Form <b>8879</b>
(Rev. January 2021)
Department of the Treasury Internal Revenue Service

### **IRS** e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

	er's name SHI DONTHINENI SHI DONTHINENI		
Spouse			number
Part	I Tax Return Information – Tax Year Ending December 31, 2021 (Enter year you are	e author	izing.)
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	90,674.
2		2	12,870.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	14,635.
4	Amount you want refunded to you	4	1,765.
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	k
------------	------	-------	-----	-----	------	---

I authorize GLOBAL TAXES LLC     ERO firm name     signature on the income tax return (original or amended) I a	to enter or generate my PIN am now authorizing.	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax retur if you are entering your own PIN and your return is filed us below.		horizing. Check this box only
Your signature	Date ►	
Spouse's PIN: check one box only		
I authorize <u>ERO firm name</u> signature on the income tax return (original or amended) I a	to enter or generate my PIN am now authorizing.	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax return if you are entering your own PIN <b>and</b> your return is filed us below.		
Spouse's signature ►	Date ►	
Practitioner PIN Method Ret	-	
Part III Certification and Authentication – Practitioner	r PIN Method Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-dig	,	7 8 6 1 9 8 9 n't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for tauthorized to file for tax year indicated above for the taxpayer(s) indicated requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for A	l above. I confirm that I am submitting th	is return in accordance with the
ERO's signature	Date ►	
ERO Must Retain This Fo Don't Submit This Form to the IF		
For Paperwork Reduction Act Notice, see your tax return instructions.	<b>ΒΔΔ</b> REV 01/17/22 PRO	Form <b>8879</b> (Rev. 01-2021)

aperwork Reduction Act Notice, see your tax return instructions. BAA

<b>1040</b>		rtment of the Treasury—Interna S. Individual Inc			(99) J <b>rn</b>	202	21	OMB No. 1545	-0074	IRS Use Only	—Do not w	rite or staple	e in this space.
Filing Status Check only one box.	lf yo	Single D Married filing u checked the MFS box on is a child but not you	enter the na	me of y	-			Head of ked the HOH o					
Your first name	and mi	ddle initial		Last nar	ne						Your so	cial securi	ity number
SHASHI			_	DONT	HINEN	I					791-	57-945	j2
lf joint return, s	pouse's	first name and middle initia	il	Last nar	me						Spouse'	s social se	ecurity number
Home address	(numbe	r and street). If you have a l	P.O. box, see in	nstructio	ons.				A	pt. no.	Preside	ntial Electi	ion Campaign
744 W ST	VANZI	EY RD							3	302		nere if you	
City, town, or p	ost offic	ce. If you have a foreign add	dress, also con	nplete sp	baces bel	ow.	Stat	te	ZIP co	de			ntly, want \$3 . Checking a
SWANZEY							NF	ł	034	46		ow will not	•
Foreign country	/ name			F	oreign pr	ovince/state	e/count	ty	Foreig	n postal code	your tax	k or refund	1.
												You	Spouse
At any time du	ring 20	21, did you receive, sell	, exchange, o	or othe		•	,		n any	virtual curre	ncy?	<b>Yes</b>	X No
Standard Deduction		eone can claim: 🗌 ` Spouse itemizes on a se	You as a dep					a dependent					
Deddotton			Jarale return	or you	wereat	Juai-Statu	alleri						
Age/Blindness	You:	Were born before	lanuary 2, 19	57	Are bli	nd S	ouse	: 🗌 Was bor	n befo	ore January 2	2, 1957	ls b	olind
Dependent					<b>(2)</b> S	ocial securi number	ty	(3) Relationsh to you	iip			r (see instru	
If more	(1) Fi	rst name Last r	name			number		to you		Child tax c	redit	Credit for o	ther dependents
than four dependents,													<u> </u>
see instruction	s ——												
and check													
here 🕨 🔄												1	
Attach	1	Wages, salaries, tips, e	1	· · ·	V-2 .	· · ·	• •		• •		. 1		98,004.
Sch. B if	2a	Tax-exempt interest .						axable interes			. 2b		
required.	<u>3a</u>	Qualified dividends .	-					ordinary divide			. 3b		
	4a	IRA distributions	4		-			axable amoun			. 4b		
	5a	Pensions and annuities				$ \rightarrow $	1.1.1	axable amoun			. <mark>5</mark> b		
Standard Deduction for –	6a	Social security benefits					Process and a second	axable amoun	t		. <u>6b</u>		
Single or	7	Capital gain or (loss). A			requirec	I. If not red	uired,	, check here	• •	► L			2
Married filing separately,	8	Other income from Sch	-			· · ·	• •		• •		. 8	-	<u>-7,330.</u>
\$12,550	9	Add lines 1, 2b, 3b, 4b			-	ur total in	come		• •		► <u>9</u>		90,674.
<ul> <li>Married filing jointly or</li> </ul>	10	Adjustments to income				· · ·	• •		• •		. 10		
Qualifying widow(er),	11	Subtract line 10 from li						· · · ·	· ·		► <u>11</u>	_	90,674.
\$25,100	12a	Standard deduction of			`		,	12		12,55			
<ul> <li>Head of household,</li> </ul>	b	Charitable contributions	s if you take t	ne stan	dard dec	duction (se	e instr	uctions) 12	b	30			
\$18,800	c	Add lines 12a and 12b							• •		. 120		12,850.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business inco	ome deductio								. 13	-	10 050
Standard Deduction,	14	Add lines 12c and 13									. 14	_	12,850.
see instructions.	15	Taxable income. Subt	ract line 14 f	rom line	e 11. lt z	ero or less	, ente	r-U	• •		. 15		77,824.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2021)

# **DO NOT FILE**

Form 1040 (202 <sup>-</sup>	1)								Page <b>2</b>
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	12,870.
	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	12,870.
	19	Nonrefundable child tax cre	dit or credit for c	ther depender	nts from Schedule	8812		19	
	20	Amount from Schedule 3, lin	ne8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	12,870.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21		• •	23	0.
	24	Add lines 22 and 23. This is	your total tax	1 1 1			. 🕨	24	12,870.
	25	Federal income tax withheld	l from:			· ·			
	а	Form(s) W-2					,635.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction	,			25c			
	d	Add lines 25a through 25c						25d	14,635.
If you have a	26	2021 estimated tax paymen			Mo			26	
qualifying child, attach Sch. EIC. [	27a	Earned income credit (EIC)				27a			
		Check here if you were January 2, 2004, and yo taxpayers who are at least a	u satisfy all the	e other requi	rements for				
	b	Nontaxable combat pay ele	ction	. 27b					
	С	Prior year (2019) earned inc							
	28	Refundable child tax credit o	r additional child	tax credit from	Schedule 8812	28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Recovery rebate credit. See	instructions .			30			
	31	Amount from Schedule 3, lir	ne 15			31			
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments and	l refundable cree	lits 🕨	32	
	33	Add lines 25d, 26, and 32. T					. 🕨	33	14,635.
Refund	34	If line 33 is more than line 24					· <u>·</u>	34	1,765.
	35a	Amount of line 34 you want						35a	1,765.
Direct deposit? See instructions.	►b	Routing number       0       6       3       1       0       0       2       7       7       ► c Type:       X Checking       Savings         Account number       8       9       8       0       6       3       3       6       2       5       7       3       Image: Checking       Image: Checking<							
	Þα								
-	36	Amount of line 34 you want				36			
Amount	37	Amount you owe. Subtract				1 1	• 🕨	37	
You Owe	38	Estimated tax penalty (see i				38			
Third Party		you want to allow another	person to disc		rn with the IRS?		omplete k	alaw	X No
Designee		signee's		· · · · Phone			onal identi		
		ne ►		no.			ber (PIN)		
Sign Here		der penalties of perjury, I declare ief, they are true, correct, and corr				edules and stateme	nts, and to	the bes	
nere	Yo	ur signature		Date	Your occupation				nt you an Identity
	•				SOFTWARE B	NCTNEED		inst.) 🕨	N, enter it here
Joint return? See instructions. Keep a copy for your records.	Sp	ouse's signature. If a joint return,	<b>both</b> must sign.	Date	Spouse's occupat		If the	e IRS ser	t your spouse an ection PIN, enter it here
	Ph	one no. (704)759-424	3	Email address	SHASHT DONTH	INENI@GMAIL.CO			
		parer's name	Preparer's signat		SIMOIT, DONTH	Date	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM			СПЪТА ТАТ.Т.АМ		P0208	2703	Self-employed
Preparer		n's name ► GLOBAL TA			<u> </u>	91/21/2022			678)965-9522
Use Only		n's address ► 2530 Pebb		n Cummin	a GA 30041			's EIN ▶	
Go to www.irs.or		1040 for instructions and the late			BAA	REV 01/17/22 PRO			Form <b>1040</b> (2021)
2.0.10	0.11				DAA				

## **DO NOT FILE**

SCHEDULE	1
(Form 1040)	

Department of the Treasury

### Additional Income and Adjustments to Income

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

OMB No. 1545-0074

Internal Revenue Service	► Go to www.irs.gov/F
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR
SHASHI DONTHIN	ENI

Your social security	number
791-57-9452	

### Part 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)	·		
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	-7,330.
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		с
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		
Т	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		
ο	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 ►			
0		8z		
9 10	Total other income. Add lines 8a through 8z	040 1040-SP or	9	
10	1040-NR, line 8		10	-7,330.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	ule 1 (Form 1040) 2021

Par	t II Adjustments to Income			·
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis officials. Attach Form 2106	•	12	
13	Health savings account deduction. Attach Form 8889	1	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	1	17	
18	Penalty on early withdrawal of savings		18	
19a			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)			
b c	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit24bNontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l24c	IN		C C
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans 24f			
g	Contributions by certain chaplains to section 403(b) plans <b>24g</b>			
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)			
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			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1         (Form 1041) <b>24k</b>			
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 to inc</b> here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	the second se	26	

BAA

SCHEDULE	Ε
(Form 1040)	

Department of the Treasury Internal Revenue Service (99)

### **Supplemental Income and Loss**

OMB No. 1545-0074

21

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. ► Go to www.irs.gov/ScheduleE for instructions and the latest information.

20 Attachment Sequence No. 13

Name(s)	e(s) shown on return							Your social security number			
SHAS	ASHI DONTHINENI							791-57-9452			
Part	Income or Loss	s From Rental Real Estate and Ro	yalties Not	e: If you	are in th	e business c	of renting perso	onal pr	operty, use		
	Schedule C. See	instructions. If you are an individual, rep	oort farm rental	income	or loss fr	om Form 48	335 on page 2	, line 40	Э.		
A Dic	l you make any payme	nts in 2021 that would require you to	o file Form(s)	1099? S	ee instr	uctions .		<b>Y</b>	'es 🛛 No	2	
<b>B</b> If "	Yes," did you or will yo	ou file required Form(s) 1099?						<b>Y</b>	'es 🗌 No	)	
1a	Physical address of e	each property (street, city, state, ZIF	P code)								
Α	17-1-382/P/112	, PRESS CLNY CHAMPAPET HY	YDERABAD	TELAN	GANA	IN 5000	60				
В											
С		1									
1b	Type of Property (from list below)	2 For each rental real estate pro above, report the number of fa personal use days. Check the	perty listed air rental and	perty listed ir rental and		Rental Jays	Personal Use Days 0		QJV		
Α	3	personal use days. Check the if you meet the requirements to	QJV box only	Α	365						
B	5	gualified joint venture. See inst	tructions.	B							
c	 			C							
-	of Property:			U							
	le Family Residence	3 Vacation/Short-Term Rental	5 Land		7 Self-	Rental					
	ti-Family Residence	4 Commercial	6 Royalties			r (describe)	)				
Incom	,	Properties:		Α		E			С		
3	Rents received		3		620.				-		
4			4								
Expen											
5	Advertising		5								
6	Auto and travel (see instructions) 6										
7	Cleaning and mainten	7	1,	670.							
8	Commissions		8								
9	Insurance		9								
10	Legal and other profe	ssional fees	10								
11	Management fees .		11	1,	200.						
12	·	d to banks, etc. (see instructions)	12							С	
13	Other interest	13									
14	Repairs	<b>14</b> 1,540.									
15	Supplies	15	1,	670.							
16	Taxes										
17	Utilities	<b>17</b> 1,870.									
18	Depreciation expense	18									
19	Other (list)	19									
20	Total expenses. Add	<b>20</b> 7,950.									
21		line 3 (rents) and/or 4 (royalties). If									
	file <b>Form 6198</b>	instructions to find out if you must	21	-7	330.						
22		estate loss after limitation, if any,	21	11	550.						
22	on Form 8582 (see in		22 (	7 3	330.)	(				)	
23a		eported on line 3 for all rental prope		· · ·	23a	۱ <u>ــــــــــــــــــــــــــــــــــــ</u>	620.			,	
b					23b		020.				
c	Total of all amounts reported on line 4 for all royalty properties23bTotal of all amounts reported on line 12 for all properties23c										
d	Total of all amounts reported on line 18 for all properties				23d						
e		eported on line 20 for all properties			23e		7,950.				
24		e amounts shown on line 21. <b>Do no</b>					. 24				
25		sses from line 21 and rental real estate			inter tota	al losses her			7,330	. )	
26		ate and royalty income or (loss).							· · ·		
		V, and line 40 on page 2 do not									
		10), line 5. Otherwise, include this a							-7,33	0.	

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2021