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

Secrit Rame Series Anne Series Ser	Submission Identification Number (SID)	
Spouse's name Spouse's notal security number	Taxpayer's name	Social security number
Spouse's social security number	SRI RAM GADDAMEEDI	512-63-9435
Enter whole dollars only on lines 1 through 5. Note: Form 1049-SS files use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 6, 386. 4 Amount you want refunded to you 4 2, 033. 5 Amount you own 4 2, 033. 5 Amount you own 1 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) 1 Under penalities of perityr, I declare that it have examined a copy of the income tax return foriginal or amended. I am now authorizing, and to the bast of my knowledge and bellef, it is true, correct, and complete. I further declare that the amounts in Part above are the amounts form the income activation (and the processing the return or return, and (c) the date of any return. For amended) and now authorizing, consent to allow my intermediate service provider, transmitter, or electronic grant to the lifts (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or return, and (c) the date of any return. If a processing the return or return, and (c) the date of any return, delay in the U.S. Treasury intermediate and ACH electronic tunds withdrawal (circet debti) entry to the financial institution account indicated in the tax preparation software for authorization is to remain in half force and effect utill 1 notify the U.S. Treasury intermediate from the processing the return or return, and any return in the processing of the through the surface of the properties of the properties of the properties of the properties and the processing and the entry to this account it access to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the payment, I must contact the U.S. Treasury Financial Agent to the financial institutions involved in the processing and, if applicable, my Electronic Funds Withdrawal Consent. ERO firm name signature on the inc	Spouse's name	
Enter whole dollars only on lines 1 through 5. Note: Form 1049-SS files use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 6, 336. 4 Amount you want refunded to you 4 2, 033. 5 Amount you want refunded to you 5 Amount you own refunded to you 6 Amount you want refunded to you 7 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) 1 Under penalties of perlay. I declare that I have examined a copy of the income tax return forginal or amended, I am now authorizing, and to the bast of my knowledge and bellef, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts for the income tax return (original or amended). In an now authorizing, consent to allow my intermediate service provider, transmitter, or election of the transmission, 6) the reason for any dealy in processing the return or refund, and (5) the date of any refund. It applicable, I authorize the U.S. Treasury Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation of the support of the payment feetitement) date of the support of the payment feetitement date. I so authorized the financial amount of the support of the payment feetitement date. I so authorized the financial amount in the processing and in a processing the refund return return day of the support of the payment feetitement date. I so authorize the financial institutions involved in the tax preparation of the tax preparation of the processing the refundation of the processing and in the processing and it applicable, my beginning the payment, I must contact the U.S. Treasury Financial Agent to the financial articular on articular to the processing and the processing the refundation of the processing the refund	Part Tax Return Information — Tax Year Ending December 31 2021	(Enter year you are authorizing)
Note: Form 1040-SS filers use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income 2 Total tax 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 G, 336 G, 33	Enter whole dollars only on lines 1 through 5	Litter year you are authorizing.)
1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 G, 336. 4 Amount you want refunded to you 4 Q, 033. 5 Amount you own refunded to you 5 Amount you own refunded to you 6 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your refurn) 1 Under penalises of perpiry. I declare that it have examined a copy of the income tax return foliginal or amended.] 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 consent to allow my intermediate service provider, transmitter, or electronic return originator growing, 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, closes and 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 or any dealy in processing the return or refund, and (c) the date of resident at the cover on the return or refund, and (c) the date of resident at the cover of the transmission. (b) the reason or any dealy in decent at taxes over on the internal order apparent of it estimated tax, and the financial institution to debt the entry to this account for authorization in the cover of the propriet of the payment feature of the cover of the propriet of the payment features of the cover of the propriet of the payment features of the cover of the propriet of the payment features of the cover of the propriet features and the financial institutions incleaded in the tax preparation. To revoke (cancel) a business days prior to the payment features features and the financial residual to the payment. I further acknowledge that the personal identification number (Fift) below its my signature featur		
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Taxpayer's PIN: check one box only	for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution acc payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancella business days prior to the payment (settlement) date. I also authorize the financial institutions involve taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or amer	ze the U.S. Treasury and its designated Financial ount indicated in the tax preparation software for institution to debit the entry to this account. This terminate the authorization. To revoke (cancel) a tion requests must be received no later than 2 and in the processing of the electronic payment of to the payment. I further acknowledge that the
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I authorize	if you are entering your own PIN and your return is filed using the Practitioner PI	N method. The ERO must complete Part III
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Spouse's signature ► 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. 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 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. 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. 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 ► ERO Must Retain This Form — See Instructions		DIN I
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. 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		Complete the transfer of the control
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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. 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	Opodoc o digitator o	
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ERO Must Retain This Form — See Instructions	and a file for the voor indicated above for the taypaver(s) indicated above. I confirm that I a	im submitting this return in accordance with the
ERO Must Retain This Form — See Instructions	FRO's signature ▶	ate ►
Don't Submit This Form to the IRS Unless Requested To Do So		
For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/16/22 PRO Form 8879 (Rev. 01-2021)		

£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	st name and middle initial Last name			Your soc	ial securi	ty number					
SRI RAM			GADI	DAMEEDI					512-63-9435 Spouse's social security number		
If joint return, s	pouse's	s first name and middle initial	Last na	ame							
Home address	•	er and street). If you have a P.O. box, see	instructi	ions.				Apt. no.			on Campaigr
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete spaces below. State			ZIP	code 013	Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a			
ARLINGTON Foreign country name			Foreign province/state/county			-	Foreign postal code		box below will not change your tax or refund. You Spouse		
At any time du	ring 20	021, did you receive, sell, exchange	, or othe	erwise dispose of a	any fina	ancial interest	in an	y virtual curre	ncy?	Yes	⊠ No
Standard Deduction		neone can claim:	•								
Age/Blindnes	You	: Were born before January 2, 1	957	Are blind S	pouse	: Was be	orn be	fore January 2	2, 1957	☐ Is b	lind
Dependent	s (see	instructions):		(2) Social secu	rity	(3) Relations	ship	(4) 🗸 if q	ualifies for	(see instru	ıctions):
If more	(1) F	First name Last name		number		to you Child tax		Child tax ci	redit	Credit for ot	her dependents
than four											
dependents, see instruction	e										
and check here ▶											
	. 1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1		<u> </u>
Attach	2a	Tax-exempt interest	2a		h T	axable intere	et .		2b		01/2011
Sch. B if	За	Qualified dividends	3a		b Ordinary dividends				3b		
required.	4a	IRA distributions	4a	b Taxable amount .					. 4b		
	5a	Pensions and annuities	5a		b T	axable amou	nt .		. 5b		
Standard	6a	Social security benefits	6a		b T	axable amou	nt .		. 6b		
Deduction for —	7	Capital 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 10						. 8		-6,940.	
separately, \$12,550	9								▶ 9		58,021.
Married filing	10	Adjustments to income from Schedule 1, line 26						. 10			
jointly or Qualifying	11	Subtract line 10 from line 9. This is your adjusted gross income						▶ 11		58,021.	
widow(er),	12a	Standard deduction or itemized	•			1	2a	12,55	0.		,
\$25,100 • Head of	b	- ' ' '									
household,	С								. 12c		12,550.
\$18,800 If you checked any box under Standard	13	Qualified business income deduct		n Form 8995 or Fo	rm 899)5-A			. 13		
	14	Add lines 12c and 13						. 14		12,550.	
Deduction,	15	Taxable income. Subtract line 14	from lir	ne 11. If zero or les	s, ente	er-0			. 15		45,471.

	16	Tax (see instructions). Check if any from Form(s): 1 🔲 8814 2 🔲 4972 3 🔲	. 16	5,753.		
	17	Amount from Schedule 2, line 3	. 17			
	18	Add lines 16 and 17	. 18	5,753.		
	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	5,753.		
	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	5,753.		
	25	Federal income tax withheld from:				
	а	Form(s) W-2	6.			
	b	Form(s) 1099				
	С	Other forms (see instructions)				
	d	Add lines 25a through 25c	. 25d	6,386.		
If you have a	26	2021 estimated tax payments and amount applied from 2020 return	. 26			
qualifying child,	27a	Earned income credit (EIC)				
attach Sch. EIC.		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 ▶ □				
	b	Nontaxable combat pay election 27b				
	С	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				
	30	Recovery rebate credit. See instructions	0.			
	31	Amount from Schedule 3, line 15				
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	▶ 32	1,400.		
	33	Add lines 25d, 26, and 32. These are your total payments	▶ 33	7,786.		
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid .	. 34	2,033.		
Herana	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ [35a	2,033.		
Direct deposit?	▶b	Routing number 1 1 1 9 0 0 6 5 9 ▶ c Type: X Checking Saving	gs			
See instructions.	►d	Account number 8 2 9 0 0 0 0 4 5 7				
	36	Amount of line 34 you want applied to your 2022 estimated tax > 36				
Amount	37	Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions	▶ 37			
You Owe	38	Estimated tax penalty (see instructions)				
Third Party Designee		you want to allow another person to discuss this return with the IRS? See structions	ete below	. 🗵 No		
		signee's Phone Personal id number (Pli		,		
0:				not of my knowledge and		
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, an ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of w				
Here	You	ur signature Date Your occupation	f the IRS s	ent you an Identity		
		F		PIN, enter it here		
Joint return?		FILCH MUTCH BUCHNER	see inst.)			
See instructions. Keep a copy for	Spo	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		the IRS sent your spouse an entity Protection PIN, enter it here ee inst.)		
your records.			see inst.)			
	———Phr	one no. (940)312-8163 Email address SRIRAM.GADDAMEEDI@GMAIL.COM				
		eparer's name Preparer's signature Date PTIN	i	Check if:		
Paid	SYAM		082703			
Preparer				(678)965-9522		
Use Only			Firm's EIN	· · · · · · · · · · · · · · · · · · ·		
Go to www ire or		·	J LIIV	Form 1040 (2021)		
ao 10 www.iis.yo	JV/I UIII	n1040 for instructions and the latest information. BAA REV 02/16/22 PRO		101111 1070 (2021)		

Form 1040 (2021)

Page **2**

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

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

Your social security number
512-63-9435

Par	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)			
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	-6,940.
6	Farm income or (loss). Attach Schedule F \ldots		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			
	property	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) .	8р		
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		10	_6 940

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		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)	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	24g		
h	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	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	24 i		
j	Housing deduction from Form 2555	24 j		
k	Excess deductions of section 67(e) expenses from Schedule K-1	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 adjustments t here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line		26	

SCHEDULE E (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

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

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 512-63-9435 SRI RAM GADDAMEEDI 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 202 SRI SAI ARCADE MADINAGUDA HYDERABAD, TELANGANA IN 500050 В C 1b Fair Rental **Personal Use** Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days Days** personal use days. Check the **QJV** box only if you meet the requirements to file as a 365 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 . 3 400. 4 Royalties received 4 Expenses: Advertising 5 5 6 Auto and travel (see instructions) . . . 6 180. 7 Cleaning and maintenance . . . 7 650. 8 8 Commissions. 9 9 Insurance 10 Legal and other professional fees . . . 10 11 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. 14 Repairs. 14 1,900. 15 2,140. 15 Supplies . Taxes 16 16 17 17 2,470. 18 Depreciation expense or depletion . . 18 Other (list)
----19 19 Total expenses. Add lines 5 through 19 20 20 7,340. 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 -6,940. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 6,940.) 400 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 7,340. 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 6,940. 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

26

-6,940.

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2