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

Internal Revenue Servi	ice				
Submission Iden	utification Number (SID)				
Taxpayer's name	Social secul	ritv numl	ber		
VASAVI SAM	7-6302				
Spouse's name		urity numl	ber		
	Return Information — Tax Year Ending December 31, 2021 (Enter year you	are au	thorizin	g.)	
	ars only on lines 1 through 5.				
	0-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	1.4	-	75 , 2	60
	gross income	2	 '		82.
	ncome tax withheld from Form(s) W-2 and Form(s) 1099	3	1		23.
	ou want refunded to you	4			74.
5 Amount y	•	5		<u> </u>	/1.
Part II Tax	payer Declaration and Signature Authorization (Be sure you get and keep a co	py of y	our re	turn)	
return (original or a to send my return for any delay in pro Agent to initiate an payment of my fed authorization is to payment, I must obusiness days prio taxes to receive opersonal identificat Electronic Funds V Taxpayer's PIN: X I author signature I will en	re on the income tax return (original or amended) I am now authorizing. ter my PIN as my signature on the income tax return (original or amended) I am now authorize entering your own PIN and your return is filed using the Practitioner PIN method. The ER	ronic retransminand its of tax pregentax pregentax pregentary zation. The electric receipt the electric rate of th	turn originasion, (b) designate operation is to this action of the control of the	nator) the red Fin softwatecount e (can ater ti paym ge the blicable at	(ERO) eason ancial are for t. This ncel) a han 2 ent of at the le, my s my
Your signature >	Vasavi Samala Date ▶ _04/13/202	2			
Spouse's PIN: c	check one box only			_	
☐ I author	-			a	s my
☐ I will en	ERO firm name	on't ente zing. Ch		it s s box	only
Spouse's signatu	ure ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part III Cer	tification and Authentication — Practitioner PIN Method Only				
ERO's EFIN/PIN	I. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8 7 2 7 Don't er	8 6 nter all ze	1 9 eros	8 9	9
authorized to file f	pove numeric entry is my PIN, which is my signature for the electronic individual income tax return (original tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this representationer PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Individual Incomparison.	turn in a	accordan	će wi	
ERO's signature	▶ Date ▶				
	ERO Must Retain This Form — See Instructions				

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

|--|

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 first name								Your social security number			
VASAVI			SAM	ALA					017-87-6302		
If joint return, s	pouse's	s first name and middle initial	Last n	ame					Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box, see	e instruc	tions.				Apt. no.	1		on Campaign
17112 PI	REST	ONS BRAID LN							1	here if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete	spaces below.	Sta			code			ntly, want \$3 Checking a
ROUND RO	OCK				T	X	78	664	box be	low will not	t change
Foreign country name Foreign province/state/county Foreign postal of						eign postal code	your tax or refund. You Spou				
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	•	•							
								fore leaven.	1057		lind
		Were born before January 2, 1	957	_	ouse			fore January 2		∐ Is bl	
Dependent				(2) Social securi number	ty	(3) Relationsh to you	nip	(4) ✓ if q Child tax c		or (see instru	uctions): ther dependents
If more than four	(1)	irst name Last name		, , , ,		10 you			realt	Credit for ot	
dependents,											
see instruction	s —										
and check here ►											
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1	<u> </u>	83,711.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		. 2b		64.
Sch. B if required.	3a	Qualified dividends	3a		b Ordinary dividends		nds		. 3b	,	
required.	4a	IRA distributions	4a		b Taxable amount				. 4k		
	5a	Pensions and annuities	5a		b T	axable amoun	t.		. 5k		
Standard	6a	Social security benefits	6a	b Taxable amount					. 6k		
Deduction for—	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7		
 Single or 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	ome				▶ 11	1	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	С	12,850.
If you checked	13	Qualified business income deduct	tion fro	m Form 8995 or Forr	n 899	95-A			. 13	3	
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 🗌 8814	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,	enter -0				22	9,482.
	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	9,482.
	25	Federal income tax withheld from:						
	а	Form(s) W-2			25a 10	,623.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	10,623.
	26	2021 estimated tax payments and amount a					26	· · · · · · · · · · · · · · · · · · ·
If you have a Lagrangian qualifying child,	27a	Earned income credit (EIC)		^{No} .	27a			
attach Sch. EIC.		Check here if you were born after Janu						
		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		0 1 1 1 22 2				
	28	Refundable child tax credit or additional child to			28		-	
	29	American opportunity credit from Form 8863			29	222	-	
	30	Recovery rebate credit. See instructions .			30	333.	-	
	31	Amount from Schedule 3, line 15			31			222
	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.
Di	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 Account number 2 5 7 9 2 5 2		► c Type: 🔀	Checking	Savings		
	► d			d tax ▶				
A	36	Amount of line 34 you want applied to your			36		07	
Amount You Owe	37 38	Amount you owe. Subtract line 33 from line			1 1	. ▶	37	
		Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to disc tructions				omplete b	elow	⋉ No
Designee		signee's	Phone			onal identif		
		ne ►	no. ►			ber (PIN)		
Sign		der penalties of perjury, I declare that I have examine ef, they are true, correct, and complete. Declaration of						
Here	You	ur signature	Date	Your occupation		1		nt you an Identity
	k	Vasavi Samala 04	1/13/2022	00 EELT	NG THEED		ction Pl nst.) ▶	N, enter it here
Joint return? See instructions.	Sn/	puse's signature. If a joint return, both must sign.	Date	SOFTWARE E		`		nt your spouse an
Keep a copy for	Зро	buse's signature. If a joint return, both must sign.	Date	Spouse's occupation	JII			ection PIN, enter it here
your records.						(see i	nst.) ►	
	Pho	one no. (937) 750-9479	Email address	VASAVI.SAMA	LA@GMAIL.CO	MC		
Paid	Pre	parer's name Preparer's signat	ure		Date	PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	04/14/2022	P02082	2703	Self-employed
Preparer	Firr						e no. (678)965-9522
Use Only	Firr	n's address ▶ 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	3	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, truschedule 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 1040-NR, line 8	040, 1040-SH, or	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								7-87-		
Part	Income or Loss	From Rental Real Estate and Roy	yaltie	s Note:	If you a	re in th	e business o	f renti	ng perso	nal pro	perty, use
	Schedule C. See i	instructions. If you are an individual, repo	ort far	m rental in	come o	r loss fr	om Form 48	335 or	page 2,	line 40	
A Die	d you make any paymer	nts in 2021 that would require you to	file F	orm(s) 10	99? Se	e instr	uctions .			□ Y	es 🛛 No
		ou file required Form(s) 1099?		. ,							
1a	Physical address of e	each property (street, city, state, ZIP	code	e)							
Α		Medchal District Telanga			401						
В											
С											
1b	Type of Property	2 For each rental real estate prop	erty I	isted		Fair	Rental	Per	sonal U	se	QJV
	(from list below)	above, report the number of fai	r rent	al and			ays		Days		QJV
Α	personal use days. Check the QJV box only if you meet the requirements to file as a 365								0		
В	7 (10) 11 1 1 1 1										
С					С						
Туре	of Property:				'					'	
1 Sing	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd	7	Self-	Rental				
2 Mul	ti-Family Residence		6 Ro	yalties	8	Othe	r (describe))			
Incon	ne:	Properties:			Α		В	3			С
3			3		6	505.					
4			4								
Exper											
5	•		5								
6	•	nstructions)	6								
7		nance	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								
14	•		14			920.					
15			15		1,9	920.					
16			16								
17			17		2,1	L00.					
18		e or depletion	18								
19	Other (list)	English Edward AO	19		0 1	100					
20	· ·	lines 5 through 19	20		9,1	L20.					
21		line 3 (rents) and/or 4 (royalties). If									
		instructions to find out if you must	04		_0 =	515					
00	file Form 6198	and the land of the Police of	21		-8,5	117.					
22		estate loss after limitation, if any,	22	,	0 5	15 \	(\(١
220	on Form 8582 (see in:	structions) eported on line 3 for all rental prope	22	ľ		15.)	\	E	05.)
23a		eported on line 3 for all rental prope eported on line 4 for all royalty prope				23a 23b		О	00.		
b		eported on line 4 for all royalty prope eported on line 12 for all properties				23b					
Ç		eported on line 12 for all properties eported on line 18 for all properties				23d					
d e		eported on line 20 for all properties				23a		9,1	20		
24		e amounts shown on line 21. Do no t	incl			236		<i>⊃,</i> ⊥.	24 24		
2 4 25	•	sses from line 21 and rental real estate		,		ter tota	 al losses her	٠ _	25 (8,515.)
									25 (0,010.)
26		ate and royalty income or (loss). (V, and line 40 on page 2 do not a									
		10), line 5. Otherwise, include this an							26		-8,515.

NPA