Form 8879
(Rev. January 2021)
Department of the Treesury

epartment 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.

Submission Identification Number (SID)

Taxpay	Taxpayer's name Social security number					
SUN	DAR SUJASH YENUMULA	727-99-6	228			
Spouse	's name	Spouse's social	security number			
Par	Tax Return Information — Tax Year Ending December 31, 2021 (Ente	r 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 40,364.			
2	Total tax	[2 3,104.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	[3 5,048.			
4	Amount you want refunded to you		4 3,344.			
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 periury. 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

X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	
				ERO firm name		5

9	6	2	2	8	
Ent don	er fiv i't er	ve di Iter a	gits, all ze	but ros	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

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name 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 ►	Da	ate 🕨	•				 		
Practitioner PIN Method Returns Only—	continue	bel	ow						
Part III Certification and Authentication – Practitioner PIN Metho	d Only								
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selecte	ed PIN.	5	8	 	 	6 all zer	 9	8 9	Э

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 🕨	
	RO Must Retain This Form — See omit This Form to the IRS Unless		
For Denominaria Deduction Act Nation and			Earm 8879 (Bay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/17/22 PRO

104		artment of the Treasury-Internal Revenue Serv S. Individual Income Tax		(99) urn	202	21	OMB No. 1	545-0	074 IRS U	se Only	–Do not	write or staple	in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly u checked the MFS box, enter the r son is a child but not your dependen	ame of	-									low(er) (QW) he qualifying
Your first name		, ,	Last na	ame							Yours	ocial securi	ity number
SUNDAR				JMULA								-99-622	-
		s first name and middle initial	Last na										curity number
n joint roturn, e	,pouse c		Lustin								opouse	5 500101 50	
		er and street). If you have a P.O. box, see	instruct	ions.					Apt. no.	-			ion Campaign
8283 W									6-30	8	1	here if you if filing ioi	, or your ntly, want \$3
		ce. If you have a foreign address, also co	omplete s	spaces be	low.	Sta			ZIP code				Checking a
LAKEWOO						C	-		80227		1	low will not	•
Foreign countr	y name			Foreign pi	rovince/state	coun	ty	F	Foreign posta	l code	your ta	ix or refund	
At any time du	uring 20	021, did you receive, sell, exchange	or oth	nvico di	space of a	w find				ourro		☐ Yes	
			,		•	,			any virtual	cuire	ncy :		
Standard Deduction		eone can claim: L You as a de Spouse itemizes on a separate retur	•		•		a depende	ent					
Age/Blindnes		Were born before January 2, 1		Are bl		ouse		born	before Jar	uary 3	2, 1957	Is b	lind
Dependent				T	Social securi		(3) Relation				-	or (see instru	
•		irst name Last name		(2)	number	- y	to yo			d tax c			ther dependents
lf more than four													
dependents,										$\overline{\Box}$			
see instruction and check	s ——									$\overline{\Box}$			
here										$\overline{\Box}$			
	1	Wages, salaries, tips, etc. Attach I	- orm(s)	W-2 .							. 1		48,364.
Attach	2a		2a			h T	axable inte	rest			2		10,0011
Sch. B if	3a		3a				Ordinary div		 Is				
required.	√ 4a		4a				axable amo				. 4	-	
	5a		5a				axable amo				. 5	b	
Standard	6a		6a				axable amo				. 6	b	
Deduction for –	7	Capital gain or (loss). Attach Sche	dule D i	f reauire	d. If not rec					►	7	,	
 Single or Married filing 	8	Other income from Schedule 1, lin									. 8	3	-8,000.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,									▶ 9		40,364.
Married filing	10	Adjustments to income from Sche	dule 1,	line 26							. 10	0	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your a								► 1 ⁻	1	40,364.
widow(er),	12a	Standard deduction or itemized						12a		,55			
\$25,100 • Head of	b	Charitable contributions if you take		•		,	ructions)	12b		30			
household,	с	Add lines 12a and 12b			· · ·						. 12	2c	12,850.
\$18,800 If you checked	13	Qualified business income deduct	ion fron	n Form 8	995 or Fori	n 899	5-A				. 1:		
any box under Standard	14	Add lines 12c and 13									. 14		12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lir								. 1		27,514.
)												

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

Form **1040** (2021)

Form 1040 (2021)									Pa	ge 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16		3,104	ł.
	17	Amount from Schedule 2, lir	ne3					17			
	18	Add lines 16 and 17						18		3,104	ł.
	19	Nonrefundable child tax cre	dit or credit for o	ther depender	nts from Schedul	e8812		19			
	20	Amount from Schedule 3, lir	ne8					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0				22		3,104	1.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23		().
	24	Add lines 22 and 23. This is	your total tax				. 🕨	24		3,104	ł.
	25	Federal income tax withheld	l from:			1 1					
	а	Form(s) W-2				25a 5	,048.				
	b	Form(s) 1099				25b					
	С	Other forms (see instruction	,			25c					
	d	Add lines 25a through 25c						25d		5,048	3.
If you have a	26	2021 estimated tax paymen		• •	37			26			
qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC)			NO	27a					
allach Sch. ElC.		Check here if you were I									
		January 2, 2004, and you taxpayers who are at least a									
	b	Nontaxable combat pay elec	-	1 1							
	c	Prior year (2019) earned inco				-					
	28	Refundable child tax credit o			Schedule 8812	28					
	29	American opportunity credit	from Form 8863	B. line 8		29					
	30	Recovery rebate credit. See					,400.				
	31	Amount from Schedule 3, lir				31	,				
	32	Add lines 27a and 28 throug					lits 🕨	32		1,400).
	33	Add lines 25d, 26, and 32. T						33		6,448	
Defined	34	If line 33 is more than line 24						34		3,344	
Refund	35a	Amount of line 34 you want				•		35a		3,344	
Direct deposit?	►b	Routing number 1 1 1					Savings				
See instructions.	►d	Account number 4 8 8					<u>-</u>				
	36	Amount of line 34 you want				36					
Amount	37	Amount you owe. Subtract					. 🕨	37			
You Owe	38	Estimated tax penalty (see in				38					
Third Party	Do	you want to allow another									
Designee		tructions	•				omplete b	elow.	🗙 No		
U		signee's		Phone		Perso	onal identif	ication I			
	nar	me 🕨		no. 🕨		numb	ber (PIN) 🕨				
Sign		der penalties of perjury, I declare t ief, they are true, correct, and corr									
Here		· · ·	ipiete. Declaration (ye.
	YO	ur signature		Date	Your occupation				nt you an I N, enter it		
Joint return?					SOFTWARE	ENGINEER		nst.) 🕨			\square
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupa		If the	IRS ser	nt your spo	ouse an	_
Keep a copy for your records.	/								ection PIN	, enter it	here
your records.							(see i	nst.) 🕨			
		one no.		Email address	YENUMULASUNDA	RSUJASH@GMAIL.CO					
Paid		parer's name	Preparer's signat			Date	PTIN		Check if:		
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	1 03/08/2022	P02082			-employe	
Use Only		m's name ► GLOBAL TA		~ '	~~~~~				678)96		
	Firr	m's address ► 2530 Pebb	le Creek L	n Cummin	g GA 30041		Firm'	s EIN 🕨		101719	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV 02/17/22 PRO			Form	1040 (2	2021)

SCHEDULE	1
(Form 1040)	

Additional Income and Adjustments to Income

► Attach to Form 1040, 1040-SR, or 1040-NR. to to www.irs.gov/Form1040 for instructions and the latest information. OMB No. 1545-0074

Department of the Treasury	► Attach to Form 1040,					
Internal Revenue Service	► Go to www.irs.gov/Form1040 for ins					
Name(s) shown on Form 1040, 1040-SR, or 1040-NR						

	Attachment Sequence No. 01
Your soc	ial security number
727-99	-6228

SUNDAR SUJASH YENUMULA Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1		
2 a	Alimony received	2a		
b	Date of original divorce or separation agreement (see instructions) \blacktriangleright			
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, tru Schedule E		5	-8,000.
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			
		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	40, 1040-SR, or	10	-8,000.
		<u> </u>		

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 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 government officials. Attach Form 2106	12	
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		
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	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 Paralympicmedals and USOC prize money reported on line 81 24c		
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 24g		
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 violations24i		
j	Housing deduction from Form 2555 . . . 24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)		
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 to income. Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	

REV 02/17/22 PRO

SCHE	DULE	Ε
(Form	1040)	

Supplemental Income and Loss

OMB No. 1545-0074

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. he latest information.

Department of the Treasury Internal Revenue Service (99)

2021	
Attachment Sequence No.	3

						Your soci	Your social security number				
SUND	AR SUJASH YENUM	IULA						727-9	9-622	8	
Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.											
	Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions						_				
<u>1</u> a	"Yes," did you or will you file required Form(s) 1099?										
A		DNY HYDERABAD TELANGANA									
 	SRI NAGAR COLC	NI HIDERABAD IELANGANA	LIN 5	00045							
<u> </u>											
 1b	Type of Property		a la a ultra I	inte d		Fair	Rontal	Persona	معالا		
10	(from list below)	2 For each rental real estate property listed above, report the number of fair rental and Days					Days	Personal Use Days		QJV	
Α	2	personal use days. Check the if you meet the requirements	e QJV b	box only A		365	2				
B		qualified joint venture. See in	to file as a A		 B		303				
					<u>с</u>						╡──
	of Property:				<u> </u>					<u> </u>	
	le Family Residence	3 Vacation/Short-Term Renta	5 2	nd		7 Self-	Rental				
	i-Family Residence	4 Commercial		yalties			er (describe)				
Incom	,	Properties			Α		E (Uescribe)			С	
3	Rents received		3		~	500.	-	,			
4		· · · · · · · · · · · · · · ·	4			500.					
Expen											
5			5								
6		nstructions)	6								
7	•		7		1.	000.					
8			8		± /						
9			9								
10			10								
11			11			700.					
12		id to banks, etc. (see instructions)	12			/00.					
13		· · · · · · · · · · · · · ·	13								
14			14		1.	800.					
15			15			500.					
16			16								
17			17		3,	500.					
18		e or depletion	18								
19		•	19								
20	Total expenses. Add	lines 5 through 19	20		8,	500.					
21		line 3 (rents) and/or 4 (royalties). I								-	
		instructions to find out if you mus									
	file Form 6198		21		-8,	000.					
22	Deductible rental real	l estate loss after limitation, if any	',								
	on Form 8582 (see in	structions)	22	(8,0))))	()	()
23a	Total of all amounts r	eported on line 3 for all rental prop	perties			23a		500.			
b	Total of all amounts r	eported on line 4 for all royalty pro	perties			23b					
С	Total of all amounts r	eported on line 12 for all propertie	s			23c					
d	Total of all amounts r	eported on line 18 for all propertie	s			23d					
е	Total of all amounts r	eported on line 20 for all propertie									
24	Income. Add positiv	e amounts shown on line 21. Do n	ot inclu	ude any	losses			. 24			
25	Losses. Add royalty lo	sses from line 21 and rental real esta	te losse	s from lin	ne 22. E	Enter tot	al losses her	e. 25	(8,	000.)
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result										
	here. If Parts II, III, I	V, and line 40 on page 2 do no	t apply	to you	, also	enter tl	his amount	on			
	Schedule 1 (Form 104	40), line 5. Otherwise, include this	amount	t in the t	otal on	line 41	on page 2	. 26		-8	,000.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2021