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

Submi	ission Identification Number (SID)				
Taxpaye	er's name	Social securi	ty numl	ber	
SHAS	SHINDHAR JAIDI	642-69	-681	3	
Spouse'	's name	Spouse's so	cial secu	urity number	
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enti-	er year you a	re au	thorizina	<u> </u>
	whole dollars only on lines 1 through 5.	er year you a	ii e au	uionzing.	<i>)</i>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	73	,295.
2	Total tax		2		,381.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,585.
4	Amount you want refunded to you		4		,204.
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	rn)
my know return (to send for any Agent t payment authorize payment business taxes t persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended by by by a subject of the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans a my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the financial 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 terminant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resist days 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 all identification number (PIN) below is my signature for the income tax return (original or amended) I	ove are the ammitter, or electrejection of the tu.S. Treasury adicated in the tition to debit the authoriz quests must be processing of payment. I fur	ounts for the counts of the co	from the inc turn original ssion, (b) the designated paration sof to this accor- To revoke (eved no late lectronic parack)	come tax tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 hyment of that the
	nic Funds Withdrawal Consent. Iyer's PIN: check one box only				
X		a my PIN	6 8	8 1 3	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	asiny
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Your s	signature ▶ Date ▶				
Snous	se's PIN: check one box only				
Орошо	I authorize to enter or generate	a my PINI			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	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Spous	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	W			
Part	Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 9 Don't en	6 6	1 9 8	9
		Don telli	or all 2t		
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of	mitting this ret	urn in a	accordance	
ERO's	s signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

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



For the year Jan. 1–Dec. 31, 2023, or other tax year beginning			, 2023, ending , 20						See separate instructions.		uctions.
Your first name and middle initial			Last name						Your social security number		
SHASHINI	DHAR		JAII	OI					642	69 68	313
If joint return, spouse's first name and middle initial				ame						's social secu	
Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Pre								Preside	ntial Election	n Campaign	
2701 MACARTHUR BLVD 622 Che								here if you, o	•		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Stat	e	ZIP code			if filing joint	
_LEWISVII	LLE				TX		75067		to go to this fund. Checking a box below will not change		
Foreign country	y name			Foreign province/state/o	count	y	Foreign postal	code	your tax	x or refund.	_
										You	Spouse
Filing Status	; X	Single				Head of he	ousehold (HO	H)			
Check only		Married filing jointly (even if only or	ne had	income)							
one box.		Married filing separately (MFS)				☐ Qualifying	surviving spo	use (C	QSS)		
	If y	ou checked the MFS box, enter the	name (of your spouse. If you	u che	cked the HOH	l or QSS box,	enter	the chi	ild's name i	f the
	qu	alifying person is a child but not you	r depe	ndent:							
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	pavr	nent for prope	rty or services	s): or (b) sell.		
Assets		lange, or otherwise dispose of a digi					-			☐ Yes	⊠ No
Standard	Som	eone can claim: You as a de	penden	t Your spouse	e as a	a dependent					
Deduction		Spouse itemizes on a separate return	n or you	u were a dual-status	alien	•					
A are /Dlindaes		. \ \	050 [Arablind Co.		□ Mas har	m hafara lanı		1050		
		Were born before January 2, 19	959 [ouse:		n before Janu			ls blir	
Dependent		instructions): irst name Last name		(2) Social security number	'	(3) Relationsh to you	ip · ·	tax cre		ifies for (see i Credit for othe	-
If more	(1) [rist name Last name		Hamber		to you	Offilia		·uit	F Credit for other	
than four dependents,											
see instruction	s —							<u> </u>			
and check here	1 —							$\frac{\square}{\square}$			┪
-	1a	Total amount from Form(s) W-2, bo	nv 1 (e.c	e instructions)				<u> </u>	1a	<u> </u>	2,585.
Income	b	Household employee wages not re	`	,					1b		2,000.
Attach Form(s)	C	Tip income not reported on line 1a	•	• •					10		
W-2 here. Also attach Forms	d	·	•	•					1d		
W-2G and	e	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								,	
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29							1f		
If you did not	g		ages from Form 8919, line 6							1	
get a Form	h	Other earned income (see instructi	ons)						1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,	ructions)		1i					
	z	Add lines to through th							1z	9	2,585.
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest			2 b	,	
if required.	3a	Qualified dividends	3a		b O	rdinary divider	nds		3b	,	
	4a	IRA distributions	4a			axable amount			4b	,	
Standard Deduction for—	5a	Pensions and annuities	5a		b Ta	axable amount	t		5b)	
Single or	6a	Social security benefits	6a		b Ta	axable amoun	t		6b	,	
Married filing separately,	С	If you elect to use the lump-sum el	lection	method, check here	(see i	nstructions)		. \square			
\$13,850 Married filing	7	Capital gain or (loss). Attach Sched	dule D i	f required. If not requ	uired,	check here		. \square	7		
jointly or	8	Additional income from Schedule	1, line 1	0					8		9,290.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	come				9	7	3,295.
\$27,700 Head of	10	Adjustments to income from Schee	dule 1,	line 26					10		
household,	11	Subtract line 10 from line 9. This is	your a	djusted gross incon	me				11		3,295.
\$20,800 If you checked	12	Standard deduction or itemized		,	,				12	: 1	3,850.
any box under Standard	13	Qualified business income deducti	on fron	n Form 8995 or Form	1 8995	5-A			13		
Deduction,	14	Add lines 12 and 13							14	_	3,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our t a	axable incom	e		15	; 5	9,445.

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 4972	3 🗌		16	8,381.
Credits	17	Amount from Schedule 2, lir					[17	
	18	Add lines 16 and 17					[18	8,381.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		[19	
	20	Amount from Schedule 3, lir	•				_	20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	I. If zero or less,	enter -0				22	8,381.
	23	Other taxes, including self-e	•				_	23	0.
	24	Add lines 22 and 23. This is			·		-	24	8,381.
Payments	25	Federal income tax withheld							3,3321
. ayınıdını	а	Form(s) W-2				25a 12	,585.		
	b	Form(s) 1099				25b			
	C	Other forms (see instruction				25c			
	d	Add lines 25a through 25c	•					25d	12 , 585.
16	26	2023 estimated tax paymen					_	26	,
If you have a liqualifying 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	32							
	33	Add lines 27, 28, 29, and 31 Add lines 25d, 26, and 32. T	-					33	12,585.
Refund	34	If line 33 is more than line 24						34	4,204.
	35a	Amount of line 34 you want				•		35a	4,204.
Direct deposit?	b	Routing number 1 1 1					Savings		
See instructions.	d	Account number 4 8 8							
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	. This is the am	ount vou owe					
You Owe	•-	For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	n with the IRS?	See	,		
Designee	ins	structions				. 🗌 Yes. Co	mplete bel	ow.	⊠ No
		signee's		Phone			nal identifica	tion	
0:	name no. number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to t								of my knowledge and
Sign		ief, they are true, correct, and com							
Here								S se	nt you an Identity
	Prot						Protect	ion P	IN, enter it here
Joint return?	SOFIWARE ENGINEER					(see ins	t.)		
See instructions. Keep a copy for	opodoo o dignataro. Il a joint rotarn, botii maot dign. bato opodoo o doodpation							nt your spouse an	
your records.									ection PIN, enter it here
	Phone no. (602) 935-1069 Email address SHASHINDHAR, JAIDI@GMAIL.COM								
		one no. (602) 935-106 eparer's name	Preparer's signat	Email address	NANTUUAK.	Date	PTIN		Check if:
Paid		•	1 .		AR DUDIPALLI		P024708	33	Self-employed
Preparer		ATA SAI PAVAN KUMAR DUDIPALLI m's name GLOBAL TA		. FAVAN KUM	WI DONILUTE				
Use Only			XES LLC Y CT E BRU	INICMITOR N	J 08816		Firm's E		(678) 965-9522
Go to want im ~		11040 for instructions and the late		TANATON IN			I IIIII S E	_1111	88-2145487 Form 1040 (2023)
ao to www.iis.go	וווטיווער	TOTO TO ITISH UCHOUS AND THE IALE	acimonnation.		BAA	REV 03/07/24 PRO			FOIIII 1070 (2023)

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

SHASHINDHAR JAIDI

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 642-69-6813

Taxable refunds, credits, or offsets of state and local income taxes		. 1	
		· I	
Alimony received		2a	
Date of original divorce or separation agreement (see instructions):			
Business income or (loss). Attach Schedule C		3	
			-19 , 290
Farm income or (loss). Attach Schedule F		6	
Unemployment compensation		. 7	
Other income:			
Net operating loss	8a ()	
Gambling	8b		
Cancellation of debt	8c		
Foreign earned income exclusion from Form 2555	8d ()	
Income from Form 8853	8e		
Income from Form 8889	8f		
Alaska Permanent Fund dividends	8g		
Jury duty pay	8h		
Prizes and awards	8i		
	8j		
Stock options	8k		
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		
	8m		
,	8n		
	80		
	8p		
	_ -		
	8r		
	8s (
	,		
	8t		
Other income. List type and amount:			
	8z		
		9	
	Other gains or (losses). Attach Form 4797 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Farm income or (loss). Attach Schedule F. Unemployment compensation Other income: Net operating loss Gambling Cancellation of debt Foreign earned income exclusion from Form 2555 Income from Form 8853 Income from Form 8889 Alaska Permanent Fund dividends Jury duty pay Prizes and awards Activity not engaged in for profit income Stock options 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 Olympic and Paralympic medals and USOC prize money (see instructions) Section 951(a) inclusion (see instructions) Section 951A(a) inclusion (see instructions) Section 461(f) excess business loss adjustment Taxable distributions from an ABLE account (see instructions) Section 461(f) excess business not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan Wages earned while incarcerated Other income. List type and amount: Total other income. Add lines 8a through 8z Combine lines 1 through 7 and 9. This is your additional income. Enter	Other gains or (losses). Attach Form 4797 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Farm income or (loss). Attach Schedule F . Unemployment compensation Other income: Net operating loss Gambling Cancellation of debt Foreign earned income exclusion from Form 2555 Bad (Income from Form 8853 Income from Form 8869 Base Income from Form 8889 Base Base Income from Form 8889 Base Base Base Base Base Base Base Base	Other gains or (losses). Attach Form 4797 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Farm income or (loss). Attach Schedule F Unemployment compensation Other income: Net operating loss Gambling Cancellation of debt Foreign earned income exclusion from Form 2555 Bad () Income from Form 8853 Income from Form 8859 Alaska Permanent Fund dividends Jury duty pay Bh Prizes and awards Activity not engaged in for profit income Stock options 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 Olympic and Paralympic medals and USOC prize money (see instructions) Section 951(a) inclusion (see instructions) Section 951(a) inclusion (see instructions) Section 461(f) excess business loss adjustment Taxable distributions from an ABLE account (see instructions) Sendarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d Wages earned while incarcerated Other income. List type and amount: 9 Attach Scholarship and set fund in the set of the se

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-basis governr	nent		
	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		9a	
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	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses	-		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
_	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 here and			
	Form 1040, 1040-SR, or 1040-NR, line 10	:	26	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Your social security number

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. 13

OMB No. 1545-0074

SHA	SHINDHAR JAIDI						642-69	,-6813			
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rtv, use		C . See	instru	ctions. If you a	re an indivi	dual, repo	ort farm		
Α	Did you make any payments in 2023 that would require you	to file	Form(s) 1	099? 8	See ins	tructions .		. 🗌 Yes 🛚 No			
В	If "Yes," did you or will you file required Form(s) 1099? .								s 🗌 No		
1a	Physical address of each property (street, city, state, ZII										
Α	VELPOOR NIZAMABAD TELANGANA IN 503311										
В											
С											
1b	Type of Property (from list below) 2 For each rental real estate properation above, report the number of fair	rental a	and		Fa	ir Rental Days	Persona Day		QJV		
Α	personal use days. Check the Q					365		0			
В	if you meet the requirements to qualified joint venture. See instru			В							
С	quamica joint vontare. See includ	40110110	•	С							
	of Property:										
	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Land			Self-Rental					
2	Multi-Family Residence 4 Commercial		6 Roya	ılties	8	Other (descr	ibe)				
						Propertie					
Incor	ne:			Α		В			С		
3	Rents received	3			60.						
4	Royalties received	4									
Expe	nses:										
5	Advertising	5									
6	Auto and travel (see instructions)	6									
7	Cleaning and maintenance	7		1,9	20.						
8	Commissions	8									
9	Insurance	9									
10	Legal and other professional fees	10									
11	Management fees	11		1,3	20.						
12	Mortgage interest paid to banks, etc. (see instructions)	12									
13	Other interest	13									
14	Repairs	14		5,5	30.						
15	Supplies	15		6,1	20.						
16	Taxes	16									
17	Utilities	17		4,9	60.						
18	Depreciation expense or depletion	18									
19	Other (list)	19									
20	Total expenses. Add lines 5 through 19	20		19,8	50.						
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If										
	result is a (loss), see instructions to find out if you must										
	file Form 6198	21	-	- 19 , 2	90.						
22	Deductible rental real estate loss after limitation, if any,		,	1000		1					
	on Form 8582 (see instructions)	22	(19,29		()()		
23a	Total of all amounts reported on line 3 for all rental properties of the state of t				23a		560.				
b	Total of all amounts reported on line 4 for all royalty prop				23b						
С	Total of all amounts reported on line 12 for all properties				23c						
d	Total of all amounts reported on line 18 for all properties				23d	1.0	0.50				
e	Total of all amounts reported on line 20 for all properties				23e	19	,850.				
24	Income. Add positive amounts shown on line 21. Do not		•			· · · ·	. 24		10 000 \		
25	Losses. Add royalty losses from line 21 and rental real estat							_	19,290.)		
26	Total rental real estate and royalty income or (loss). here. If Parts II, III, and IV, and line 40 on page 2 do no										
	Schedule 1 (Form 1040), line 5. Otherwise, include this a						26	-	-19,290.		
						I			,		