# 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

Submission Identification Number (SID)		-		
Taxpayer's name	Social securit	ty number		
RAVI TEJA MUPPALLA	200-51-	-1742		
Spouse's name	Spouse's soc	ial security	number	
SUMA MEDA	777-21	-9736		
Part I Tax Return Information — Tax Year Ending December 31, 2021 (Enter	year you a	re autho	rizing.)	
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 1		
1 Adjusted gross income		1		687.
2 Total tax		2		679.
Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		566.
4 Amount you want refunded to you		5	9,	687.
5 Amount you owe			r retur	2)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)				
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abov return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reje for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indipayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requbusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment (settlement) below is my signature for the income tax return (original or amended) I ar Electronic Funds Withdrawal Consent.	itter, or electro- ection of the tr S. Treasury all cated in the tr ant to debit the the authoriza- uests must be processing of ayment. I furt	onic return ransmission and its designated as preparated entry to the ation. To represent the electrostation acknown as the electrostation acknown and the electrostation acknown ackn	originato n, (b) the gnated Fi tion softw his account evoke (ca no later onic payr wledge the	or (ERO) reason inancial vare for nt. This ancel) a than 2 ment of
Taxpayer's PIN: check one box only				
▼ I authorize GLOBAL TAXES LLC to enter or generate I	Ent	1 7 4 ter five digit	s, 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) I am notify you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methodelow.				
Your signature ▶ Date ▶				
Spouse's PIN: check one box only				
I authorize GLOBAL TAXES LLC to enter or generate a signature on the income tax return (original or amended) I am now authorizing.	Ent	9   7   3 ter five digit n't enter all	s, but	as my
I will enter my PIN as my signature on the income tax return (original or amended) I am n	ow authorizi	na Chack	thic ho	v only
if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth- below.				
Spouse's signature ▶ Date ▶				
Practitioner PIN Method Returns Only—continue below				
Part III Certification and Authentication — Practitioner PIN Method Only  ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.  5 8		8 6 1 er all zeros	9 8	9
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income ta authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm requirements of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of Ir	itting this retu	ırn in acco	rdanće v	
ERO's signature ▶ Date ▶				
ERO Must Retain This Form — See Instructions				

Don't Submit This Form to the IRS Unless Requested To Do So

## **£1040**

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

2021

OMB No. 1545-007

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

Filing Status Check only one box.	If yo	Single  Married filing jointly [ ou checked the MFS box, enter the reson is a child but not your depender	name of	ied filing separately your spouse. If you	, ,	_		` ,	_	, ,	` , ` ,
Your first name and middle initial Last name You						Your social security number					
RAVI TE	RAVI TEJA MUPPALLA 2						200-51-1742				
If joint return, s	pouse's	s first name and middle initial	Last na	ame					Spouse's	Spouse's social security numbe	
SUMA			MED	A					777-21-9736		
Home address	(numbe	er and street). If you have a P.O. box, see	e instruct	ions.				Apt. no.	Presider	ntial Electi	ion Campaigr
401 S C	TIC	ROAD						134		ere if you	
City, town, or p		ce. If you have a foreign address, also co	F					code 072	spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change		
Foreign countr	y name			Foreign province/stat	te/coun	ty	Fore	Foreign postal code your tax or r			
At any time du	ring 20	021, did you receive, sell, exchange	, or oth	erwise dispose of a	any fina	ancial interes	st in an	y virtual curre	ncy?	Yes	⊠ No
Standard Deduction		<b>leone can claim:</b> You as a de Spouse itemizes on a separate retu	•				t				
Age/Blindnes	You	: Were born before January 2, 1	1957 [	Are blind S	pouse	: Was b	orn be	fore January 2	2, 1957	☐ Is b	lind
Dependent	s (see	instructions):		(2) Social secu	rity	(3) Relation	ship	<b>(4)</b> 🗸 if q	ualifies for	(see instru	uctions):
If more	(1) F	irst name Last name		number to you Child tax					redit	Credit for o	ther dependents
than four											
dependents, see instruction	e										
and check											
here ▶ □											
	1_	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1		93,787.
Attach	2a	Tax-exempt interest	2a		<b>b</b> Taxable interes		est		. 2b		
Sch. B if required.	3a	Qualified dividends	3a		<b>b</b> Ordinary dividend				. 3b		
required.	4a	IRA distributions	4a		<b>b</b> Taxable amount .				. 4b		
	5a	Pensions and annuities	5a		<b>b</b> Taxable amount .				. 5b		
Standard	6a	Social security benefits	6a	<b>b</b> Taxable amount							
Deduction for—	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here									
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, lir	ne 10		·				. 8		-9,100.
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>									84,687.
\$12,550 Married filing	10	Adjustments to income from Schedule 1, line 26									
jointly or Qualifying	11	Subtract line 10 from line 9. This is your adjusted gross income							▶ 11		84,687.
widow(er),	12a	Standard deduction or itemized	-	-		1	2a	25,10	0.		
\$25,100 • Head of	b	Charitable contributions if you take					2b	60			
household,	c	Add lines 12a and 12b								:	25,700.
\$18,800 If you checked	13	Qualified business income deduct	tion fror	n Form 8995 or Fo	rm 899	95-A			. 12c		
any box under Standard	14	Add lines 12c and 13									25,700.
Deduction,	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0									58,987.

	16	Tax (see instructions). Check					_	16	6,679.
	17	Amount from Schedule 2, line	e3					17	
	18	Add lines 16 and 17						18	6,679.
	19	Nonrefundable child tax cred	lit or credit for o	ther depender	nts from Schedule	8812		19	
	20	Amount from Schedule 3, line	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	6,679.
	23	Other taxes, including self-er	mployment tax,	from Schedule	2, line 21			23	0.
	24	Add lines 22 and 23. This is y	our <b>total tax</b>				▶	24	6,679.
	25	Federal income tax withheld	from:						
	а	Form(s) W-2				<b>25</b> a 1	3,566.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions							
	d	Add lines 25a through 25c .						25d	13,566.
If you have a	26	2021 estimated tax payment	26						
qualifying child,	27a	Earned income credit (EIC) .				27a			
attach Sch. EIC.		Check here if you were b January 2, 2004, and you taxpayers who are at least ag	satisfy all the ge 18, to claim t	e other requi he EIC. See in	rements for				
	b	Nontaxable combat pay elec							
	С	Prior year (2019) earned inco							
	28	Refundable child tax credit or				28			
	29	American opportunity credit		*		30	2,800.		
	30	Recovery rebate credit. See							
	31	Amount from Schedule 3, line							
	32	Add lines 27a and 28 through	32	2,800.					
	33	Add lines 25d, 26, and 32. The	33	16,366.					
Refund	34	If line 33 is more than line 24	34	9,687.					
	35a	Amount of line 34 you want r	35a	9,687.					
Direct deposit? See instructions.	▶b	Routing number 1 1 1							
	►d	Account number 5 6 1							
	36	Amount of line 34 you want a				36			
Amount	37	Amount you owe. Subtract				1 1	. ▶	37	
You Owe	38	Estimated tax penalty (see in				38			
Third Party Designee	ins	you want to allow another tructions	•			► Yes. C	Complete b		X No
		signee's ne ▶		Phone no. ▶			sonal identif nber (PIN) 🕨		
Sign	Und	der penalties of perjury, I declare the ef, they are true, correct, and comp		ed this return and		edules and statem	ents, and to	the bes	
Here	You	Your signature		Date Your occupation			1		nt you an Identity IN, enter it here
Joint return?					(see	inst.) 🕨			
See instructions. Keep a copy for	Spo	Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupati				nt your spouse an ection PIN, enter it here
your records.					HOME MAKER		<b>I</b>	inst.) ▶	
	Pho	one no. (469)514-4285	5	Email address	MUPPALLARAVI	TEJA@GMAIL.C	MOM		
Paid	Pre	parer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/29/2022	P02082	2703	Self-employed
Use Only	Firm's name ► GLOBAL TAXES LLC Phon						ie no. (	678)965-9522	
————	Firn	n's address ▶ 2530 Pebbl	e Creek L	n Cummin	g GA 30041		Firm	s EIN 🕨	30-1017196
Go to www.irs.go	ov/Form	1040 for instructions and the lates	st information.		BAA	REV 03/19/22 PRO			Form <b>1040</b> (2021)

Form 1040 (2021)

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#### **SCHEDULE 1** (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074 Attachment

Department of the Treasury Internal Revenue Service

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

RAVI TEJA MUPPALLA & SUMA MEDA

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form1040 for instructions and the latest information. Sequence No. 01

Your social security number

200-51-1742

Part I **Additional Income** Taxable refunds, credits, or offsets of state and local income taxes . . . . . . . 1 2a **b** Date of original divorce or separation agreement (see instructions) 3 3 4 4 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach 5 -9,100. 6 6 7 7 8 Other income: a Net operating loss 8a 8b 8c **d** Foreign earned income exclusion from Form 2555 . . . . . 8d e Taxable Health Savings Account distribution . . . . . . . . 8e 8f 8a 8h i Activity not engaged in for profit income . . . . . . . . . . . . . 8i 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 81 m Section 951(a) inclusion (see instructions) . . . . . . . . . . . . 8<sub>m</sub> Section 951A(a) inclusion (see instructions) . . . . . . . . . . . . 8n o Section 461(I) excess business loss adjustment . . . . . . . . 80 **p** Taxable distributions from an ABLE account (see instructions). **q8 z** Other income. List type and amount ▶ 9 Total other income. Add lines 8a through 8z . . . . . . . . . . . 9 10 Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 10

-9,100.

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-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	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	<b>&gt;</b>		
С	Date of original divorce or separation agreement (see instructions)	<b>-</b>		
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	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	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	<b>24</b> i		
j	Housing deduction from Form 2555	<b>24</b> j		
k	Excess deductions of section 67(e) expenses from Schedule K-1	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 <b>adjustments t</b> here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line		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.

Department of the Treasury Internal Revenue Service (99)

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

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s)	shown on return								Your soci	al securit	y number
RAVI	/I TEJA MUPPALLA & SUMA MEDA							200-51-1742			
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.											
A Dic	I you make any payments	s in 2021 that would r	equire you to	file F	orm(s) 1	099? S	See insti	uctions .		. 🗆 Y	∕es ⊠ No
	Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions										
1a	Physical address of ea										
Α	BALAKRISHNANAGAI	R KUAKATPALLY '	TELANGANA	A IN	5000	72					
В											
С											
1b	Type of Property (from list below)	of Property  2 For each rental real estate property listed above, report the number of fair rental and  Days							Persona Day	1	QJV
A	(HOITH list below)	above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a					-	365	Day	0	
В		qualified joint ven	ture. See inst	ructio	ns.	В					$\overline{}$
С						С					$\overline{}$
Туре	of Property:										
	le Family Residence	3 Vacation/Short-T	erm Rental	5 La	nd		7 Self-	Rental			
2 Mult	i-Family Residence	4 Commercial		6 Ro	yalties		8 Othe	r (describe)	)		
Incom	e:		Properties:			Α		В			С
3	Rents received			3			600.				
4	Royalties received			4							
Expen	ses:										
5	Advertising			5							
6	Auto and travel (see inst			6							
7	Cleaning and maintenar	nce		7		1,	500.				
8	Commissions			8							
9	Insurance			9							
10	Legal and other profess	sional fees		10							
11	Management fees			11		1,	000.				
12	Mortgage interest paid	to banks, etc. (see in	structions)	12							
13	Other interest			13							
14	Repairs			14		2,	000.				
15	Supplies			15		2,	200.				
16	Taxes			16							
17	Utilities			17		3,	000.				
18	Depreciation expense o			18							
19	Other (list) ► Total expenses. Add line			19							
20	Total expenses. Add line	es 5 through 19		20		9,	700.				
21	Subtract line 20 from lir result is a (loss), see ins	' '	,								
	file <b>Form 6198</b>			21		-9,	100.				
22	Deductible rental real e on Form 8582 (see insti			22	(	9 1	LOO.)	(	)	(	)
23a	Total of all amounts rep	•					23a	1	600.		,
b	Total of all amounts rep						23b				
C	Total of all amounts rep						23c				
d	Total of all amounts rep						23d				
e	Total of all amounts rep						23e		9,700.		
24	<b>Income.</b> Add positive a								. 24		
25	Losses. Add royalty loss				-		nter tota	al losses her	-	(	9,100.)
26	Total rental real estate										-, /
20	here. If Parts II, III, IV, Schedule 1 (Form 1040)	and line 40 on pag	e 2 do not	apply	to you	, also	enter th	nis amount			-9,100.