## 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

Submission Identification Number (SID)						
Taxpayer's name	Social sec	curity numb	per			
SPANDANA VOTTEM	712-9	712-96-8466				
Spouse's name	Spouse's	Spouse's social security number				
Part I Tax Return Information — Tax Year Ending December 31	, 2021 (Enter year you	ı are aut	thorizing )			
Enter whole dollars only on lines 1 through 5.	2021 (Enter your you	1 are aat				
<b>Note:</b> Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1 Adjusted gross income		.   1	64,065.			
2 Total tax			7,018.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			8,392.			
4 Amount you want refunded to you			1,374.			
5 Amount you owe		. —	1,5/4.			
Part II Taxpayer Declaration and Signature Authorization (Be su	re you get and keep a c	opy of y	our return)			
my knowledge and belief, it is true, correct, and complete. I further declare that the am return (original or amended) I am now authorizing. I consent to allow my intermediate serves to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receive for any delay in processing the return or refund, and (c) the date of any refund. If applicate Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial inspayment of my federal taxes owed on this return and/or a payment of estimated tax, and authorization is to remain in full force and effect until I notify the U.S. Treasury Financial payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payments business days prior to the payment (settlement) date. I also authorize the financial institut taxes to receive confidential information necessary to answer inquiries and resolve iss personal identification number (PIN) below is my signature for the income tax return (original Information Inform	vice provider, transmitter, or ele- pipt or reason for rejection of thole, I authorize the U.S. Treasur stitution account indicated in the financial institution to debit al Agent to terminate the author ent cancellation requests must tions involved in the processing ues related to the payment. I	ctronic ret e transmis y and its c e tax prep the entry t orization. T be received of the ele- further ac	curn originator (ERO) asion, (b) the reason designated Financial paration software for to this account. This or revoke (cancel) a wed no later than 2 ectronic payment of knowledge that the			
Electronic Funds Withdrawal Consent.	,					
Taxpayer's PIN: check one box only		6 8 4	1 6 6			
X I authorize GLOBAL TAXES LLC to	enter or generate my PIN	Enter five				
signature on the income tax return (original or amended) I am now auth	orizing.	don't ente	r all zeros			
I will enter my PIN as my signature on the income tax return (original or if you are entering your own PIN and your return is filed using the Pra below.						
Your signature ▶	Date ▶					
Spouse's PIN: check one box only						
• —	antar ar manarata ma DIN					
to to to	enter or generate my PIN	Enter five	as my			
signature on the income tax return (original or amended) I am now auth	orizina	Enter five of don't enter				
☐ I will enter my PIN as my signature on the income tax return (original or	•	rizina Ch	eck this hox <b>only</b>			
if you are entering your own PIN <b>and</b> your return is filed using the Pra below.						
Spouse's signature ▶	Date ►					
Practitioner PIN Method Returns Only-	-continue below					
Part III Certification and Authentication — Practitioner PIN Method	od Only					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-select		7 8 enter all ze	eros			
I certify that the above numeric entry is my PIN, which is my signature for the electronic authorized to file for tax year indicated above for the taxpayer(s) indicated above. I conrequirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS	firm that I am submitting this	return in a	accordance with the			
ERO's signature ▶	Date ►					
ERO Must Retain This Form — See						
Don't Submit This Form to the IRS Unless						

# E 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 son is a child but not your depende	name of y									
Your first name and middle initial Last name						١	our so	cial securi	ty number			
SPANDANA VOT'				EM						712-96-8466		
If joint return, spouse's first name and middle initial Last na				me					8	Spouse's social security number		
		er and street). If you have a P.O. box, se	ee instruction	ons.	Apt. no.		Presidential Election Campaign					
		AKES BLVD						9209		Check here if you, or your spouse if filing jointly, want \$3		
, , ,		ce. If you have a foreign address, also o	complete s					code		to go to this fund. Checking a		
PFLUGER'		E				X.	_			box below will not change		
Foreign countr	y name		F	Foreign province/sta	ate/cou	nty	For	Foreign postal code your tax of			or refund.	. Spouse
At any time du	ıring 20	021, did you receive, sell, exchange	e, or othe	rwise dispose of	any fir	nancial intere	st in ar	ny virtual c	urrenc	:y?	Yes	⊠ No
Standard Deduction		<b>leone can claim:</b>	•	· · · · · · · · · · · · · · · · · · ·		s a depender en	nt					
Age/Blindness	s You	: Were born before January 2,	1957	Are blind	Spous	e: Was	born be	efore Janu	iary 2,	1957	☐ Is bl	lind
Dependent		<del>-</del>		(2) Social secu	ıritv	(3) Relatio		I			r (see instru	uctions):
If more	•	First name Last name		number to you			Child tax cre		1	•	ther dependents	
than four												
dependents,												
see instruction and check	s —											
here ▶ □												
	1	Wages, salaries, tips, etc. Attach	Form(s) \	N-2						1		69 <b>,</b> 905.
Attach	2a	Tax-exempt interest	2a		b	Taxable inter	est			2b		
Sch. B if required.	3a	Qualified dividends	3a		b	Ordinary divi	dends			3b		
required.	4a	IRA distributions	4a		b	Taxable amo	unt .			4b		
	5a	Pensions and annuities	5a		b	Taxable amo	unt .			5b		
Standard	6a	Social security benefits	6a		b	Taxable amo	unt .			6b		
Deduction for—	Capital gain or (loss). Attach Schedule D if required, if not required, check here					<b>▶</b> □	7					
<ul> <li>Single or Married filing</li> </ul>								8		-5,840.		
separately, \$12,550					ncom	е			. ▶	9		64,065.
<ul> <li>Married filing</li> </ul>	10	Adjustments to income from Sch	edule 1, l							10		
jointly or Qualifying	11_	Subtract line 10 from line 9. This	is your ac	djusted gross in	come				. ▶	11		64,065.
widow(er), \$25,100	12a	Standard deduction or itemize	d deducti	ions (from Sched	ule A)		12a	12,	,550			
<ul><li>Head of</li></ul>	b	Charitable contributions if you tak	e the stan	ndard deduction (s	see ins	tructions)	12b		300			
household, \$18,800	С	Add lines 12a and 12b								120	;	12,850.
If you checked	13	Qualified business income deduc	ction from	Form 8995 or Fo	orm 89	95-A				13		
any box under Standard	14	Add lines 12c and 13								14		12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0							15		51,215.	

Form 1040 (2021	)									Page Z
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			16	7,018.
	17	Amount from Schedule 2, lin	ne 3						17	
	18	Add lines 16 and 17							18	7,018.
	19	Nonrefundable child tax cre	dit or credit for o	ther depender	nts from Schedule	8812			19	
	20	Amount from Schedule 3, lir	ne 8						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	7,018.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21				23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					. •	24	7,018.
	25	Federal income tax withheld	from:							
	а	Form(s) W-2				25a	8	3 <b>,</b> 392		
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c							25d	8,392.
If you have a	26	2021 estimated tax paymen			NΤ	1 1			26	
qualifying child, attach Sch. EIC. [	27a	Earned income credit (EIC)				27a				
attaon con. Etc.	b	Check here if you were I January 2, 2004, and you taxpayers who are at least a Nontaxable combat pay election.	u satisfy all the ge 18, to claim t	e other requi he EIC. See in	rements for					
	С	Prior year (2019) earned inco								
	28	Refundable child tax credit or			Schedule 8812	28				
	29	American opportunity credit	from Form 8863	s, line 8		29				
	30	Recovery rebate credit. See				30				
	31	Amount from Schedule 3, lir	ne 15			31				
	32	Add lines 27a and 28 through	32	]						
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				. •	33	8,392.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amour	nt you	overpaid		34	1,374.
riciana	35a	Amount of line 34 you want <b>refunded to you.</b> If Form 8888 is attached, check here <b>&gt;</b>								1,374.
Direct deposit?	▶b	Routing number 1 1 1	9 0 0 6	5 9	▶ c Type: 🛛	Check	ing 🗌	Saving	5	
See instructions.	►d	Account number 8 7 5 4 0 4 4 6 8 6								
	36	Amount of line 34 you want	applied to your	2022 estimate	ed tax 🕨	36				
Amount	37	Amount you owe. Subtract	line 33 from line	24. For details	s on how to pay, s	see inst	ructions	. •	37	
You Owe	38	Estimated tax penalty (see in	nstructions) .		🕨	38				
<b>Third Party</b>		you want to allow another	person to disc	cuss this retur	n with the IRS?	See				
Designee		tructions							e below.	⊠ No
		signee's ne ▶		Phone no. ▶				onal ide ber (PIN	ntification	
Sign	Un	der penalties of perjury, I declare telef, they are true, correct, and com		d this return and			and stateme	nts, and	to the be	
Here		ur signature		Date Your occupation						ent you an Identity
		rour signature		Date Four occupation			I .		PIN, enter it here	
Joint return?				ELECTRICAL	ENG	SINEER	(Se	ee inst.) 🕨		
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, <b>both</b> must sign.		Date Spouse's occupation				Ide		ent your spouse an tection PIN, enter it here	
	Pho	one no. (512) 216-104		Email address	SPANDANA.V	13@GI	MAIL.CO	M		
Paid	Pre	parer's name	Preparer's signat	ure		Date		PTIN		Check if:
Preparer	SYAM	AM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/23/2022 P0208						82703	Self-employed	
Use Only		Firm's name ► GLOBAL TAXES LLC Pho						hone no. (678) 965-9522		
OSC OIIIY	Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Firm						m's EIN I	> 30-1017196		

## 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

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

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

► Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number

SPAN	DANA VOTTEM		712-9	6-84	66
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxe	s		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, tr Schedule E			5	-5,840.
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			
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 1 1040-NR, line 8			10	-5,840.

Schedule 1 (Form 1040) 2021 Page **2** 

	Educator expenses	11
2	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12
3	Health savings account deduction. Attach Form 8889	13
ŀ	Moving expenses for members of the Armed Forces. Attach Form 3903	14
5	Deductible part of self-employment tax. Attach Schedule SE	15
6	Self-employed SEP, SIMPLE, and qualified plans	16
7	Self-employed health insurance deduction	17
3	Penalty on early withdrawal of savings	18
9a	Alimony paid	19a
b	Recipient's SSN	
С	Date of original divorce or separation agreement (see instructions) ▶	
0	IRA deduction	20
1	Student loan interest deduction	21
2	Reserved for future use	22
3	Archer MSA deduction	23
4	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 Paralympic medals and USOC prize money reported on line 8l 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	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	
Z	Other adjustments. List type and amount ▶	
5	Total other adjustments. Add lines 24a through 24z	25

#### **SCHEDULE E** (Form 1040)

**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.

OMB No. 1545-0074 Attachment

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

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

Sequence No. 13

Your social security number

SPAN	DANA VOTTEM						712-9	6-846	6
Part	Income or Loss From Rental Real Estate and R Schedule C. See instructions. If you are an individual, re								
	d you make any payments in 2021 that would require you Yes," did you or will you file required Form(s) 1099?		` '						∕es ⊠ No ∕es □ No
	Physical address of each property (street, city, state, Z	IP code	e)						
Α	H.NO:1-11-25/3/A BHAVANI RAJENDRANA		•	BAD, T	ELAN	GANA IN	50003	0	
В				<u> </u>					
С									
1b	(from list below) above, report the number of fair rental and							Personal Use Days	
Α	3 if you meet the requirements	personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.						0	
В	qualified joint venture. See in	structio	ns.	В					
C				С					
Type o	of Property:								
1 Sing	gle Family Residence 3 Vacation/Short-Term Rental	l 5 La	nd	7	Self-	Rental			
	ti-Family Residence 4 Commercial		yalties	8	Othe	r (describe)			
Incom	-	:		Α		В			С
3	Rents received	3		4	80.				
4	Royalties received	4							
Expen									
5	Advertising	5			80.				
6	Auto and travel (see instructions)	6			40.				
7	Cleaning and maintenance	7		6	00.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10			0.0				
11	Management fees	11		9	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13 14	Other interest.	13		1,6	0.0				
15	Repairs	15			00.				
16	Supplies	16		1,0	00.				
17	Utilities	17		1 1	00.				
18	Depreciation expense or depletion	18			00.				
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		6,3	20.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). I			0,0					
21	result is a (loss), see instructions to find out if you mus								
	file <b>Form 6198</b>	21		-5,8	40.				
22	Deductible rental real estate loss after limitation, if any	_		· ·					
	on Form 8582 (see instructions)	22	(	5,84	10.)	(	)	(	)
23a	Total of all amounts reported on line 3 for all rental prop	erties			23a		480.		
b	Total of all amounts reported on line 4 for all royalty pro	perties			23b				
С	Total of all amounts reported on line 12 for all properties	s			23c				
d	Total of all amounts reported on line 18 for all properties	s			23d				
е	e Total of all amounts reported on line 20 for all properties								
24	Income. Add positive amounts shown on line 21. Do n	ot inclu	ude any lo	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real esta	te losse	s from line	22. Ent	ter tota	al losses here	. 25	(	5,840.)
26	Total rental real estate and royalty income or (loss)						<b>I</b>		
	here. If Parts II, III, IV, and line 40 on page 2 do no						1		
	Schedule 1 (Form 1040), line 5. Otherwise, include this	amoun	t in the to	tal on li	ne 41	on page 2	. 26		-5 <b>,</b> 840.