## 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

Submi	ssion Identification Number (SID)		-						
Taxpaye	r's name	Social securi	Social security number						
AMAF	R REDDY ALOORI	128-83	128-83-2946						
Spouse's	s name	Spouse's soo	ial secu	rity numl	ber				
Part	Tax Return Information — Tax Year Ending December 31, 2021 (En	iter year you a	re aut	horizin	g.)				
	whole dollars only on lines 1 through 5.				<u> </u>				
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.								
1	Adjusted gross income		1	3	36,8	372.			
2	Total tax		2		2,7	20.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		5,5	63.			
4	Amount you want refunded to you		4		2,8	343.			
	Amount you owe		5						
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get an	d keep a cop	y of y	our re	turn	)			
to send for any Agent to paymer authoriz paymer busines taxes to persona	original or amended) I am now authorizing. I consent to allow my intermediate service provider, trand my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account 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 terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation is so days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processor of the payment (settlement) as a consideration of the payment (settlement) as a superior of the income tax return (original or amended) and the first transfer of the income tax return (original or amended) and the first transfer of the income tax return (original or amended) and the first transfer of the income tax return (original or amended) and the first transfer of the income tax return (original or amended) are transfer or the income tax return (original or amended).	rejection of the tre U.S. Treasury a indicated in the trution to debit the nate the authorizarequests must be the processing of the payment. I further the processing of the payment. I further the processing of the payment.	ansmised and its control to the cont	sion, (b) designate aration so this action for the control of the	the red Firesoftwa counter (care ater to paymage the	reason nancial are for t. This ncel) a than 2 nent of lat the			
	nic Funds Withdrawal Consent.  yer's PIN: check one box only				7				
X		ata mu DINI	2 9	4 6					
	Signature on the income tax return (original or amended) I am now authorizing.	En		digits, bu	t	ıs my			
	I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.	ethod. The ERC							
Your s	ignature ▶ Date ▶								
Spous	e's PIN: check one box only				7				
	I authorize to enter or general	ate my PIN			a	ıs my			
	ERO firm name		Enter five digits, but don't enter all zeros						
	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 ar if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.								
Spous	e's signature ▶ Date ▶	•							
	Practitioner PIN Method Returns Only—continue bel	ow							
Part I	Certification and Authentication — Practitioner PIN Method Only								
EDO!-	FEINI/DIN Foton coursely digit FFINI followed by your five digit cells extend DINI F	0 7 0 7	0 6	1 0	0				
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5	8 7 2 7 Don't ent	8   6   erallze	1   9   ros	8	9			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual incoming that the formula that I am suments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Pink Pink Pink Pink Pink Pink Pink Pink	ibmitting this retu	ırn in a	ccordan	ce w				
ERO's	signature ▶ Date ▶	<b>&gt;</b>							
	ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested T								

## **£1040**

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

2021

OMB No. 1545-007

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly [ ou checked the MFS box, enter the reson is a child but not your depender	name of	ed filing separately your spouse. If you	` ′	_		,	,	-	, ,	, , , ,	
Your first name and middle initial Last n				ame					Y	Your social security number			
AMAR RE	DDY		ALO	ORI					1	128-83-2946			
If joint return, spouse's first name and middle initial Last na			ame					Sı	Spouse's social security number				
Home address	uctions.				Apt. no.	Presidential Election Campaigr Check here if you, or your							
18331 ROEHAMPTON DRIVE  City, town, or post office. If you have a foreign address, also complete s  DALLAS  Foreign country name				plete spaces below. State  TX  Foreign province/state/county				ZIP code 75252		spouse if filing jointly, want \$3 to go to this fund. Checking a			
										box below will not change your tax or refund.  You Spouse			
At any time du	ıring 20	021, did you receive, sell, exchange	, or othe	erwise dispose of a	ny fina	ancial inter	est in ar	ny virtual cu	urrency	y?	Yes	⊠ No	
Standard Deduction	_	eone can claim:  You as a de Spouse itemizes on a separate retu	•			•	ent						
Age/Blindness	s You:	: Were born before January 2, 1	957	Are blind S	oouse	: Was	s born b	efore Janua	ary 2, 1	1957	☐ Is bl	lind	
Dependent							qualifies for (see instructions): credit						
If more than four	(1) F	rirst name Last name		Humber		to you		Child tax cre		IT I	Credit for ot	ner dependents	
dependents,									_				
see instruction and check	s —								_				
here ▶ □									_			<del></del>	
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					<del>.</del> .	1		<u> </u>	
Attach	2a	Tax-exempt interest	2a		b T	axable inte	erest			2b			
Sch. B if required.	3a	Qualified dividends	3a		<b>b</b> Ordinary dividends		vidends			3b			
required.	4a	IRA distributions	4a		<b>b</b> Taxable amount .					4b			
	5a	Pensions and annuities	5a		<b>b</b> Taxable amount .					5b			
Standard	6a	Social security benefits	b Taxable amount						6b				
Deduction for—	7	Capital gain or (loss). Attach Sche	). Attach Schedule D if required. If not required, check here						7				
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, line 10							8				
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>						9		36,872.			
Married filing	10	Adjustments to income from Schedule 1, line 26						10					
jointly or Qualifying	11	Subtract line 10 from line 9. This i	10 from line 9. This is your <b>adjusted gross income</b>				11		36,872.				
widow(er), \$25,100	12a	Standard deduction or itemized deductions (from Schedule A)   12a   12,550.											
Head of	b	Charitable contributions if you take the standard deduction (see instructions)											
household, \$18,800	С	Add lines 12a and 12b							12c	:	12,550.		
If you checked	13	Qualified business income deduct	tion fron	n Form 8995 or For	m 899	95-A				13			
any box under Standard	14	Add lines 12c and 13								14		12,550.	
Deduction, see instructions.	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0								15	:	24,322.	

	16	Tax (see instructions). Check if any from Form	ı(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			16	2,720.	
	17	Amount from Schedule 2, line 3						17	1	
	18	Add lines 16 and 17						18	2,720.	
	19	Nonrefundable child tax credit or credit for c	19	1						
	20	Amount from Schedule 3, line 8	20	i						
	21	Add lines 19 and 20						21	1	
	22	Subtract line 21 from line 18. If zero or less,	enter -0					22	2,720.	
	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	2,720.	
	25	Federal income tax withheld from:							1	
	а	Form(s) W-2			25a	5	,563.		1	
	b	Form(s) 1099			25b				1	
	С	Other forms (see instructions)			25c				1	
	d	Add lines 25a through 25c						25d	5,563.	
If you have a	26	2021 estimated tax payments and amount applied from 2020 return								
qualifying child,	27a	Earned income credit (EIC)								
attach Sch. EIC.		Check here if you were born after Janu							1	
		January 2, 2004, and you satisfy all the							1	
		taxpayers who are at least age 18, to claim t	1 1	structions >					1	
	b	Nontaxable combat pay election			-				1	
	С	Prior year (2019) earned income		0.1	- 00				1	
	28	Refundable child tax credit or additional child			28			-	1	
	29	American opportunity credit from Form 8863			29			-	1	
	30	Recovery rebate credit. See instructions .			30			-	1	
	31	Amount from Schedule 3, line 15			31		·	-	1	
	32	Add lines 27a and 28 through 31. These are						32	F F C 2	
	33	Add lines 25d, 26, and 32. These are your to					. ▶	33	5,563.	
Refund	34	If line 33 is more than line 24, subtract line 2	34	2,843.						
5	35a	Amount of line 34 you want refunded to you	35a	2,843.						
Direct deposit? See instructions.	►b	Routing number 0 8 1 0 0 0 0		1						
	►d	Account number 3 5 5 0 1 1 4		1						
	36	Amount of line 34 you want applied to your								
Amount	37	Amount you owe. Subtract line 33 from line			1	tructions	. ▶	37		
You Owe	38	Estimated tax penalty (see instructions) .			38					
Third Party		you want to allow another person to disc				□ <b>v</b> 0-			V Na	
Designee		instructions							<b>⋈</b> No	
		name ► no. ► Prione Personal identification number (PIN) ►								
Sign		der penalties of perjury, I declare that I have examine	ed this return and	d accompanying sch	edules a	and statemer	ts, and to	the bes	t of my knowledge and	
		ef, they are true, correct, and complete. Declaration								
Here	You								nt you an Identity	
	<b>N</b>		GOETHINE ENGINEER			I	ction Pl nst.) ▶	N, enter it here		
Joint return? See instructions.	0-		SOFTWARE ENGINEER				,	•		
Keep a copy for	Spe	buse's signature. If a joint return, <b>both</b> must sign.	Date Spouse's occupation				I		nt your spouse an ection PIN, enter it here	
your records.								nst.) 🕨		
	Pho	one no. (859)391-0822	Email address	MAIL2AMAR5	051@G	MAIL.CO	<u></u> М			
D-14	Pre	parer's name Preparer's signat			Date		PTIN		Check if:	
Paid	SYAM	SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/01/2022 P02082				P02082	2703 Self-employed			
Preparer		n's name ► GLOBAL TAXES LLC						e no. (678)965-9522		
Use Only		n's address ▶ 2530 Pebble Creek I	 n Cummin	g GA 30041				s EIN ▶ 30-1017196		
Go to www.irs.a		1040 for instructions and the latest information.		BAA	REV 01	1/24/22 PRO	1		Form <b>1040</b> (2021)	
				DAA	v 0				(=02.)	

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