss adjustment	8p				
q	Taxable distributions from an ABLE account (see instructions)	8q				
r	Scholarship and fellowship grants not reported on Form W-2	8r				
s	Nontaxable amount of Medicaid waiver payments included on Form		,			
	1040, line 1a or 1d	8s (	)			
t	Pension or annuity from a nonqualifed deferred compensation plan or					
	a nongovernmental section 457 plan	8t				
u	Wages earned while incarcerated	8u				
Z	Other income. List type and amount:					
_	Total ather income Add lines On the course On	8z				
9	Total other income. Add lines 8a through 82			<u> </u>		
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente 1040, 1040-SR, or 1040-NR, line 8	r here and o	on Form     <b>1</b> 0	0	-12,838.	

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 <b>adjustments to income</b> 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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

Name(s) shown on return Your social security number SAI SHASHANK SILAMKOTIDWARAKANATH 838-78-3953 Part I Income or Loss From Rental Real Estate and Royalties **Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . 1a Physical address of each property (street, city, state, ZIP code) BOLARUM SECUNDERABAD TELANGANA IN 500010 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 3 587. Rents received . 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,428. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . . . 11 1,116. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 2,013. 14 Repairs . . . . 2,308. 15 Supplies 15 16 16 Taxes 17 Utilities . . . . . . . 17 2,671. 18 3,889. 18 Depreciation expense or depletion . . . . . . 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 . . . . . 13,425. 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 -12,838. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . 22 12,838.) 587. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 3,889. 23d Total of all amounts reported on line 18 for all properties 13,425. Total of all amounts reported on line 20 for all properties 23e 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 12,838. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26

here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 ...

-12,838.