Form	88	<b>B7</b>	<b>'9</b>	
(Rev.	Januar	y 202	21)	
-			-	

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.

Submission Identification Number (SID)

l axpayer's name	Social security number				
PRIYAVARSHINI MURUGAN	651-49-6615				
Spouse's name	Spouse's social security number				
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	year you are authorizing.)				
Enter whole dollars only on lines 1 through 5.					
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
<b>1</b> Adjusted gross income	<b>1</b> 84,830.				
<b>2</b> Total tax	<b>2</b> 10,922.				
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>3</b> 15,074.				
4 Amount you want refunded to you	· · · · <b>4</b> 4,152.				
5 Amount you owe	5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy 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

$\mathbf{X}$	l authorize	GLOBAL TAXES LLC	to enter or generate my PIN
1.4	i ddiilon20		

9	6	6	1	5	00 mV
Ent don	er fiv i't er	ve dig ter a	gits, all ze	but ros	as my

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	e 🕨 🛛 Da	ate 🕨	•						
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III Certif	fication 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		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 >		 Date 🕨	
Dor	ERO Must Retain This F n't Submit This Form to the I		
For Department Peduction Act Nation	a and your toy return instructions	 BE\/ 02/07/24 BBO	Earm 8879 (Bay, 01 2021)

<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Tax</b>		turn	202	3	OMB No. 1545	-0074	IRS Use Only	∕—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, enc	ling			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number
PRIYAVAF	RSHI	NI	MUR	UGAN						651	49	6615
-		s first name and middle initial	Last r									security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.	Preside	ntial Ele	ection Campaigr
_500 WALI									01			ou, or your
City, town, or p	ost offi	ice. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP co			0	jointly, want \$3 nd. Checking a
SEATTLE						WZ		981		box bel	ow will	not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your tax	_	_
											∐ Yo	ou Spouse
Filing Status				、			Head of he	buseh	old (HOH)			
Check only		Married filing jointly (even if only or	ne hac	i income)								
one box.	L.	Married filing separately (MFS) you checked the MFS box, enter the	nomo	ofvouro	nouna lf voi	, ob	, ,		ring spouse	` '	ild'a na	ma if tha
		alifying person is a child but not you									liu s na	
Digital		ny time during 2023, did you: (a) rece										
Assets		hange, or otherwise dispose of a digi		<u> </u>				t)? (Se	e instructio	ns.)		es 🛛 No
Standard	_	neone can claim: 🗌 You as a de					a dependent					
Deduction		Spouse itemizes on a separate return	n or yo	bu were a	dual-status	alien	1					
Age/Blindness	s You	: 🗌 Were born before January 2, 1	959	Are b	lind <b>Spo</b>	ouse	: 🗌 Was bor	n befo	ore January	2, 1959		s blind
Dependents	s (see	instructions):		(2) 5	Social security	,	(3) Relationsh	ip (4		•	fies for (	(see instructions):
If more	<b>(1)</b> F	irst name Last name			number		to you		Child tax c	redit	Credit fo	or other dependents
than four												
dependents, see instructions	s ——											
and check	. —											
here	4											
Income	1a b	Total amount from Form(s) W-2, be Household employee wages not re			,					. 1a . 1b		79,803.
Attach Form(s)	c	Tip income not reported on line 1a			.,					. 10		
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	•		-					. 1d		
W-2G and	e	Taxable dependent care benefits f			, ,					. 1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene								. 1f		
lf you did not	g	Wages from Form 8919, line 6 .								. 19	1	
get a Form W-2, see	h	Other earned income (see instructi								. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			<b>1</b> i					
	z	Add lines 1a through 1h	• •		<sub>.</sub>					. 1z		79,803.
Attach Sch. B	2a	Tax-exempt interest	2a			bΤ	axable interest	: .		. <b>2</b> b	)	
if required.	3a		3a			b C	Ordinary divider	nds .		. 3b	)	
Standard	4a		4a				axable amoun			. 4b		
Deduction for –	5a		5a				axable amoun			. 5b		
<ul> <li>Single or Married filing</li> </ul>	6a	,	6a				axable amoun	t	 ſ	. 6b	)	
separately, \$13,850	c -	If you elect to use the lump-sum el				`	,	• •	l			
<ul> <li>Married filing</li> </ul>	7 0	Capital gain or (loss). Attach Scher		•				• •	l			5 007
jointly or Qualifying	8 9	Additional income from Schedule <sup>-</sup> Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						• •		. <u>8</u> . 9		5,027. 84,830.
surviving spouse, \$27,700	9 10	Add lines 12, 20, 30, 40, 50, 60, 7, Adjustments to income from Sche						• •		· 9	, <del> </del>	01,030.
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is								. 11		84,830.
\$20,800	12	Standard deduction or itemized	•	-	-					. 12		13,850.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deducti					5-A			. 13	-	,
Standard Deduction,	14									. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ss, enter	-0 This is y	our	taxable incom	e.			-	70,980.
	_											

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

Form **1040** (2023)

Form 1040 (2023	5)							Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Fo	rm(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	10,922.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	10,922.
	19	Child tax credit or credit for other depende	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 less	s, enter -0			🗔	22	10,922.
	23	Other taxes, including self-employment ta	x, from Schedule	e 2, line 21 .		🗌	23	0.
	24	Add lines 22 and 23. This is your total tax				🗌	24	10,922.
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2			<b>25a</b> 15	,074.		
	b	Form(s) 1099			25b			
	с	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c				2	25d	15,074.
If you have a	26	2023 estimated tax payments and amount	applied from 20	)22 return			26	
qualifying child,	27	Earned income credit (EIC)			27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 88	12		28			
	29	American opportunity credit from Form 88	63, 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	ur total other p	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. These are your	-	-			33	15,074.
Refund	34	If line 33 is more than line 24, subtract line					34	4,152.
	35a	Amount of line 34 you want refunded to y	ou. If Form 8888	3 is attached, che	ck here	. 🗆 🗄	35a	4,152.
Direct deposit?	b	Routing number 2 7 5 9 7 9		<b>c</b> Type:		Savings		
See instructions.	d	Account number 0 8 4 1 9 7	4 4 0 1			-		
	36	Amount of line 34 you want applied to you	ır 2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the a	nount vou owe					
You Owe		For details on how to pay, go to www.irs.g					37	
	38	Estimated tax penalty (see instructions)			38			
Third Party	Do	you want to allow another person to d	scuss this retu	rn with the IRS?	? See			
Designee		tructions				mplete belo	ow.	X No
•		signee's	Phone			nal identifica	tion	
	nai		no.			er (PIN)		
Sign		der penalties of perjury, I declare that I have examinief, they are true, correct, and complete. Declaration		1 7 0		,		, ,
Here				1			•	
	YO	ur signature	Date	Your occupation				t you an Identity N, enter it here
Joint return?				SOFTWARE	ENGINEER	(see ins		,
See instructions.	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat		If the IR	S sent	t your spouse an
Keep a copy for your records.								ction PIN, enter it here
your records.						(see ins	I.)	
		one no. (608)982-5175	Email address	PVSHINI15	99@GMAIL.CO			
Paid		eparer's name Preparer's sign			Date	PTIN		Check if:
Preparer	SYA	M PRIYA RAM SAGAR GUPTA SYAM PRI	YA RAM SAG	GAR GUPTA	04/11/2024	P020827		Self-employed
Use Only	Fir	n's name GLOBAL TAXES LLC				Phone r	10. (6	678)965-9522
	Firi	n's address 245 ROONEY CT E BR	RUNSWICK N	J 08816		Firm's E	IN	84-3171965
Go to www.irs.go	ov/Forn	1040 for instructions and the latest information.		BAA	REV 03/07/24 PRO			Form <b>1040</b> (2023)

SCHE	DULE	1
(Form	1040)	

Department of the Treasury

## Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 3

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. <b>01</b>
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
PRIYAVARSHINI	MURUGAN	651-49	-6615

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach	Schedule E .	5	-7,973.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	( )		
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555    .    .    8d	( )		
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options		-	
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)			
n	Section 951(a) inclusion (see instructions)		-	
0	Section 951A(a) inclusion (see instructions)		-	
р	Section 461(I) excess business loss adjustment		-	
q	Taxable distributions from an ABLE account (see instructions)			
r	Scholarship and fellowship grants not reported on Form W-2			
S	Nontaxable amount of Medicaid waiver payments included on Form	(		
	1040, line 1a or 1d		-	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan			
u 7	Wages earned while incarcerated <b>8u</b> Other income. List type and amount: <b>8u</b>			
Z	Other income. List type and amount:         Other Income from box 3 of 1099-Misc         13,000.	13,000.		
9	Total other income. Add lines 8a through 8z	1 13,000.	9	13,000.
9 10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter her		3	13,000.
10	1040, 1040-SR, or 1040-NR, line 8		10	5,027.
			10	5,027.

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

Schedule 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	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			
Ŭ	and USOC prize money reported on line 8m			
d				
e	Repayment of supplemental unemployment benefits under the Trade		-	
e	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans		-	
-	Contributions by certain chaplains to section 403(b) plans		-	
g			-	
n	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			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV 0	3/07/24 PRO	Schedule 1 (F	orm 1040) 202

(Form 1040)		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)								90		2		
Department of the Treasury		Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to <i>www.irs.gov/ScheduleE</i> for instructions and the latest information.						Attachment 12						
				rinstru							Sequence No. <b>13</b>			
Name(s) shown on return												ial security number		
PRIYAVARSHINI MURUGAN 651-49-6												9-0015		
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.														
		any payments in 2023 that would require you to file Form(s) 1099? See instructions												No No
1a	1a Physical address of each property (street, city, state, ZIP code)													
Α	105 A,POINTCARE STREET KARAMANIKUPPAM PONDICHERRY IN 605004													
	В													
<u>C</u>														
1b	Type of Prope (from list below	w) above, report the number of fair				rental and			Fair Rental Days		Personal Use Days		QJV	
Α	3			personal use days if you meet the rec		ile as a B		365		0				
B				qualified joint vent										
C	( <b>D</b>							С						
Type of Property:       1       Single Family Residence       3       Vacation/Short-Term Rental       5       Land       7       Self-Rental         2       Multi-Family Residence       4       Commercial       6       Royalties       8       Other (describe)														
										Properti	es:			
Incom	ie:							Α		В			С	
3						3		4	87.					
4		ived				4								
Exper						_								
5				· · · · · · · ·		5								
6 7				ructions)	6 7		1 2	25.						
8	-				8		1,3	25.						
9			9											
10						10								
11	Legal and other professional fees							8	73.					
12	Mortgage interest paid to banks, etc. (see instructions)													
13	Other interest													
14	Repairs							2,1	25.					
15								1,8	36.					
16	Taxes													
17	Utilities							2,3	01.					
18		Depreciation expense or depletion												
19	Other (list)					19 20								
20		al expenses. Add lines 5 through 19						8,4	60.					
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 <b>Form 6198</b>							-7,9	73.					
22	Deductible ren	ntal re	eal e	state loss after limi	tation, if any,	21	/			1		/		```
000		on Form 8582 (see instructions)						22 ( 7,973.)(				(		)
23a b		f all amounts reported on line 3 for all rental propert						•	23a 23b		487.			
D C		l of all amounts reported on line 4 for all royalty propertie l of all amounts reported on line 12 for all properties .							23D 23C					
d				orted on line 12 for					23d					
e		Total of all amounts reported on line 20 for all properties							8	,460.				
24				mounts shown on I							. 24			
25											73.)			

**Supplemental Income and Loss** 

SCHEDULE E

L

26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 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

For Paperwork Reduction Act Notice, see the separate instructions.

26

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-7,973.

OMB No. 1545-0074