# 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 security	Social security number				
U ROSHNI VENUGOPAL 134-55-5924						
Spouse's name	al securi	ty number				
VENKATACHALAM RAMAN	979-97-	-9219				
Part I Tax Return Information — Tax Year Ending December 31, 2021 (En	nter year you ar	re auth	orizing.	)		
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		,168.		
<b>2</b> Total tax		2	5	,431.		
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	10	<u>,661.</u>		
4 Amount you want refunded to you		4	5	<u>,230.</u>		
5 Amount you owe		5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	nd keep a copy	of yo	ur retu	rn)		
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I a return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trait to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminal payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent.	nsmitter, or electron rejection of the transe U.S. Treasury are indicated in the tallitution to debit the inate the authorizate requests must be the processing of the payment. I furtile	nic returnic returnic returnic returnic returnic returnic returnic receive the electors receive recking recking recking recking returnic r	n originated on, <b>(b)</b> the signated ration softhis accorevoke (cd no late thronic particular)	for (ERO) e reason Financial tware for unt. This cancel) a er than 2 yment of that the		
Taxpayer's PIN: check one box only						
▼ I authorize GLOBAL TAXES LLC to enter or general authorize GLOBAL TAXES LLC	ate my PIN	5 9	2 4	as my		
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	er five dig		as my		
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.						
Your signature ► Date I	<b>-</b>					
Spouse's PIN: check one box only						
★ I authorize GLOBAL TAXES LLC to enter or general authorize GLOBAL TAXES LLC	ate my PIN 7	9 2	1 9	ac my		
ERO firm name		er five di		as my		
signature on the income tax return (original or amended) I am now authorizing.		't enter a				
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.						
Spouse's signature ▶ Date ▶	•					
Practitioner PIN Method Returns Only—continue be	low					
Part III Certification and Authentication — Practitioner PIN 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  Don't ente	8 6 3 er all zero	1 9 8 os	9		
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am some requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers	ubmitting this retu	rn in acc	cordance			
ERO's signature ▶ Date I	•					
FRO Must Retain This Form — See Instructions						

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

E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

Filing Status Check only one box.	If yo	Single X Married filing jointly unchecked the MFS box, enter the notion is a child but not your dependent	ame of	ried filing separately	` '			, ,	_	, ,	` , ` ,
Your first name and middle initial			Last name						Your social security number		
FNU			ROS	HNI VENUGOPA	L				134-55-5924		
If joint return, s	pouse's	first name and middle initial	Last n	ame					Spouse's social security number		
VENKATA	CHALZ	MA	RAM	AN					979-97-9219		
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.			A	ot. no.	Preside	ntial Election	on Campaign
9809 N I	MACAI	RTHUR					4	06		nere if you,	
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete spaces below. State Z				ZIP cod	le	spouse if filing jointly, want \$3 to go to this fund. Checking a		
IRVING			TX			75063		box below will not change			
Foreign country	/ name		Foreign province/state/county Foreign province/state/county			Foreigr	Foreign postal code		7		
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of a	ny fina	ancial interest	in any v	rirtual curre	ncy?	Yes	⊠ No
Standard Deduction		eone can claim:									
Age/Blindness	You:	Were born before January 2, 1	957	Are blind Sp	ouse	: Was bo	rn befo	e January 2	2, 1957	☐ Is bl	ind
Dependents	s (see	instructions):		(2) Social securi	ty	(3) Relationsh	hip	<b>(4)  ✓</b> if qı	ualifies fo	r (see instru	ctions):
If more	<b>(1)</b> Fi	irst name Last name	number to you			Child tax cr	redit	Credit for ot	her dependents		
than four											
dependents, see instructions											
and check											
here ▶ 🗌											
	_1_	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1		32,048.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	st .		. 2b		
Sch. B if required.	3a	Qualified dividends	3a		<b>b</b> (	Ordinary divide	ends .		. 3b		
required.	4a	IRA distributions	4a		b T	axable amoun	nt		. 4b		
	5a	Pensions and annuities	5a		b T	axable amoun	nt		. 5b		
Standard	6a	Social security benefits	6a		b T	axable amoun	nt		. 6b		
Deduction for—	7	apital 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	e 10						. 8		-7,880.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	dd lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								74,168.
Married filing	10	Adjustments to income from Schedule 1, line 26						. 10			
jointly or Qualifying	11	Subtract line 10 from line 9. This is	Subtract line 10 from line 9. This is your <b>adjusted gross income</b>						▶ 11		74,168.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedul	e A)	12	la l	25,100	o. 📉		
Head of	b	Charitable contributions if you take	the sta	andard deduction (se	e inst	ructions) 12	!b	500	o. 📗		
household, \$18,800	С	Add lines 12a and 12b							. 120		25,600.
If you checked	13	Qualified business income deducti	on from	m Form 8995 or Fori	n 899	95-A			. 13		
any box under Standard	14	Add lines 12c and 13							. 14		25,600.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less	, ente	er -0			. 15	4	48,568.

	16	Tax (see instructions). Check if any from Form	n(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			16	5,431.
	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	5,431.
	19	Nonrefundable child tax credit or credit for c	other depender	nts 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	5,431.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21				23	0.
	24	Add lines 22 and 23. This is your total tax						24	5,431.
	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a	10,6	561.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	10,661.
16	26	2021 estimated tax payments and amount a	applied from 20	20 return				26	
If you have a lqualifying child,	27a	Earned income credit (EIC)			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	1 1	structions ► ∐					
	b	Nontaxable combat pay election			-				
	С	Prior year (2019) earned income		<u> </u>					
	28	Refundable child tax credit or additional child			28			.	
	29	American opportunity credit from Form 8863	•		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						32	10 661
	33	Add lines 25d, 26, and 32. These are your to					. •	33	10,661.
Refund	34	If line 33 is more than line 24, subtract line 2			-	=		34	5,230.
5	35a	Amount of line 34 you want <b>refunded to yo</b>					_	35a	5,230.
Direct deposit? See instructions.	▶b	Routing number       1       1       1       0       0       0       0       2       5       ▶ c Type: X Checking Savings         Account number       4       8       8       0       8       8       7       7       8       8       3       7       Image: Type: X Checking Savings							
	►d								
	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	ructions		37	
	38	Estimated tax penalty (see instructions) .			38				
Third Party		you want to allow another person to dis- ructions			. r	Yes. Com	nloto h	olow	X No
Designee		ignee's	Phone		. • [	Persona	•		INO
		ne <b>&gt;</b>	no.			number			
Sign	Und	er penalties of perjury, I declare that I have examine	ed this return and	d accompanying sch	edules a	and statements	and to	the bes	t of my knowledge and
Here	bel	ef, they are true, correct, and complete. Declaration	of preparer (other	r than taxpayer) is ba	ased on a	all information of	of which	prepare	er has any knowledge.
TICIC	You	r signature	Date	Your occupation					nt you an Identity
	<b>N</b>			7 DDI T (7 MT (NI	DEVE		1	ction Pl nst.) ▶	N, enter it here
Joint return? See instructions.	Sn	use's signature. If a joint return, <b>both</b> must sign.	THI DICHTION DOVEDOLDR(II)				,		t vour spouse an
Keep a copy for	Spi	use's signature. If a joint return, <b>both</b> must sign.						ection PIN, enter it here	
your records.				HOME MAKER	3.		(see i	nst.) ►	
	Pho	ne no. (817)513-6344	Email address	ROSHNI.VENU	GOPAL	@IBM.COM			
Deid	Pre	parer's name Preparer's signa	ture		Date		TIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/1	.5/2022 P	02082	703	Self-employed
Preparer	Firr	n's name ► GLOBAL TAXES LLC					Phon	e no. (	678)965-9522
Use Only	Firr	n's address ▶ 2530 Pebble Creek I	In Cumming	g GA 30041			Firm's	s EIN 🕨	30-1017196
Go to www.irs.go		1040 for instructions and the latest information.		BAA	REV 02	/05/22 PRO			Form <b>1040</b> (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

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

FNU ROSHNI VENUGOPAL & VENKATACHALAM RAMAN

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No. 01 Your social security number

134-55-5924

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxe	S	1	
<b>2</b> a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)	<b>-</b>		
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, tr Schedule E	•	5	-7,880.
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 k	Stock options	8j 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 1 1040-NR, line 8		10	-7,880.

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	3903	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)	•		
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	<b>24</b> g		
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	<b>24</b> 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 <b>adjustments</b> 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

Department of the Treasury Internal Revenue Service (99)

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

Sequence No. 13

OMB No. 1545-0074

Your social security number Name(s) shown on return 134-55-5924 FNU ROSHNI VENUGOPAL & VENKATACHALAM RAMAN Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions . . . . . Physical address of each property (street, city, state, ZIP code) Α SORAHUNASE VLG RD VARTHUR BANGALORE IN 560087 В C Personal Use 1b Fair Rental Type of Property For each rental real estate property listed QJV 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 **Days Days** (from list below) 344 Α Α 0 qualified joint venture. See instructions. В В С С Type of Property: Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: **Properties:** Α 3 Rents received . 520. 3 4 Royalties received . . . . 4 Expenses: Advertising . . . . . . 5 5 80. 6 Auto and travel (see instructions) . . . 6 220. Cleaning and maintenance . . . 7 7 600. 8 8 Commissions. . . . . . 9 9 Insurance . . . . . . . . . . 10 Legal and other professional fees . . . 10 11 11 900. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. . . . . . . . . 14 Repairs. . . . . . . . 14 2,600. 15 2,200. 15 Supplies . Taxes . . . . . 16 16 17 17 1,800. 18 Depreciation expense or depletion . . . 18 19 19 Total expenses. Add lines 5 through 19 . . . . . 20 20 8,400. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 . . . . . . . . . . . . . . . . . 21 -7,880. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . 7,880.) 520 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b 23c **c** Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 8,400. Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 7,880. 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 -7,880.

NPA