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 sec	curity num	oer			
SRA'	VAN KUMAR BOGINENI	134-45-2126						
Spouse	's name		Spouse's	social sec	urity nu	ımber		
Part	Tax Return Information — Tax Year Ending December 31, 2021	(Enter y	ear you	u are au	thoriz	ing.)		
	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			. 1		70,	893.	
2	Total tax			. 2		8,	514.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			. 3		9,	946.	
4	Amount you want refunded to you					1,	432.	
5	Amount you owe			. 5				
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get	and ke	ерас	opy of y	our ı	returr	<u>1)</u>	
to send for any Agent in payme authori payme busines taxes it person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason of delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial initiation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to teart, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellations days prior to the payment (settlement) date. I also authorize the financial institutions involved to receive confidential information necessary to answer inquiries and resolve issues related to all identification number (PIN) below is my signature for the income tax return (original or amendation).	of for reject e the U.S. ount indicanstitution erminate to on reque- d in the pay of the pay	tion of the action of the action of the to debit the authorsts must rocessing ment. I	e transming and its let ax prepending the entry prization. It be receipt of the effurther acceptants	ssion, design paration to this To revolved no lectron	(b) the ated Fin softwaccoupke (cap later ic payredge t	reason nancial vare for nt. This ancel) a than 2 ment of hat the	
	onic Funds Withdrawal Consent. Bayer's PIN: check one box only							
Тахра		a a kata ma	DINI	5 2	1 2	6		
	ERO firm name	ierate III	y FIIN	Enter five		but	as my	
	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) if you are entering your own PIN and your return is filed using the Practitioner PIN below.							
Yours	signature ▶	te ▶						
Snous	se's PIN: check one box only							
Spous	I authorize to enter or ger	acroto m	v DINI				00 mv	
	ERO firm name	iciale III	y i iiv	Enter five	digits		as my	
	signature on the income tax return (original or amended) I am now authorizing.			don't ente				
	I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.							
Spous	se's signature ▶ Da	te▶						
	Practitioner PIN Method Returns Only—continue	below						
Part	III Certification and Authentication — Practitioner PIN Method Only							
EDO'	S ESIN/DIN Enter your six digit ESIN followed by your five digit self-selected DIN	5 8	7 2 -	7 8 6	1 (9 8	9	
ENU :	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	3 0		enter all z		9 0	9	
			Don't	Citter all Z	03			
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual incized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I are the ements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provide	n submitt	ing this	return in a	accord	ance v		
ERO's	s signature ► Da	te▶						
	ERO Must Retain This Form — See Instruction							
	Don't Submit This Form to the IRS Unless Requested	d To Do	So					

E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

202	1

IRS Use Only-Do not write or staple in this space.

Filing Status Check only		Single Married filing jointly cu checked the MFS box, enter the n	_	ed filing separately (,	_		•	<i>'</i> –	_	, 0	` , ` ,
one box.	•	son is a child but not your dependen		your opouter in your			o	. 2011, 0.110.		oa o		qua,g
Your first name	and m	iddle initial	Last na	ame					Y	our so	cial securit	ty number
SRAVAN I	KUMA	R	BOG:	INENI					1	134-45-2126		
If joint return, s	pouse's	s first name and middle initial	Last na	ame					s	Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.				Apt. no.	P	reside	ntial Election	on Campaign
505 COR	TONA	DR									nere if you,	•
City, town, or p	ost offi	ce. If you have a foreign address, also co	mpletes	spaces below.	Sta	ite		ZIP code				ntly, want \$3 Checking a
ORLANDO					F]	L	32	1 2202		box below will not change		
Foreign country	y name			Foreign province/state/	coun'	ty	Fore	eign postal co	de y	our tax	or refund.	Spouse
At any time du	ıring 20	021, did you receive, sell, exchange	, or othe	erwise dispose of an	y fina	ancial interest	in an	y virtual cu	rrenc	y?	Yes	⊠ No
Standard	Som	eone can claim: You as a de	pender	t Your spous	e as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	u were a dual-status	alier	1						
Age/Blindness	s You	: Were born before January 2, 1	957 [Are blind Sp	ouse	: Was bo	orn be	efore Janua	ry 2, ⁻	1957	☐ Is bl	lind
Dependent	s (see	instructions):		(2) Social security	/	(3) Relations	hip	(4) 🗸	if qual	lifies for	r (see instru	ıctions):
If more	(1) F	irst name Last name	number to you Ch		Child ta	x credit Credit for other		ther dependents				
than four												
dependents, see instruction	s —											
and check												
here ►												
A 1	_1_	Wages, salaries, tips, etc. Attach I	orm(s)	W-2						1		78 , 053.
Attach Sch. B if	2 a	Tax-exempt interest	2a		b T	axable intere	st			2b		
required.	3a	Qualified dividends	3a		b 0	Ordinary divide	ends			3b		
	4a	IRA distributions	4a		b T	axable amou	nt .			4b		
	5a	Pensions and annuities	5a		b T	axable amou	nt .			5b		
Standard	6a	Social security benefits	6a		b T	axable amou	nt .		· <u>·</u>	6b		
• Single or	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □								7		
Married filing	8	Other income from Schedule 1, lin	e 10							8		-7 , 160.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	, and 8. This is your total income							9		70 , 893.
Married filing inith or	10	10 Adjustments to income from Schedule 1, line 26										
jointly or Qualifying	11_	Subtract line 10 from line 9. This is	s your a	djusted gross inco	me				. ▶	11		70,893.
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	tions (from Schedule	: A)	<u>1</u> 2	2a	12,5	550.			
 Head of 	b	Charitable contributions if you take	the sta	ndard deduction (see	instr	ructions) 12	2b	3	300.			
household, \$18,800	С	Add lines 12a and 12b								120	;	12,850.
If you checked	13	Qualified business income deduct	ion fron	n Form 8995 or Form	า 899	95-A				13	_	
any box under Standard	14	Add lines 12c and 13								14		12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lir	ne 11. If zero or less,	ente	er -0				15	!	58,043.

	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	8,514.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	8,514.
	19	Nonrefundable child tax credit or credit for other dependents from Schedule 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, enter -0	22	8,514.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	8,514.
	25	Federal income tax withheld from:		
	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	9,946.
	26	2021 estimated tax payments and amount applied from 2020 return	26	,
If you have a Lagrangian qualifying child,	27a	Earned income credit (EIC)		
attach Sch. EIC.		Check here if you were born after January 1, 1998, and before		
		January 2, 2004, and you satisfy all the other requirements for		
		taxpayers who are at least age 18, to claim the EIC. See instructions ▶ ☐		
	b	Nontaxable combat pay election		
	С	Prior year (2019) earned income		
	28	Refundable child tax credit or additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Recovery rebate credit. See instructions		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32	0.016
	33	Add lines 25d, 26, and 32. These are your total payments	33	9,946.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,432.
D: 1.1 '10	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	1,432.
Direct deposit? See instructions.	▶b	Routing number 0 5 3 0 0 0 1 9 6 ▶ c Type: ▼ Checking Savings Account number 2 3 7 0 3 1 0 3 8 2 5 4 Savings		
	► d			
A	36	Amount of line 34 you want applied to your 2022 estimated tax	07	
Amount You Owe	37	Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions .	37	
	38	Estimated tax penalty (see instructions)		
Third Party Designee		you want to allow another person to discuss this return with the IRS? See structions	elow	X No
Designee		signee's Phone Personal identifi		
		ne ▶ no. ▶ number (PIN) ▶		
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to		
Here		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		, ,
	You			t you an Identity N, enter it here
Joint return?			nst.) ▶ [I I I I I I
See instructions.	Spo		IRS sen	t your spouse an
Keep a copy for		Identi		ction PIN, enter it here
your records.		(see ii	nst.) 🖊	
		one no. (920) 396-2625 Email address BOGINENISRAVAN@GMAIL.COM		
Paid		eparer's name Preparer's signature Date PTIN		Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/03/2022 P02082		Self-employed
Use Only				678) 965-9522
	Firr	m's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Firm's	s EIN ▶	
Go to www.irs.go	ov/Form	n1040 for instructions and the latest information. BAA REV 01/24/22 PRO		Form 1040 (2021)

Form 1040 (2021)

Page 2

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

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

Your social security number
134-45-2126

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	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, tru Schedule E		5	-7,160.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such			
	,	8k		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8p		
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. Enter here and on Form 10 1040-NR, line 8		10	7 160

Schedule 1 (Form 1040) 2021 Page **2**

Par	Adjustments to Income							
11	Educator expenses		. 11					
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106							
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	Jury duty pay (see instructions)	24a						
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b						
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c						
d	Reforestation amortization and expenses	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	24 j						
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	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 adjustments t here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line							

SCHEDULE E (Form 1040)

21

22

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.

OMB No. 1545-0074 Attachment

Department of the Treasury Internal Revenue Service (99)

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

Sequence No. 13 Name(s) shown on return Your social security number 134-45-2126 SRAVAN KUMAR BOGINENI Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions Physical address of each property (street, city, state, ZIP code) Α H.NO5-4-145 KAMALANAGAR VA NASTALIPURAMHYDERABAD TELANGANA IN 500060 В С 1b Fair Rental Personal Use Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days Days** personal use days. Check the QJV box only if you meet the requirements to file as a Α 365 0 Α qualified joint venture. See instructions. В В С 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) Income: Properties: Α 3 Rents received . 3 550. 4 Royalties received 4 Expenses: Advertising 5 5 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 1,330. 8 8 Commissions. 9 Insurance 9 10 10 Legal and other professional fees 11 11 1,520. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 14 1,610. 15 1,690. 15 Supplies Taxes 16 16 17 1,560. 17 18 Depreciation expense or depletion 18 Other (list) 19 19 20 Total expenses. Add lines 5 through 19 20 7,710.

	on Form 8582 (see instructions)	22	(7,16	0.)	()	(
23a	Total of all amounts reported on line 3 for all rental proper	ties				23a	5	50.	
b	Total of all amounts reported on line 4 for all royalty prope	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	e Total of all amounts reported on line 20 for all properties 23e 7,710.								
24	Income. Add positive amounts shown on line 21. Do not	inclu	ude a	ny lo:	sses			24	
25	Losses. Add royalty losses from line 21 and rental real estate.	losse	s fror	n line	22. Fnt	er tota	al losses here	25	7,160.

21

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 o

-7,160.	Sc	hedule F (Form 1040) 203
n page 2 .	26	-7,160.
amount on		

Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must

Deductible rental real estate loss after limitation, if any,

-7,160.