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	nission Identification Number (SID)			
Taxpay	yer's name	Social securit	y number	
VAS	-6302			
Spouse	ial security number			
Par	Tax Return Information — Tax Year Ending December 31, 2021 (En	 ter year you a	re authorizi	ng.)
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		1	75,260.
2	Total tax		2	9,482.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	10,623.
4	Amount you want refunded to you		4	1,474.
5	Amount you owe		5	
Part	t II Taxpayer Declaration and Signature Authorization (Be sure you get an	d keep a cop	y of your r	eturn)
return to sen for an Agent payme author payme busine taxes persor	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I all (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tran and my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for y delay 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 it ent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation ress days prior to the payment (settlement) date. I also authorize the financial institutions involved in to receive confidential information necessary to answer inquiries and resolve issues related to the nal identification number (PIN) below is my signature for the income tax return (original or amended) onic Funds Withdrawal Consent.	smitter, or electrorejection of the trace U.S. Treasury andicated in the taution to debit the nate the authorizate quests must be the processing of a payment. I furt	nic return origansmission, (i) and its designa x preparation entry to this rition. To revoreceived no the electronicher acknowle	ginator (ERO) b) the reason ited Financial a software for account. This ke (cancel) a later than 2 c payment of edge that the
	ayer's PIN: check one box only			
	■ I authorize GLOBAL TAXES LLC to enter or genera	te my PIN	6 3 0	$\frac{2}{}$ as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, b i't enter all zer	out
	I will enter my PIN as my signature on the income tax return (original or amended) I and if you are entering your own PIN and your return is filed using the Practitioner PIN me below.			
Your	signature ▶ Date ▶			
Snou	ise's PIN: check one box only			
Spou	I authorize to enter or genera	to my DINI		00 my
L	ERO firm name	,	er five digits. b	as my
	signature on the income tax return (original or amended) I am now authorizing.		't enter all zer	
	I will enter my PIN as my signature on the income tax return (original or amended) I an if you are entering your own PIN and your return is filed using the Practitioner PIN me below.			
Spou	se's signature ▶ Date ▶			
	Practitioner PIN Method Returns Only—continue belo)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. 5		8 6 1 9 er all zeros	8 9
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am su ements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of	bmitting this retu	rn in accorda	ance with the
EB○'	's signature ▶ Date ▶	•		
LINU	ERO Must Retain This Form — See Instructions			
	LIO IVIUSI DEIGIII IIIIS FUITI — SEE IIISII UCIIOIIS			

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

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

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OMB No. 1545-0074

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

Filing Status Check only one box.	If yo	Single Married filing jointly uchecked the MFS box, enter the room is a child but not your dependen	name of	ried filing separately of your spouse. If you	` ′			,	_	, ,	` , ` ,	
							Your social security number					
VASAVI				ALA					017-87-6302			
	pouse's	s first name and middle initial	Last n						_		curity number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				Apt. no.	Preside	ntial Electi	on Campaign	
17112 PI	REST	ONS BRAID LN								here if you,	•	
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete	spaces below.	Sta	ite	ZIP	code			ntly, want \$3 Checking a	
ROUND RO	OCK			TX			78	170661		to go to this fund. Checking a box below will not change		
Foreign country	y name			Foreign province/state	e/coun	ity	Foreign postal code)		your ta	or refund.	Spouse	
At any time du	ring 20	021, did you receive, sell, exchange	, or oth	erwise dispose of ar	ny fina	ancial interest	in an	y virtual curre	ncy?	Yes	⊠ No	
Standard Deduction	_	eone can claim: You as a de Spouse itemizes on a separate retur	•	•								
Age/Blindness	s You:	☐ Were born before January 2, 1	957	Are blind Sp	ouse	: Was bo	rn be	efore January 2	2, 1957	☐ Is bl	lind	
Dependents (see instructions): (2) Social security (3) Relationship (4) ✔ if qua						ualifies fo	r (see instru	uctions):				
If more		irst name Last name		number		to you		Child tax c	ax credit Credit for other depender			
than four												
dependents, see instruction	s ——											
and check	<u> </u>											
here												
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1		83,711.	
Attach Sch. B if	2a	Tax-exempt interest	2a		b T	axable interes	t		. 2b)	64.	
required.	3a	Qualified dividends	3a		b Ordinary dividends		nds		. 3b)		
	4a	IRA distributions	4a	b Taxable amount					. 4b)		
	5a	Pensions and annuities	b Taxable amount						. 5b)		
Standard	6a	Social security benefits	b Taxable amount						. 6b)		
Deduction for— Single or	7	Capital gain or (loss). Attach Sche	Attach Schedule D if required. If not required, check here ▶									
Married filing	8	Other income from Schedule 1, line 10							. 8		-8,515.	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							▶ 9	'	75 , 260.	
Married filing	10	Adjustments to income from Schedule 1, line 26							. 10)		
jointly or Qualifying	11_	Subtract line 10 from line 9. This is	s your a	adjusted gross inco	me		;		▶ 11		75 , 260.	
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedul	e A)	12	а	12,55	0.			
Head of	b	Charitable contributions if you take	the sta	andard deduction (se	e insti	ructions) 12	b	30	0.			
household, \$18,800	С	Add lines 12a and 12b							. 12	c :	12,850.	
If you checked	13	Qualified business income deduct	tion fro	m Form 8995 or Forr	n 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 li	ne 11. If zero or less	, ente	er -0			. 15	5	62,410.	

	16	Tax (see instructions). Check if any from Form	(s): 1 🗌 881	4 2 🗌 4972	3 🗌		16	9,482.		
	17	Amount from Schedule 2, line 3					17			
	18	Add lines 16 and 17					18	9,482.		
	19	Nonrefundable child tax credit or credit for o	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,	22	9,482.						
	23	Other taxes, including self-employment tax,	23	0.						
	24	Add lines 22 and 23. This is your total tax				🕨	24	9,482.		
	25	Federal income tax withheld from:								
	а	Form(s) W-2								
	b	Form(s) 1099			25b					
	С	Other forms (see instructions)			25c					
	d						25d	10,623.		
	26	2021 estimated tax payments and amount a					26	·		
If you have a Lagrangian qualifying child,	27a	Earned income credit (EIC)			27a					
attach Sch. EIC.		Check here if you were born after Janu	ary 1, 1998,	and before						
		January 2, 2004, and you satisfy all the								
		taxpayers who are at least age 18, to claim to	1 1	structions ► ∐						
	b	Nontaxable combat pay election			-					
	С	Prior year (2019) earned income								
	28	Refundable child tax credit or additional child			28		-			
	29	American opportunity credit from Form 8863, line 8					-			
	30	Recovery rebate credit. See instructions .	30	333.	-					
	31	Amount from Schedule 3, line 15			31			000		
	32	Add lines 27a and 28 through 31. These are	-				32	333.		
	33	Add lines 25d, 26, and 32. These are your to					33	10,956.		
Refund	34	If line 33 is more than line 24, subtract line 24			•		34	1,474.		
D	35a	Amount of line 34 you want refunded to you	35a	1,474.						
Direct deposit? See instructions.	▶b	Routing number 0 4 4 0 0 0 0								
	► d	Account number 2 5 7 9 2 5 2								
A	36	Amount of line 34 you want applied to your			36					
Amount You Owe	37	Amount you owe. Subtract line 33 from line			1 1	. •	37			
	38	Estimated tax penalty (see instructions) .			38					
Third Party Designee		you want to allow another person to disc tructions				Complete I	helow	X No		
Designee		signee's	Phone			ersonal identi		/ ITO		
		ne ►	no.			mber (PIN)				
Sign		der penalties of perjury, I declare that I have examine								
Here	beli	ef, they are true, correct, and complete. Declaration of	of preparer (other	than taxpayer) is ba	sed on all informa	ation of whicl	1 prepare	er has any knowledge.		
11010	You	ur signature	Date Your occupation					nt you an Identity		
l-i-t0					יאור דאונינים	I .	otection PIN, enter it here			
Joint return? See instructions.	Spo	puse's signature. If a joint return, both must sign.	SOFTWARE ENGINEER Date Spouse's occupation				f the IRS sent your spouse an			
Keep a copy for	J Gp.	out of origination of a former ordering Doub made origin	Jaio	орошоо о оооири	···	Iden	tity Prote	ection PIN, enter it here		
your records.						(see	inst.) 🕨			
	Pho	one no. (937) 750-9479	Email address	VASAVI.SAMA	LA@GMAIL.					
Paid	Pre	parer's name Preparer's signate	ure		Date	PTIN		Check if:		
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	04/14/202	2 P0208	2703	Self-employed		
Preparer Use Only	Firr	n's name ▶ GLOBAL TAXES LLC				Pho	ne no. (678)965-9522		
	Firr	n'saddress ▶ 2530 Pebble Creek L	n Cumming	g GA 30041		Firm	's EIN ▶	30-1017196		
Go to www.irs.go	ov/Form	1040 for instructions and the latest information.		BAA	REV 04/09/22 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

Department of the Treasury Internal Revenue Service

VASAVI SAMALA

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

Attachment Sequence No. 01 Your social security number

017-87-6302

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	S	1	
2a	Alimony received	2a		
b	Date of original divorce or separation agreement (see instructions)			
3	Business income or (loss). Attach Schedule C	3	ı	
4	Other gains or (losses). Attach Form 4797		4	ı
5	Rental real estate, royalties, partnerships, S corporations, treschedule E		5	- 8,515.
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 property	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		9	
	1040-NR. line 8		10	_0 515

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			
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	>	_	
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)

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.

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

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

Sequence No. 13

Your social security number

	VI SAMALA								L7-87		
Part	Income or Loss	From Rental Real Estate and Roy	/altie	s Note:	If you a	are in th	e business o	f renti	ng pers	onal pro	operty, use
	Schedule C. See in	nstructions. If you are an individual, repo	ort far	m rental ind	come o	r loss fr	om Form 48	35 or	n page 2	, line 40).
A Dic	d you make any paymer	nts in 2021 that would require you to	file F	orm(s) 10	99? Se	ee instr	uctions .			□ Y	es 🗵 No
		u file required Form(s) 1099?									
1a	Physical address of e	each property (street, city, state, ZIP	code	e)							
Α	-	Medchal District Telanga			101						
В											
С											
1b	Type of Property	2 For each rental real estate prop	erty I	isted		Fair	Rental	Per	sonal l	Jse	QJV
	(from list below)	above, report the number of fai	r rent	al and			ays		Days		QUV
Α	3	personal use days. Check the QJV box only if you meet the requirements to file as a 365						(0 🗆		
В		qualified joint venture. See insti	ructio	ns.	В						
C					С						
	of Property:										
•	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd	7	Self-	Rental				
	ti-Family Residence		6 Ro	yalties	8	3 Othe	r (describe))			
Incom		Properties:			Α		В	3			
3			3		- 6	605.					
4			4								
Expen			_								
5	•		5								
6	•	structions)	6								
7		ance	7		1,6	540.					
8			8								
9			9								
10	-	ssional fees	10								
11	•		11		1,5	540.					
12		d to banks, etc. (see instructions)	12								
13			13		1 0	200					
14	•		14			920.					
15			15		1,5	920.					
16			16		0 1	1.0.0					
17			17		۷, ۱	100.					
18	Depreciation expense Other (list) ▶	or depletion	18								
19	` ′	ingo 5 through 10	19		Λ 1	120					
20	•	ines 5 through 19	20		9,1	120.					
21		line 3 (rents) and/or 4 (royalties). If									
	file Form 6198	nstructions to find out if you must	21		-8,5	515					
22		estate loss after limitation, if any,	21		0,0	· · ·					
22	on Form 8582 (see ins		22	(8 5	15.)	()/		1
23a		eported on line 3 for all rental proper		ĮV.		23a	1	6	05.)
23a b		eported on line 4 for all royalty proper				23b		- 0			
C		eported on line 4 for all properties				23c					
d		eported on line 18 for all properties				23d					
e		eported on line 20 for all properties				23e		9,1	20		
24		e amounts shown on line 21. Do no t	incl					J , 1.	24		
25	•	sses from line 21 and rental real estate		,		iter tota	 al losses her	e .	25 (8,515.)
		ate and royalty income or (loss).						- 1			<u> </u>
26		/, and line 40 on page 2 do not a									
		0), line 5. Otherwise, include this an							26		-8,515.

NPA