

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) ▶

Taxpayer's name SUPREETHA GUBBALA	Social security number 025-84-4866
Spouse's name	Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2021 (Enter 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	1	71,258.
2 Total tax	2	8,602.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	8,719.
4 Amount you want refunded to you	4	117.
5 Amount you owe	5	

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

Under penalties of perjury, 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

I authorize GLOBAL TAXES LLC to enter or generate my PIN

4	4	8	6	6
---	---	---	---	---

 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 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 ▶ *Supreetha Gubbala* Date ▶ 04/12/2022

Spouse's PIN: check one box only

I authorize _____ to enter or generate my PIN

--	--	--	--	--

 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 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 PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

5	8	7	2	7	8	6	1	9	8	9
---	---	---	---	---	---	---	---	---	---	---

 Don't enter all zeros

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 Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So**

Filing Status Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW)
 Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

Your first name and middle initial SUPREETHA	Last name GUBBALA	Your social security number 025-84-4866
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. 2603 SCHELL PLACE NE		Apt. no.	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. ALBUQUERQUE	State NM	ZIP code 87106	
Foreign country name	Foreign province/state/county	Foreign postal code	

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? Yes No

Standard Deduction **Someone can claim:** You as a dependent Your spouse as a dependent
 Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: Were born before January 2, 1957 Are blind **Spouse:** Was born before January 2, 1957 Is blind

	(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see instructions):	Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	1 Wages, salaries, tips, etc. Attach Form(s) W-2			1	71,258.
Attach Sch. B if required.	2a Tax-exempt interest	2a	b Taxable interest	2b	
	3a Qualified dividends	3a	b Ordinary dividends	3b	
	4a IRA distributions	4a	b Taxable amount	4b	
	5a Pensions and annuities	5a	b Taxable amount	5b	
	6a Social security benefits	6a	b Taxable amount	6b	
	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>			7	
	8 Other income from Schedule 1, line 10			8	0.
	9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ▶			9	71,258.
	10 Adjustments to income from Schedule 1, line 26			10	
	11 Subtract line 10 from line 9. This is your adjusted gross income ▶			11	71,258.
Standard Deduction for— • Single or Married filing separately, \$12,550 • Married filing jointly or Qualifying widow(er), \$25,100 • Head of household, \$18,800 • If you checked any box under Standard Deduction , see instructions.	12a Standard deduction or itemized deductions (from Schedule A)	12a	12,550.		
	b Charitable contributions if you take the standard deduction (see instructions)	12b	300.		
	c Add lines 12a and 12b			12c	12,850.
	13 Qualified business income deduction from Form 8995 or Form 8995-A			13	
	14 Add lines 12c and 13			14	12,850.
	15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-			15	58,408.

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	8,602.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	8,602.
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	8,602.
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	8,602.
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	8,719.
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	8,719.
26	2021 estimated tax payments and amount applied from 2020 return	26	
27a	Earned income credit (EIC) No 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 <input type="checkbox"/>	27a	
b	Nontaxable combat pay election	27b	
c	Prior year (2019) earned income	27c	
28	Refundable child tax credit or additional child tax credit from Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Recovery rebate credit. See instructions	30	
31	Amount from Schedule 3, line 15	31	
32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32	
33	Add lines 25d, 26, and 32. These are your total payments	33	8,719.
Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	117.
	35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	117.
Direct deposit? See instructions.	b Routing number 0 1 1 0 0 0 1 3 8 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d Account number 0 0 4 6 2 3 8 3 7 7 2 4		
	36 Amount of line 34 you want applied to your 2022 estimated tax	36	
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)	38	

If you have a qualifying child, attach Sch. EIC.

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation DOCTOR	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. (508) 982-9764 Email address SUPREETHAG@GMAIL.COM

Paid Preparer Use Only

Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM	Preparer's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM	Date 04/12/2022	PTIN P02082703	Check if: <input type="checkbox"/> Self-employed
Firm's name GLOBAL TAXES LLC	Firm's address 2530 Pebble Creek Ln Cumming GA 30041		Phone no. (678) 965-9522	Firm's EIN 30-1017196

DO NOT MAIL

PIT-8453
07/16/2020New Mexico Taxation and Revenue Department
**INDIVIDUAL INCOME TAX DECLARATION FOR
ELECTRONIC FILING AND TRANSMITTAL**

REV 03/29/22 PRO

First Name, Middle Initial, and Last Name SUPREETHA GUBBALA	Social Security Number (SSN) 025-84-4866	<input checked="" type="checkbox"/> Residency Status
Spouse First Name, Middle Initial, and Last Name	Social Security Number (SSN)	<input type="checkbox"/> Residency Status
Mailing Address, City, State, and Zip Code 2603 SCHELL PLACE NE ALBUQUERQUE NM 87106		
TAX YEAR (CCYY): <u>2021</u>		
FILING STATUS (Check One)		
<input checked="" type="checkbox"/> (1.) Single	<input type="checkbox"/> (4.) Head of household (Enter name of person who qualifies you as head of household if that person is not counted as a qualified exemption on your federal return.) _____	
<input type="checkbox"/> (2.) Married filing jointly	<input type="checkbox"/> (5.) Qualifying widow(er)	
<input type="checkbox"/> (3.) Married filing separately (Enter spouse's name and social security number.)		

PART I: TAX RETURN INFORMATION (Whole Dollar Amounts Only)

1. Federal Adjusted Gross Income (as reported on PIT-1)	1.	71,258
2. Net New Mexico Income Tax (as reported on PIT-1).....	2.	2,599
3. Total Payments and Credits (as reported on PIT-1)	3.	2,905
4. Tax Due (as reported on PIT-1).....	4.	
5. Overpayment (as reported on PIT-1)	5.	306

PART II: DECLARATION OF TAXPAYER

I declare the amounts described in Part I above agree with the amounts shown on the corresponding lines of my New Mexico personal income tax return, and that I have examined the contents of my electronic return and accompanying schedules and statements. To the best of my knowledge and belief, my return is true, correct, and complete. I consent that my return, including accompanying schedules and statements, be electronically transmitted to the New Mexico Taxation and Revenue Department.

PLEASE
SIGN
HERE

Your signature

Date

Spouse's signature (If joint return, BOTH MUST sign.)

PART III: DECLARATION OF PREPARER/TRANSMITTER (If Applicable)**PAID PREPARER'S, ELECTRONIC RETURN ORIGINATOR'S or OTHER THIRD-PARTY TRANSMITTER'S USE ONLY**

I declare the above taxpayer's return is based on all pertinent information of which I have knowledge. I have verified that the taxpayer's name shown on this declaration agrees with the name that appears on the proof of account. A copy of all forms and information to be filed with or transmitted to the New Mexico Taxation and Revenue Department have been provided to the taxpayer.

Preparer's/Transmitter's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM		Date 04/12/2022
Check if self-employed <input type="checkbox"/>	Preparer's PTIN P02082703	Preparer's NMBTIN (if applicable)
Firm's name (or yours, if self-employed) GLOBAL TAXES LLC		
Address (number, street, city, and state) 2530 PEBBLE CREEK LN CUMMING		ZIP code GA 30041

When required to submit a copy of this form to the Department, mail the form and attachments to:
New Mexico Taxation and Revenue Department, P.O. Box 5418, Santa Fe, NM 87502-5418

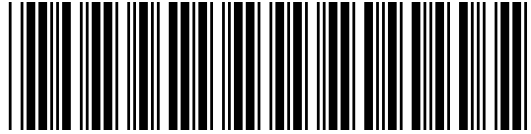
NOTE: The Taxpayer is required to retain Form PIT-8453 and all supporting documents for ten years; ERO is required to retain them for three years.

2021 PIT-1 NEW MEXICO PERSONAL INCOME TAX RETURN

For the year January 1 - December 31, 2021

or fiscal year beginning F₁ _____ ending F₂ _____

If amending use Form 2021 PIT-X.



1555 02 1

1a Print your name (first, middle, last)
SUPREETHA GUBBALA

2a Print your spouse's name (first, middle, last). If married filing separately, include spouse.

3a If the address is new or changed, mark this box.

3b Mailing Address (Number and street)
2603 SCHELL PLACE NE

3c City State Postal/ZIP Code
ALBUQUERQUE NM 87106

3d If foreign address, enter country Foreign province and/or state

5 **1** EXEMPTIONS: Taxpayer, spouse, dependents, and other dependents reported on federal Form 1040. If you are a dependent or other dependent of another taxpayer, enter 00. (See instructions)

6a EXTENSION OF TIME TO FILE: If you have a federal or state extension, mark box 6a and enter the extension date in box 6b. 6b _____

8. DEPENDENTS AND OTHER DEPENDENTS. As listed on your federal return.
(You must report the first 5 dependents and other dependents in this table. Use Schedule PIT-S for additional entries.)

First name	Column 1 Last name	Column 2 Dependent's SSN	Column 3 Date of birth (MM/DD/CCYY)

SOCIAL SECURITY NUMBER 1b **025-84-4866** 1c Blind 1d Age 65 or over 1e **R** Residency status 1f **10/19/1990** Taxpayer's date of birth

2b _____ 2c Blind 2d Age 65 or over 2e _____ 2f _____ Spouse's date of birth

4. If a deceased taxpayer's refund must be made payable to a person other than the taxpayer or spouse named on this return, enter below the name and social security number of that person. You must also attach Form RPD-41083. 4a Name _____ 4b SSN _____

If taxpayer or spouse died before this return is filed, enter date of death. 4c Taxpayer's date of death _____ 4d Spouse's date of death _____

Residency status:
For taxpayer and spouse (1e and 2e), enter:
R if Resident
N if Non-Resident
F if First-Year Resident
P if Part-Year Resident

7. FILING STATUS. Mark only one box.

(1) Single

(2) Married filing jointly

(3) Married filing separately (Enter spouse's name and social security number in 2a and 2b.)

(4) Head of household (Enter name of person qualifying you as head of household if that person is not counted as a qualified dependent on your federal return.)

(4a) _____

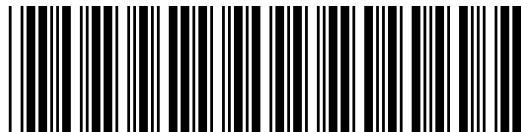
(5) Qualifying widow(er) with dependent child

9. FEDERAL ADJUSTED GROSS INCOME. (from federal Form 1040 or 1040SR, line 11).....	9	71,258
10. If you itemized your federal deduction amount, enter the amount of state and local tax deduction claimed on federal Form 1040, Schedule A, line 5a. See the worksheet in the instructions.....	+	10
11. Total Additions to federal adjusted gross income (PIT-ADJ, line 5). Attach PIT-ADJ	+	11
12. Federal standard or itemized deduction amount (from federal Form 1040, line 12).....	-	12 12,550
12a. If you itemized , mark the box.....	12a	<input type="checkbox"/>
13. Deduction for certain dependents. See the worksheet in the instructions	-	13 0
14. New Mexico low- and middle-income tax exemption. See PIT-1 instructions.....	-	14
15. Total Deductions and Exemptions from federal income (PIT-ADJ, line 23). Attach PIT-ADJ	-	15
16. Medical care expense deduction. See PIT-1 instructions.....	-	16
You must complete both lines 16 and 16a or the deduction will be denied.		
16a. Unreimbursed and uncompensated medical care expenses.....	16a	_____
17. NEW MEXICO TAXABLE INCOME. Add lines 9, 10 and 11, then subtract lines 12, 13, 14, 15 and 16..... Cannot be less than zero.	=	17 58,708
18. New Mexico tax on amount on line 17 or from PIT-B, line 14.....		18 2,599
18a. From Tax Rate Table = R. From PIT-B, line 14 = B.	18a	R
19. Additional amount for tax on lump-sum distributions. See PIT-1 instructions.....	+	19
20. Credit for taxes paid to another state. You must have been a New Mexico resident during all or part of the year. Include a copy of other state's return. See PIT-1 instructions.....	-	20
21. Business-related income tax credits applied, from Schedule PIT-CR, line A. Attach PIT-CR	-	21
22. NET NEW MEXICO INCOME TAX. Add lines 18 and 19, then subtract lines 20 and 21. Cannot be less than zero.....	=	22 2,599

Electronic filers: If you file your New Mexico Personal Income Tax return online and also pay tax due online, your due date is **May 02, 2022**. All others must file by **April 18, 2022**. See PIT-1 instructions for details.

Continue on the next page.

2021 PIT-1 (page 2)
NEW MEXICO PERSONAL INCOME TAX RETURN



1
YOUR SOCIAL SECURITY NUMBER

025-84-4866

Do not submit a **photocopy** of this form to the Department. Submit only original forms and keep a copy for your records. If submitting this return by mail, send to:

New Mexico Taxation and Revenue Department
 P. O. Box 25122
 Santa Fe, New Mexico 87504-5122

23. The amount on line 22 from page 1.....	23	2,599
24. Total claimed on rebate and credit schedule (PIT-RC, line 25). Attach PIT-RC	24	
25. Working families tax credit. (You must complete both lines 25 and 25a or the deduction will be denied.).....	25	
25a. The amount of federal earned income credit (EIC) reported on your 2021 federal income tax return.....	25a	
26. Refundable business-related income tax credits from Schedule PIT-CR, line B. Attach PIT-CR	26	
27. New Mexico income tax withheld. Attach annual statements of income and withholding	27	2,905
28. New Mexico income tax withheld from oil and gas proceeds. Attach 1099-Misc or RPD-41285	28	
29. New Mexico income tax withheld from a pass-through entity. Attach 1099-Misc or RPD-41359	29	
30. 2021 estimated income tax payments. See PIT-1 instructions.....	30	
31. Other Payments.....	31	
32. TOTAL PAYMENTS AND CREDITS. Add lines 24 through 31.....	32	2,905
33. TAX DUE. If line 23 is greater than line 32, enter the difference here.....	33	
34. Penalty on underpayment of estimated tax. If you want penalty computed for you, leave blank.....	34	
35. Special method allowed for calculation of underpayment of estimated tax penalty. If you owe penalty on underpayment of estimated tax and you qualify, enter 1, 2, 3, 4, or 5 in the box. Attach RPD-41272	35	
36. Penalty. See PIT-1 instructions. If you want penalty computed for you, leave blank.....	36	
37. Interest. See PIT-1 instructions. If you want interest computed for you, leave blank.....	37	
38. TAX, PENALTY, AND INTEREST DUE. Add lines 33, 34, 36, and 37.....	38	
39. OVERPAYMENT. If line 23 is less than line 32, enter the difference here.....	39	306
40. Refund voluntary contributions (PIT-D, line 19). Attach PIT-D	40	
41. Amount from line 39 you want applied to your 2022 Estimated Tax	41	
42. AMOUNT TO BE REFUNDED TO YOU. Line 39 minus lines 40 and 41.....	42	306

!! REFUND EXPRESS !! HAVE IT DIRECTLY DEPOSITED! SEE INSTRUCTIONS AND COMPLETE ALL QUESTIONS IN THIS BLOCK.

RE.1 Routing number: **011000138**

RE.2 Account number: **004623837724**

RE.3 Type: Choose one.
 Checking Mark X by your choice.
 Savings

RE.4 YES NO

REQUIRED: You must answer this question. WILL THIS REFUND GO TO OR THROUGH AN ACCOUNT LOCATED OUTSIDE THE UNITED STATES? If yes, you may not use this refund delivery option. See instructions.

I declare I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete.

Your signature	Date
Driver's License, State ID No. or enter "NONE" or "DECLINED"	State Expiration Date
517459038	NM 08/04/2028
Spouse's signature	Date
Spouse's Driver's License, State ID No. or enter "NONE" or "DECLINED"	State Expiration Date

(If filing jointly, BOTH must sign even if only one had income.)

Taxpayer's phone number **(508) 982-9764**

Taxpayer's email address **SUPREETHAG@GMAIL.COM**

Paid preparer's use only:

SYAM PRIYA RAM SAGAR GUPTA T **04/12/2022**
 Signature of preparer Date

GLOBAL TAXES LLC

P.1 Firm's name (or yours, if self-employed)

P.2 NMBTIN

P.3 Preparer's PTIN **P02082703**

P.4 FEIN **30-1017196**

P.5 Preparer's phone number **(678) 965-9522**

P.6 Mark this box if Form RPD-41338 is on file for this taxpayer. See PIT-1 instructions.