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.

Submission Identification Number (SID)

Taxpay	ver's name	Social securi	ty numb	ber
MOU	NIKA THIRUMANI	795-52	-688	9
Spouse	's name	Spouse's so	cial secu	urity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2021 (Enter	r year you a	ire aut	thorizing.)
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	53,425.
2	Total tax		2	4,741.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	8,341.
4	Amount you want refunded to you		4	5,000.
5	Amount you owe		5	
D				· · · · · · · · · · · · · · · · · · ·

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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 lauthorize GLOBAL TAX	XES LLC	to enter or generate my PIN
-------------------------	---------	-----------------------------

Enter five digits, but don't enter all zeros								
	2	6	8	8	9			

my

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.

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 ►	Date I					 		
Practitioner PIN Method Returns Only—continu	e be	ow						
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.	5	8		 	6 all zer	 9	89	

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 Ret Don't Submit This For			
For Paperwork Reduction Act Notice, see your tax return in	structions. BAA	REV 01/24/22 PRO	Form 8879 (Rev. 01-2021)

104		artment of the Treasury-Internal Revenue Serv 5. Individual Income Ta 2		(99) urn	202	21	OMB No. 1	1545-0	074 IRS Us	e Only	—Do not v	write or staple	in this space.
Filing Status Check only one box.	lf yo	Single D Married filing jointly understand the MFS box, enter the moins a child but not your dependen	ame of	-	separately ouse. If you	. ,				,		, 0	low(er) (QW) he qualifying
Your first name	e and mi	ddle initial	Last na	me							Your so	ocial securi	ty number
MOUNIKA			THIF	RUMANI	[795-	52-688	9
lf joint return, s	pouse's	first name and middle initial	Last na	me							Spouse	's social se	curity number
655 PRO	MENA								Apt. no. 3058		Check	here if you,	on Campaign , or your ntly, want \$3
	DOST OTTI	ce. If you have a foreign address, also co	omplete s	paces be	IOW.	Sta			IP code		•		Checking a
IRVING									75039			low will not	0
Foreign countr	y name			-oreign p	rovince/stat	e/coun	ty		oreign postal	code	your ta	x or refund	
At any time du	uring 20	021, did you receive, sell, exchange	, or othe	rwise di	spose of a	ny fina	ancial intere	est in	any virtual c	currer	ncy?	Yes	X No
Standard Deduction	_	eone can claim:	•				a depende	ent					
Age/Blindnes	s You:	Were born before January 2, 1	957	Are b	lind S	pouse	: 🗌 Was	born	before Janu	ary 2	2, 1957	🗌 ls bl	lind
Dependent	s (see	instructions):		(2) 5	Social secur	ity	(3) Relation		(4) 6	if q	ualifies fo	pr (see instru	uctions):
If more	(1) Fi	rst name Last name			number		to yo	bu	Child	Child tax cre		Credit for ot	ther dependents
than four dependents,										<u> </u>			<u> </u>
see instruction	s ——												<u>Ц</u>
and check													<u>Ц</u>
here 🕨 🔄													
Attach	1	Wages, salaries, tips, etc. Attach F		W-2 .	· · ·	• •				·	. 1		60,325.
Sch. B if	2a	'	2a				axable inte			•	. 2k	-	
required.	<u>3a</u>		3a				Drdinary div			•	. 3k		
) 4a		4a				axable am			•	. 4k	-	
	5a		5a				axable am			·	. 5k	-	
Standard Deduction for —	6a	Social security benefits			d If pat ra		axable am			Г	. 6k	-	
Single or	7 8	Other income from Schedule 1, lin						re.			. 8	-	6 000
Married filing separately,	9	,						• •		•	· <u> </u>		<u>-6,900.</u> 53,425.
\$12,550 • Married filing	10	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, Adjustments to income from Sche		-				• •		•			<u> </u>
jointly or	11	Subtract line 10 from line 9. This is			 aross ino			• •		•	· <u>I</u> 1		53,425.
Qualifying widow(er),	12a	Standard deduction or itemized		-	•			12a		. 550			<u> </u>
\$25,100 " • Head of	b	Charitable contributions if you take				,	· ·	12b		, 55,	<u> </u>		
household,	c	•									. 12	c	12,550.
\$18,800 If you checked	13	Qualified business income deduct											<u></u> ,
any box under Standard	14												12,550.
Deduction,	15	Taxable income. Subtract line 14											40,875.
see instructions.)			_		,	-	-	-				

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

Form **1040** (2021)

Form 1040 (2021	1)									Pag	e 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16		4,741	
	17	Amount from Schedule 2, lin	ne3					17			
	18	Add lines 16 and 17						18		4,741	•
	19	Nonrefundable child tax cree	dit or credit for c	other depender	nts from Schedul	e8812		19			
	20	Amount from Schedule 3, lin	ne8					20			
	21	Add lines 19 and 20						21	<u> </u>		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	<u> </u>	4,741	•
	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	<u> </u>	4,741	•
	25	Federal income tax withheld	from:			1 1					
	а	Form(s) W-2					,341.				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c						25d	<u> </u>	8,341	•
If you have a	26	2021 estimated tax payment			3.7			26			
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)				27a					
		Check here if you were b									
		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 or			Schedule 8812	28					
	29	American opportunity credit	from Form 8863	3. line 8		29		1			
	30	Recovery rebate credit. See		-			,400.	1			
	31	Amount from Schedule 3, lin				31		1			
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments an	d refundable cred	lits 🕨	32		1,400	
	33	Add lines 25d, 26, and 32. T						33		9,741	
Refund	34	If line 33 is more than line 24						34		5,000	
neiuliu	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attached, che	eck here		35a		5,000	
Direct deposit?	►b	Routing number 1 1 1	0 0 0 0	2 5	► c Type:	Checking 🗙	Savings				
See instructions.	►d	Account number 4 8 8	0 8 5 0	1 0 7	2 1		-				
	36	Amount of line 34 you want a	applied to your	2022 estimate	ed tax 🕨	36					
Amount	37	Amount you owe. Subtract	line 33 from line	24. For detail	s on how to pay,	see instructions	. 🕨	37			
You Owe	38	Estimated tax penalty (see in	nstructions) .		🕨	38					
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	? See					
Designee		structions	· · · · ·			. 🕨 🗌 Yes. Co	omplete b	elow.	X No		
		signee's		Phone			onal identi				_
		ne 🕨		no. ►			ber (PIN)				_
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com									
Here	Yo	ur signature		Date	Your occupation		If the	IRS ser	nt you an l	dentitv	
				Duto			Prote	ection Pl	IN, enter it		
Joint return?					SOFTWARE	DEVELOPER	(see	inst.) 🕨			
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupa	tion			nt your spo		
your records.	,							inst.) 🕨	ection PIN	, enter it n	ere
	Db	one no. (626) 349-525	5	Email address			(000				_
		one no. (626) 349-525 eparer's name	Preparer's signat			Date	PTIN		Check if:		
Paid			UMA MAHES		итмт	02/01/2022	P02472	2867		-employed	Ч
Preparer		n's name GLOBAL TAX		INVARI DU	L T 1,1 T	02/01/2022			678) 96		
Use Only		m's address ► 2530 Pebb		n Cummin	A CA 300/1			's EIN ►		L01719	
Ca ta unite					2		ГШП	3 LIN P			
GO TO WWW.Irs.go	uv/rom	n1040 for instructions and the late	sumormation.		BAA	REV 01/24/22 PRO			Form	1040 (2	J21)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

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

	Sequence No. UI	
	Your soc	ial security number
	795-52	-6889

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

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	8	1	
2a	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, transchedule E		5	-6,900.
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 property	8k		
	Property	OK	-	
•	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			
		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	-6,900.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedul	le 1 (Form 1040) 2021

Par	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		
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 violations		
j	Housing deduction from Form 2555 . . . 24j		
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 adjustments to income. Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	
	RΔΔ REV 01/24/22 PRO	Sched	ule 1 (Form 1040) 2021

REV 01/24/22 PRO

SCHEI	DULE	Ε
(Form	1040)	

Supplemental Income and Loss

OMB No. 1545-0074

20

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Department of the Treasury Internal Revenue Service (99)

	ent of the Treasury Revenue Service (99)	► Attach to Form 1040 ► Go to www.irs.gov/ScheduleE f			,		information.		Atta	chment uence No. 13
) shown on return							Your so		rity number
. ,	IIKA THIRUMANI								52-68	-
Part		ss From Rental Real Estate and Ro	valtie	s Note:	: If you a	are in th	e business of			
		e instructions. If you are an individual, rep	-		-					
A Die		ents in 2021 that would require you to							-	
		/ou file required Form(s) 1099?								Yes No
 1a	Physical address of	each property (street, city, state, ZIF	> code	e)					· ⊔	
A		RI KARIMNAGAR TELANGANA I								
В										
С										
1b	Type of Property								rsonal Use	
	(from list below)	above, report the number of fa	ir renta	ir rental and I QJV box only A			Days	Da	iys	QJV
Α	3	personal use days. Check the if you meet the requirements to	o file a				360		0	
В		qualified joint venture. See ins	tructio							
С					С					
Туре	of Property:									
1 Sing	gle Family Residence	3 Vacation/Short-Term Rental	5 Lai	nd	7	7 Self-	Rental			
2 Mul	ti-Family Residence	4 Commercial	6 Ro	yalties	8	3 Othe	r (describe)			
Incom		Properties:			Α		В			С
3			3		4	480.				
4			4							
Exper	ises:									
5	-		5			80.				
6	,	instructions)	6			200.				
7		enance	7		(600.				
8			8							
9			9							
10		essional fees	10			100				
11 12		aid to banks, etc. (see instructions)	11		⊥,.	100.				
12			12							
14			14		2	100.				
15			15			800.				
16			16		±,,,					
17			17		1 .	500.				
18		e or depletion	18		-/-					
19	Other (list)		19							
20		I lines 5 through 19	20		7,3	380.				
21	Subtract line 20 fron	n line 3 (rents) and/or 4 (royalties). If								
		instructions to find out if you must								
	file Form 6198		21		-6,9	900.				
22	Deductible rental rea	al estate loss after limitation, if any,								
		nstructions)	22	(6,9	00.)	()()
23a		reported on line 3 for all rental prope			•	23a		480.	·	
b		reported on line 4 for all royalty prop			•	23b			_	
C		reported on line 12 for all properties			•	23c			_	
d		reported on line 18 for all properties			•	23d		7 000	_	
e		reported on line 20 for all properties				23e		7,380.		
24		ve amounts shown on line 21. Do no				· ·	•••••	. 24		
25		osses from line 21 and rental real estate								6,900.)
26		tate and royalty income or (loss).								
		IV, and line 40 on page 2 do not 040), line 5. Otherwise, include this at						on . 26		-6,900.
For Pa		t Notice, see the separate instructions			PA		-6,900			E (Form 1040) 2021
a	Per tron troudotion Ab		-		-		· ·	÷	SUIGANE I	- , 1070/ 2021