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)

Тахрау	ver's name	Social security number
VAI	BHAV REDDY MODDU	690-40-3166
Spouse	's name	Spouse's social security number
Par	t I Tax Return Information – Tax Year Ending December 31, 2021 (Ent	er 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.	
1	Adjusted gross income	<b>1</b> 46,688.
2	Total tax	<b>2</b> 3,860.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>3</b> 6,417.
4	Amount you want refunded to you	<b>4</b> 3,957.
5	<u>A</u> mount you owe	5

#### Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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

	raumonze		1111110	ERO firm name		E
$\mathbf{X}$	l authorize	CLOBAT	TAYES	TTC	to enter or generate my PIN	

Ent	as my				
0	3	1	6	6	

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

Enter five digits, but don't enter all zeros

as mv

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 >	Date 🕨			
Practitioner PIN Method Returns Only—continue below				
Part III Certification and Authentication – Practitioner P	IN Method Only			
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit	self-selected PIN. 5 8 7 2 7 8 6 1 9 8 9			

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 ►					
ERO Must Retain This Don't Submit This Form to the					
For Paperwork Reduction Act Notice, see your tax return instructions	- BAA	REV 01/17/22 PRO	Form 8879 (Rev. 01-2021)		

E1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) <b>urn</b>	202	21	OMB No. 1	545-0	074 IRS Us	e Only	—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single D Married filing jointly uncharated the MFS box, enter the nison is a child but not your dependen	ame of	-					ousehold (H0 QW box, en				low(er) (QW) he qualifying
Your first name	and mi	iddle initial	Last na	me							Your so	ocial securi	ty number
VAIBHAV	REDI	DY	MODE	U							690-	40-316	6
If joint return, s	pouse's	first name and middle initial	Last na	me							Spouse	's social se	curity number
2626 FR	ANKF	er and street). If you have a P.O. box, see ORD ROAD ce. If you have a foreign address, also co				Stat	to	7	Apt. no. 1309		Check	here if you,	on Campaign , or your ntly, want \$3
DALLAS	031 0110		inpiete a	paces be	1011.	T			75287				Checking a
					e vince (state					aada		low will not x or refund	•
Foreign countr	/ name			Foreign pi	rovince/state	coum	ty		oreign postal	code	your ta		
At any time du	ring 20	021, did you receive, sell, exchange,	, or othe	rwise di	spose of ar	y fina	ncial intere	est in	any virtual o	curre	ncy?	Ves	X No
Standard Deduction		eone can claim:  You as a de Spouse itemizes on a separate retur	n or you	i were a		alien	· · · · · · · · · · · · · · · · · · ·						
Age/Blindness	S You:	Were born before January 2, 1	957	_ Are bl	ind <b>Sp</b>	ouse	: 📋 Was	born	before Jan	,	,	🔄 ls b	
Dependents				(2) 5	Social securit	у	(3) Relation					or (see instru	,
If more	(1) Fi	rst name Last name			number		to yo	u	Child	tax c	redit	Credit for ot	ther dependents
than four dependents,										<u> </u>			
see instruction	s ——									<u> </u>			
and check										<u> </u>			
here 🕨 📋													
Attach	_1_	Wages, salaries, tips, etc. Attach F	Ľ	W-2 .	· · ·	· ·				•	. 1		50,918.
Sch. B if	2a	'	2a			bΤ	axable inte	erest			. <b>2</b> k		
required.	<u>3a</u>		3a				ordinary div				. 3k		
/	4a		4a				axable amo			•	. 4t		
	5a		5a				axable amo			•	. 5k		
Standard Deduction for –	6a		6a				axable amo			· -	. 6k		
Single or	7	Capital gain or (loss). Attach Sche		f required	d. If not rec	uired	, check her	re.					
Married filing separately,	8	Other income from Schedule 1, lin					• • •			•	. 8		-4,230.
\$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,			our total inc	ome				•	▶ 9		46,688.
<ul> <li>Married filing jointly or</li> </ul>	10	Adjustments to income from Sche	,			· ·				•	. 10		
Qualifying widow(er),	11	Subtract line 10 from line 9. This is	-	-	-		· · ·	• •			▶ <u>1</u> 1		46,688.
\$25,100	12a	Standard deduction or itemized				,		12a	12	,55			
<ul> <li>Head of household,</li> </ul>	b	Charitable contributions if you take						12b		30			
\$18,800	С								• • •				12,850.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deduct											10 050
Standard Deduction,	14												12,850.
see instructions.	15	Taxable income. Subtract line 14	Trom lin	ie 11. lf z	ero or less	ente	r-U			•	. 15	<b>D</b>	33,838.

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

Form **1040** (2021)

Form 1040 (2021	)									P	Page <b>2</b>
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16		3,86	50.
	17	Amount from Schedule 2, lin	e3					17			
	18	Add lines 16 and 17						18		3,86	50.
	19	Nonrefundable child tax cree	dit or credit for o	ther depender	nts from Schedul	e8812		19			
	20	Amount from Schedule 3, lin	e8					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22		3,86	50.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23			0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>				. 🕨	24		3,86	50.
	25	Federal income tax withheld				1 1					
	а	Form(s) W-2				<b>25a</b> 6	,417.				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	,			25c					
	d	Add lines 25a through 25c						25d		6,41	17.
If you have a	26	2021 estimated tax payment			3.7			26			
qualifying child, attach Sch. EIC. [	27a	Earned income credit (EIC)				27a					
		Check here if you were b									
		January 2, 2004, and you taxpayers who are at least a	ae 18. to claim t	he EIC. See in	structions						
	b	Nontaxable combat pay elec	-	1 1							
	c	Prior year (2019) earned inco				-					
	28	Refundable child tax credit or		L	Schedule 8812	28					
	29	American opportunity credit	from Form 8863	8, line 8		29					
	30	Recovery rebate credit. See				<b>30</b> 1	,400.				
	31	Amount from Schedule 3, lir				31	,				
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments an	d refundable cred	lits 🕨	32		1,40	.00
	33	Add lines 25d, 26, and 32. T						33		7,81	
Refund	34	If line 33 is more than line 24	I, subtract line 2	4 from line 33.	This is the amou	int you <b>overpaid</b>		34		3,95	57.
neiuliu	35a	Amount of line 34 you want	refunded to you	<b>J.</b> If Form 8888	is attached, che	ck here		35a		3,95	57.
Direct deposit?	►b	Routing number $1 0 3 0 0 6 4 8$ <b>• c</b> Type: <b>X</b> Checking <b>Savings</b>									
See instructions.	►d	Account number 3 1 6	8 0 6 0	2 2			-				
	36	Amount of line 34 you want a	applied to your	2022 estimate	ed tax 🕨	36					
Amount	37	Amount you owe. Subtract	line 33 from line	24. For detail	s on how to pay,	see instructions	. 🕨	37			
You Owe	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?				_		
Designee		tructions					•		× No		
		signee's ne ►		Phone no.			onal identif ber (PIN) 🕨				
0.			hat I have averaine				. ,		t of max la		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com									
Here	Yo	ur signature		Date	Your occupation		If the	IRS ser	t you an	dentity	, The second sec
							Prote	ction PI	N, enter i		
Joint return?					SOFTWARE	ENGINEER	`	nst.) 🕨			
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupa	tion			t your sp		
your records.	,							nst.) 🕨		, enter	
	Ph	one no. (913) 523-574	6	Email address		DY97@GMAIL.CC					
		eparer's name	Preparer's signat		וחקט אשוומדא א	Date	PTIN		Check if	:	
Paid		PRIYA RAM SAGAR GUPTA TALLAM			GUPTA ΤΑΤ.Τ.ΔΝ		P02082	2703	Self		yed
Preparer		n's name ► GLOBAL TAX			<u></u>				678)9		
Use Only		n's address ► 2530 Pebbl		n Cummin	g GA 30041			s EIN 🕨		10171	
Go to www.irc.or		1040 for instructions and the late				REV 01/17/00 RBO	1			1040	
ao to www.iis.go		norror in an	scinionnation.		BAA	REV 01/17/22 PRO			rorm	1040	, (ZUZI)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

# Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number				
VAIBHAV REDDY MODDU	690-4	0-31	L66		
Part 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. Attach Schedule E	5	-4,230.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
а	Net operating loss		
b	Gambling income		
С	Cancellation of debt		
d	Foreign earned income exclusion from Form 2555 8d (		
е	Taxable Health Savings Account distribution		
f	Alaska Permanent Fund dividends		
g	Jury duty pay		
h	Prizes and awards		
i	Activity not engaged in for profit income		
j	Stock options		
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 property		
Ι	Olympic and Paralympic medals and USOC prize money (see instructions)	-	
m	Section 951(a) inclusion (see instructions)         .         .         8m	_	
n	Section 951A(a) inclusion (see instructions)		
ο	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 ►		
0	Total ather income. Add lines to through 0-	•	
9 10	Total other income. Add lines 8a through 8z	9	
10	1040-NR, line 8	10	-4,230.

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-bas 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 390	3	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) $\blacktriangleright$			
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)	1		
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 81 24c	;		
d	Reforestation amortization and expenses	1		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	•		
f	Contributions to section 501(c)(18)(D) pension plans 24f	:		
g	Contributions by certain chaplains to section 403(b) plans 24g	1		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	h		
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)	ζ		
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 in</b> here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10		26	

BAA

SCHEDULE	Е
(Form 1040)	

## **Supplemental Income and Loss**

OMB No. 1545-0074

(Form 1040) Department of the Treasury		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)										$\bigcirc 71$
		► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.									Attachment	
	Revenue Service (99)	► Go to www.irs.gov/ScheduleE for instructions and the latest information.									Sequence No. 13	
Name(s) shown on return												ty number
	HAV REDDY									690-4		
Part			s From Rental Real Esta		-		-			• •	•	
			instructions. If you are an inc									
			nts in 2021 that would rec									res 🛛 No
<b>B</b> If "			ou file required Form(s) 10								. 🗆 🔪	Yes 🗌 No
1a	Physical addr	ess of e	each property (street, city	v, state, ZIF	o code	e)						
Α	SRI RAM N	AGAR	COLONY HYDERABAD,	L.B.NAC	GAR I	EN 500	068					
В												
C												
1b	Type of Pro		2 For each rental real	perty listed			Fair Rental Days		Personal Use Days		QJV	
	(from list bel		above, report the nupersonal use days.	<b>QJV</b> box only								
Α	2		personal use days. Check the <b>C</b> if you meet the requirements to			file as a			365	0		
В			qualified joint ventu	re. See inst	ructio	ns.	В					
C							С					<u> </u>
	of Property:											
	gle Family Resid		3 Vacation/Short-Ter	rm Rental				7 Self-				
	ti-Family Reside	ence	4 Commercial		6 Ro	yalties		8 Othe	r (describe			
Incom	-			operties:			Α		E	3		С
3					3			400.				
4		ived.			4							
Expen					_							
5					5			80.				
6		-	nstructions)		6			150.				
7			nance		7			650.				
8					8							
9					9							
10	-	-	essional fees		10							
11	-				11							
12		-	d to banks, etc. (see inst		12							
13					13			0.5.0				
14					14			250.				
15					15		1,	400.				
16					16							
17					17		1,	100.				
18	Depreciation e	expense	e or depletion		18							
19	Other (list) ►				19							
20			lines 5 through 19		20		4,	630.				
21			line 3 (rents) and/or 4 (ro									
			instructions to find out if				л	220				
• •					21		-4,	230.				
22			l estate loss after limitatio			,			1	、	/	
			structions)		22	(		230.)	(	)	(	
23a			eported on line 3 for all re					23a		400.		
b			eported on line 4 for all ro					23b				
C			eported on line 12 for all			• •		23c				
d			eported on line 18 for all			• •		23d				
е	I otal of all am	ounts r	eported on line 20 for all	properties				23e		4,630.		

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	( 4,230.)
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result		
	here. If Parts II, III, 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 .	26	-4,230.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2021