## 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

Subm	ission Identification Number (SID)		•				
Taxpaye	er's name	Social security number					
SAI	JASWANTH GATTIDI	777-65-1678					
Spouse	's name	Spouse's soc	ial seci	urity nun	nber		
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re au	thorizi	ng.)		
Enter	whole dollars only on lines 1 through 5.				<u> </u>		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1			507.	
2	Total tax		2			136.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			748.	
4	Amount you want refunded to you		4		4,3	312.	
5 Part	Amount you owe		5 v of v	OUR 16	aturn	1	
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)						
for any Agent in payme authori payme busines taxes to person	d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the financial institution account indicated to 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 terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requires days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the period in the confidential information in the period in the financial information in the period in the financial information of the period in the period in the financial information in the period in	S. Treasury as cated in the ta on to debit the the authoriza- uests must be processing of ayment. I furt	nd its of ax prepartion. The received the elements of the elem	designa paration to this a To revoluted no ved no ectronic knowle	ted Fires softwaccoure ke (care later late	nancial are for at. This ncel) a than 2 nent of nat the	
					_		
-	ayer's PIN: check one box only  I authorize GLOBAL TAXES LLC to enter or generate	5 SIN	1   6	5 7	8		
×	I authorize GLOBAL TAXES LLC to enter or generate signature on the income tax return (original or amended) I am now authorizing.	Ent		digits, b	ut	as my	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.						
Yours	signature ▶ Date ▶						
Spous	se's PIN: check one box only	_			_		
	I authorize to enter or generate	mv PIN			,	as my	
	ERO firm name	Ent		digits, b	ut	,	
	signature on the income tax return (original or amended) I am now authorizing.			r all zer			
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.						
Spous	se's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part	III Certification and Authentication — Practitioner PIN Method Only						
FRO's	s <b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9	6 6	1 9	8	9	
	= 1 my mm Emer year est aight Em treme treat sy year mee aight een eeleeted i mit	Don't ent			1 - 1		
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income to ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Ir	itting this retu	rn in a	accorda	nće w		
ERO's	s signature ► Date ►						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To I	o So					

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



£1040		artment of the Treasury—Internal Revenue Servi		turn	202	3	OMB No. 1545-	0074	IRS Use Only	–Do not w	vrite or staple in this	s space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, endi	ing			, 20		parate instruct	
Your first name	and m	iddle initial	Last n	ame						Your so	ocial security nu	mber
SAI JASI	WANT	Н	GAT'	TIDI						777	65   1678	3
		s first name and middle initial	Last n								's social security	
-											1 1	
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.				A	Apt. no.	Preside	ential Election Ca	ampaigr
2313 TEI	DDY .	ROOSEVELT DR								ł	here if you, or yo	
		ice. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP c	ode		if filing jointly, v	
MCKINNE	Y					TΣ	χ l	750	72		o this fund. Chec low will not char	_
Foreign countr				Foreign p	rovince/state/c	count	ty		gn postal code	l	x or refund.	ige
											You	Spouse
Filing Status	s X	Single	· ·				Head of ho	useh	old (HOH)			
•		Married filing jointly (even if only o	ne had	income)					, ,			
Check only one box.		Married filing separately (MFS)		·			☐ Qualifying	surviv	ing spouse	(QSS)		
0.10 20711	lf v	you checked the MFS box, enter the	name	of your s	pouse. If you	ı che					ild's name if th	е
		ialifying person is a child but not you										
<del></del>	^+		-: (		al aaal a					/l=\ = = II		
Digital Assets		ny time during 2023, did you: (a) rec nange, or otherwise dispose of a dig									☐ Yes 🏻 🗡	No
		neone can claim: You as a de					a dependent	i): (O	cc manacho	113.)		
Standard Deduction		Spouse itemizes on a separate retur	•		•		•					
Deduction	Ш.		ii oi yo	u were a	dual-status a	allel						
Age/Blindnes	s You	: Were born before January 2, 1	959	Are b	lind <b>Spo</b>	use	: Was bor	n befo	ore January 2	2, 1959	Is blind	
Dependent	<b>s</b> (see	instructions):		(2)	Social security		(3) Relationshi	p (4			ifies for (see instr	
If more	<b>(1)</b> F	irst name Last name			number		to you		Child tax c	redit	Credit for other de	pendents
than four								<u> </u>				
dependents, see instruction	s											
and check	, —											
here L												
Income	1a	Total amount from Form(s) W-2, b	,		•							192.
Attach Form(s)	b	Household employee wages not re								. 1b		
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)								. 10		
attach Forms W-2G and	d	Medicaid waiver payments not rep		•		ıstru	uctions)			. 10		
1099-R if tax	е	Taxable dependent care benefits f			•					. 16		
was withheld.	f	Employer-provided adoption bene			· ·					. <u>1f</u>		
If you did not get a Form	g	Wages from Form 8919, line 6.				•				. 10		
W-2, see	h	Other earned income (see instruct	,			•		i ·		. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)		•	<u>li</u>				0.0	100
	<u>z</u>	Add lines 1a through 1h	 . i		· · · ·					. 1z		192.
Attach Sch. B if required.	2a	· –	2a				axable interest			. 2b		
	<u>3a</u>		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			. 6b	) 	
separately, \$13,850	C	If you elect to use the lump-sum election method, check here (see instructions)										
<ul> <li>Married filing</li> </ul>	7								L		_	60F
jointly or Qualifying	8	Add lines 17, 2h, 2h, 4h, 5h, 6h, 7	-							. 8	_	685.
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		•						. 9		507.
<ul> <li>Head of</li> </ul>	10	Adjustments to income from Sche								. 10		E 0 7
household, \$20,800	11	Subtract line 10 from line 9. This is	-	-	_					. 11		507.
If you checked	12	Standard deduction or itemized		•		,				. 12		850.
any box under Standard	13	Qualified business income deduct			DIDI IO CEE	099				. 13		<u> Ω Ε Λ</u>
Deduction, see instructions.	14	Add lines 12 and 13				Our f	 tavabla incom			. 14		850. 657

Form 1040 (2023	3)								Page <b>2</b>		
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): <b>1</b> 881	4 <b>2</b> 4972	3 🗌		16	8,436.		
Credits	17	Amount from Schedule 2, lin					🗆	17			
	18	Add lines 16 and 17						18	8,436.		
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		$ extstyle  ag{7}$	19	·		
	20	Amount from Schedule 3, lin	•					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18	. If zero or less.	enter -0				22	8,436.		
	23	Other taxes, including self-e					<del>-</del>	23	0.		
	24	Add lines 22 and 23. This is			•		<del></del>	24	8,436.		
Payments	25	Federal income tax withheld							· · · · · · · · · · · · · · · · · · ·		
. ayınıcınıc	а	Form(s) W-2				<b>25a</b> 12	,748.				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions				25c					
	d	Add lines 25a through 25c	•				2	25d	12,748.		
If you have a	26	2023 estimated tax payment						26			
qualifying child,	27	Earned income credit (EIC)			No .	27					
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812	2		28					
	29	American opportunity credit	from Form 8863	3, line 8		29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lin	ie 15			31					
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ındable credits		32			
	33	Add lines 25d, 26, and 32. T						33	12,748.		
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.				34	4,312.		
	35a	Amount of line 34 you want	refunded to you	u. If Form 8888	is attached, chec	ck here	. 🗆 🖫	5a	4,312.		
Direct deposit?	b	Routing number 0 8 1	0 0 0 0	3 2			Savings				
See instructions.	d	Account number 3 5 5	0 0 4 6	1 5 4 3	3 4						
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36					
Amount	37	Subtract line 33 from line 24	. This is the <b>amo</b>	ount you owe.							
You Owe		For details on how to pay, go	o to <i>www.ir</i> s.gov	v/Payments or	see instructions .			37			
	38	Estimated tax penalty (see in	nstructions) .			38					
Third Party		you want to allow another	•								
Designee		structions					mplete bel		⊠ No		
	De nai	signee's me		Phone no.			onal identifica per (PIN)	tion			
Sign	Un	der penalties of perjury, I declare the	nat I have examined	d this return and	accompanying sche	dules and statement	s, and to the	oest o	of my knowledge and		
Here	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							epare	er has any knowledge.		
пеге	Yo	ur signature		Date	Your occupation		If the IR	S ser	nt you an Identity		
							Protecti (see ins	ection PIN, enter it here			
Joint return? See instructions.				5.	SOFTWARE I		`				
Keep a copy for	opodoo o dignataro. Ir a joint rotarri, <b>botii</b> maot dign.   bato   opodoo o occupation				ion			nt your spouse an ection PIN, enter it here			
your records.							(see inst		, , , , , , , , , , , , , , , , , , , ,		
	Ph	one no. (816)703-768	 5	Email address	SAIJASWANTH	GAT@GMAIL.CO	M				
Daid	Pre	eparer's name	Preparer's signat	ture		Date	PTIN		Check if:		
Paid	VENK	ATA SAI PAVAN KUMAR DUDIPALLI	VENKATA SAI	PAVAN KUM	AR DUDIPALLI		P024708	33	Self-employed		
Preparer	Fir	m's name GLOBAL TAX							678)965-9522		
Use Only			Y CT E BRU	NSWICK N	J 08816		Firm's E		88-2145487		
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/21/24 PRO			Form <b>1040</b> (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

SAI JASWANTH GATTIDI

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.

Sequence No. U1

Your social security number
777-65-1678

Par	t I 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. Atta	ach Schedule E .	5	-16,685.
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 (	<u>)</u>	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-16,685.

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-b					
	officials. Attach Form 2106				12	<u> </u>
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	<u> </u>
16	Self-employed SEP, SIMPLE, and qualified plans				16	<u> </u>
17	Self-employed health insurance deduction				17	
18	Penalty on early withdrawal of savings				18	
19a	Alimony paid				19a	
b	Recipient's SSN					1
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					1
	· · · · · · · · · · · · · · · · · · ·	24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					1
	• • • • • • • • • • • • • • • • • • • •	24c				
d	' ·	24d				1
е	Repayment of supplemental unemployment benefits under the Trade					
		24e				
f		24f			-	1
g	• • • • • • • • • • • • • • • • • • • •	24g				
h	Attorney fees and court costs for actions involving certain unlawful					
	,	24h			_	1
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					
	<u>-</u>	24i			-	1
j	<u> </u>	24j			_	1
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	1414				
_	,	24k			-	
Z	Other adjustments. List type and amount:	24z				
25					25	
25 26	Total other adjustments. Add lines 24a through 24z				25	
20	Form 1040, 1040-SR, or 1040-NR, line 10				26	
	1011111010, 1040 011, 01 1040 1111, 11110 10	<u> </u>	· · ·	• •		

#### **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

SAI	JASWANTH GATTIDI						777-6!	5-1678		
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper			C See	inetru	ctions If you	are an indiv	vidual ren	ort farm	
	rental income or loss from <b>Form 4835</b> on page 2, line 40.	ity, usc	Ochedule	<b>0</b> . 000	iiistiu	Zilorio. Il you c	arc arr irrarv	iduai, rep	ort fairii	
Α	Did you make any payments in 2023 that would require you	to file	Form(s) 1	099? S	See ins	tructions .		. <u> </u>	s 🛚 No	
В	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 <b>Y</b> e	s 🗌 No	
1a	Physical address of each property (street, city, state, ZII	P code	<del>!</del> )							
Α	JAGGAIAHPET KRISHNA ANDHRA PRADESH IN	5211	.75							
В										
С										
1b	Type of Property (from list below)  2 For each rental real estate properabove, report the number of fair	rental	and	Fair Rental Days			Person Da	QJV		
Α	personal use days. Check the Q			Α		365		0		
В	if you meet the requirements to find qualified joint venture. See instru			В						
С	quaimed joint venture. See institu	actions	•	С						
Type	of Property:									
1	Single Family Residence 3 Vacation/Short-Term Ren	ıtal	5 Land			Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)			
						Propert				
Incon	ne:	1		Α		В			С	
3	Rents received	3			40.					
4	Royalties received	4								
Expe										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,8	20.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,2	23.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14		4,8	70.					
15	Supplies	15		4,6	59.					
16	Taxes	16								
17	Utilities	17		4,6	53.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		17,2	25.					
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>	21		-16,6	85.					
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22	(	16,68	35.)		)	(		
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		540.			
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b					
С	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties				23d					
е	Total of all amounts reported on line 20 for all properties				23e	17	,225.			
24	Income. Add positive amounts shown on line 21. Do not		-				. 24			
25	Losses. Add royalty losses from line 21 and rental real estat							(	16,685.	
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 at						on		-16.685	
	- Schedule i il omi 1040), line 3. Otherwise, include mis al	moulii		ıaı UII II	115 4 1	ULL DAUG /	.   76		- เบ.กฎว	