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 securit	y number				
SRAVAN REDDY KHAMBHAM	691-69-	591-69-0431				
Spouse's name	Spouse's soci	cial security number				
Part I Tax Return Information — Tax Year Ending December 31, 2021 (En	ter year you a	re 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 87,	704.			
2 Total tax		2 12,	221.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 15,	780.			
4 Amount you want refunded to you		4 3,	559.			
5 Amount you owe		5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	d keep a copy	y of your retur	n)			
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I a return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, tran to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to termin payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation representations business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) Electronic Funds Withdrawal Consent.	smitter, or electrorejection of the trace U.S. Treasury are indicated in the taution to debit the nate the authorizate equests must be the processing of e payment. I furt	anic return originate ansmission, (b) the and its designated F ax preparation softwentry to this accountion. To revoke (c) received no later the electronic pay her acknowledge	or (ERO) e reason iinancial ware for int. This ancel) a than 2 ment of that the			
Taxpayer's PIN: check one box only						
▼ I authorize GLOBAL TAXES LLC to enter or general ■	te my PIN	0 4 3 1	as my			
ERO firm name signature on the income tax return (original or amended) I am now authorizing.		er five digits, but n't enter all zeros				
I will enter my PIN as my signature on the income tax return (original or amended) I an if you are entering your own PIN and your return is filed using the Practitioner PIN me below.						
Your signature ► Sravan Reddy K Date ►	01/24	/ 2 0 2 2				
Spouse's PIN: check one box only	_					
I authorize to enter or genera	te my PIN		as my			
ERO firm name	_	er five digits, but	asiny			
signature on the income tax return (original or amended) I am now authorizing.		n't enter all zeros				
I will enter my PIN as my signature on the income tax return (original or amended) I and if you are entering your own PIN and your return is filed using the Practitioner PIN me below.						
Spouse's signature ▶ Date ▶						
Practitioner PIN Method Returns Only—continue belo	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 1 9 8 er all zeros	9			
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incom- authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am su requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of	bmitting this retu	rn in accordance				
ERO's signature ▶ Date ▶	•					
ERO Must Retain This Form — See Instructions						

Don't Submit This Form to the IRS Unless Requested To Do So

E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

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

	s 🔀 🤅	Single Married filing jointly [Marri	ed filing separately	(MFS)) Head	of hous	ehold (HOH)	Qua	lifying wid	ow(er) (QW)	
Check only one box.	•	ou checked the MFS box, enter the reson is a child but not your depender		your spouse. If you	chec	ked the HOH	or QV	/ box, enter th	e child's	name if th	ne qualifying	
Your first name	and m	iddle initial	Last na	ıme					Your so	Your social security number		
SRAVAN I	REDD	Y	KHAN	MBHAM					691-69-0431			
If joint return, s	pouse's	s first name and middle initial	Last na	ime					Spouse's social security number			
		er and street). If you have a P.O. box, see	e instructi	ons.				Apt. no.		ntial Electi	on Campaigr	
63 GARDI			amamlata a	unagan halaw	Cto		ZID	d -			ntly, want \$3	
	ost om	ce. If you have a foreign address, also c	ompiete s	spaces below.	Sta			code 405			Checking a	
BUTLER Foreign countr	v namo			Foreign province/state			+	eign postal code		ow will not cor refund	•	
Foreign country	упапте			roreign province/state	:/ COuri	ty	FOR	eigii postai code	your tax	You	Spouse	
At any time du	ıring 20	021, did you receive, sell, exchange	, or othe	erwise dispose of a	ny fina	ancial interes	t in an	y virtual curre	ncy?	Yes	⊠ No	
Standard	Som	neone can claim: You as a de	ependen	t Your spou	se as	a dependent	t					
Deduction		Spouse itemizes on a separate retu	rn or you	u were a dual-statu	alier	1						
Age/Blindness	S You	: Were born before January 2,	1957 [Are blind S	ouse	: Was b	orn be	fore January 2	2, 1957	☐ Is b	lind	
Dependents	s (see	instructions):		(2) Social securi	ty	(3) Relation	ship	(4) ✓ if qı	ualifies fo	r (see instru	uctions):	
If more		irst name Last name	number to you		Child tax cr	redit	Credit for ot	ther dependents				
than four												
dependents, see instruction												
and check												
here ▶ 🗌												
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1		99,724.	
Attach	2a	Tax-exempt interest	2a		b T	axable intere	est		. 2b)		
Sch. B if required.	3a	Qualified dividends	3a		b (Ordinary divid	lends		. 3b)		
required.	4a	IRA distributions	4a		b T	axable amou	ınt .		. 4b)		
	5a	Pensions and annuities	5a		b T	axable amou	ınt .		. 5b)		
Standard	6a	Social security benefits	6a		b T	axable amou	ınt .		. 6b	,		
Deduction for—	7	Capital gain or (loss). Attach Sche	edule D i	f required. If not red	quired	, check here		▶ [7		-3,000.	
Single or Married filing	8	Other income from Schedule 1, lin	ne 10						. 8		-9,020.	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							▶ 9		87,704.	
Married filing	10	Adjustments to income from Scho	Adjustments to income from Schedule 1, line 26						. 10)		
jointly or Qualifying	11	Subtract line 10 from line 9. This i	s your a	djusted gross inco	me			1	▶ 11		87,704.	
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	ions (from Schedu	e A)	1	2a	12,550	ο. 🗌			
Head of	b	Charitable contributions if you take	the star	ndard deduction (se	e insti	ructions) 1	2b	300				
household, \$18,800	С	Add lines 12a and 12b							. 120		12,850.	
If you checked	13	Qualified business income deduc	tion fron	n Form 8995 or For	n 899	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 lir	ne 11. If zero or less	, ente	er -0			. 15		74,854.	

	16	Tax (see instructions). Check if any from Form(s): 1 88	14 2 🗌 4972	3 🗌		16	12,221.	
	17	Amount from Schedule 2, line 3				17		
	18	Add lines 16 and 17				18	12,221.	
	19	Nonrefundable child tax credit or credit for other depende	ents 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	12,221.	
	23	Other taxes, including self-employment tax, from Schedu	le 2, line 21			23	0.	
	24	Add lines 22 and 23. This is your total tax				24	12,221.	
	25	Federal income tax withheld from:						
	а	Form(s) W-2		25a 15	5,780.			
	b	Form(s) 1099		25b		1		
	С	Other forms (see instructions)		25c		1		
	d	Add lines 25a through 25c				25d	15,780.	
	26	2021 estimated tax payments and amount applied from 2				26	-	
If you have a L qualifying child,	27a	Earned income credit (EIC)	NΩ	27a				
attach Sch. EIC.		Check here if you were born after January 1, 1998,						
		January 2, 2004, and you satisfy all the other requ	irements for					
		taxpayers who are at least age 18, to claim the EIC. See i	nstructions ►					
	b	Nontaxable combat pay election 27b		-				
	С	Prior year (2019) earned income						
	28	Refundable child tax credit or additional child tax credit from		28		-		
	29	American opportunity credit from Form 8863, line 8		29		-		
	30	Recovery rebate credit. See instructions		30		-		
	31	Amount from Schedule 3, line 15		31				
	32	Add lines 27a and 28 through 31. These are your total ot				32	15 500	
	33	Add lines 25d, 26, and 32. These are your total payment			. •	33	15,780.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33		•		34	3,559.	
D: 1 1 '10	35a	Amount of line 34 you want refunded to you. If Form 888		ck here Checking	► ∐ Savings	35a	3,559.	
Direct deposit? See instructions.	▶b	Routing number 0 2 1 2 0 0 0 2 5						
	► d	Account number 1 4 6 2 1 0 4 8 0 1						
A	36	Amount of line 34 you want applied to your 2022 estimate		36				
Amount You Owe	37	Amount you owe. Subtract line 33 from line 24. For detail		1 1	. ▶	37		
	38	Estimated tax penalty (see instructions)		38				
Third Party Designee		you want to allow another person to discuss this returnations			omplete b	alow	X No	
Designee		ignee's Phone			onal identif			
		ne ▶ no. ▶			ber (PIN)			
Sign		ler penalties of perjury, I declare that I have examined this return ar						
Here	beli	ef, they are true, correct, and complete. Declaration of preparer (oth		ased on all informati			,	
11010	You	r signature Date	Date Your occupation			If the IRS sent you an Identity Protection PIN, enter it here		
Joint return?			SOFTWARE I	DEVELOPER		inst.) ▶	IN, enter it here	
See instructions.	Spo	buse's signature. If a joint return, both must sign. Date	Spouse's occupati		If the	IRS ser	nt your spouse an	
Keep a copy for					Ident	ity Prote	ection PIN, enter it here	
your records.					(see	inst.) ►		
		ne no. (251)656-6463 Email address	REDDY.SRAVAN	12473@GMAIL.C				
Paid	Pre	parer's name Preparer's signature		Date	PTIN		Check if:	
Preparer	VENK	ATASAI PAVAN KUMAR DUDIPALLI VENKATASAI PAVAN KUM	MAR DUDIPALLI	01/24/2022	P02470		Self-employed	
Use Only		n's name ► GLOBAL TAXES LLC			Phon	e no. (678)965-9522	
	Firr	n's address ▶ 2530 Pebble Creek Ln Cummir	ng GA 30041		Firm'	s EIN 🕨	30-1017196	
Go to www.irs.go	ov/Form	1040 for instructions and the latest information.	BAA	REV 01/17/22 PRO			Form 1040 (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

SRAVAN REDDY KHAMBHAM

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 691-69-0431

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	3	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, truschedule E		5	-9,020.
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	<u> </u>	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10			
	1040-NR. line 8		10	_0 020

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			
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form	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	24 g		
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	24i		
j	Housing deduction from Form 2555	24 j		
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 there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line			

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

Capital Gains and Losses

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

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

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2021

Attachment Sequence No. **12**

	(s) snown on return AVAN REDDY KHAMBHAM			l		0431
Did y	you dispose of any investment(s) in a qualified opportunity			i ⊠ No		0 13 1
	es," attach Form 8949 and see its instructions for additiona					\
Pa	· ·	nerally Assets	Held One Year	or Less (Se	e ins	tructions)
lines This	Gee instructions for how to figure the amounts to enter on the ines below. This form may be easier to complete if you round off cents to whole dollars. (d) Proceeds (sales price) (e) Cost (or other basis) (or other basis) (ine 2, column (contents))			from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)	
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (lo	•			4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	(17,572.
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back						-17,572.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets I	Held More Than	One Year	(see	instructions)
See	instructions for how to figure the amounts to enter on the below.	(d)	(e)	(g) Adjustmer	ıts	(h) Gain or (loss) Subtract column (e)
This	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, line 2, colum	from Part II,	from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824			, ,	11	
	Net long-term gain or (loss) from partnerships, S corporation Capital gain distributions. See the instructions	ions, estates, and	I trusts from Schee	dule(s) K-1	12 13	
13 14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	, from line 13 of	your Capital Loss	Carryover	14	(2.
15	Net long-term capital gain or (loss). Combine lines 8a on the back	through 14 in co	olumn (h). Then, g		15	-2.

BAA

Schedule D (Form 1040) 2021 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -17,574. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 3,000.) • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

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

2021

Attachment
Sequence No. 13

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.

Attachment Sequence No. 13 Your social security number

	AN REDDY KHAMBH								91-69-0		
Part	Income or Loss	From Rental Real Estate and Ro	yaltie	s Note	: If you a	are in th	e business c	of rent	ing person	al prop	perty, use
	Schedule C. See i	nstructions. If you are an individual, repo	ort farr	m rental i	ncome o	r loss fi	om Form 48	335 or	n page 2, li	ne 40.	
A Dic	d you make any paymer	nts in 2021 that would require you to	file F	orm(s) 1	099? Se	e instr	uctions .			Ye	s 🛛 No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?								Ye	s 🗌 No
1a		each property (street, city, state, ZIF									
Α	GANDHI NAGAR H	YDERABAD TELANGANA IN 50	0004	б							
В											
С											
1b	Type of Property										QJV
	(from list below)	above, report the number of fa personal use days. Check the	ir rent	al and			ays		Days		
Α	3	if you meet the requirements to	o file a	sa	Α		365		0		
В		qualified joint venture. See inst	ructio	ns.	В						
С					С						
Type o	of Property:										
	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd	7	' Self-	Rental				
	ti-Family Residence		6 Ro	yalties	8	Othe	r (describe))			
Incom	ie:	Properties:			Α		E	3			С
3			3		(580.					
4	Royalties received .		4								
Expen											
5	_		5								
6	•	nstructions)	6								
7		ance	7		1,4	120.					
8			8								
9			9								
10		ssional fees	10								
11	•		11		1,1	150.					
12		d to banks, etc. (see instructions)	12								
13			13								
14	•		14			170.					
15			15		2,8	360.					
16			16								
17			17		1,8	300.					
18		or depletion	18								
19	Other (list)		19								
20	•	ines 5 through 19	20		9,	700.					
21		line 3 (rents) and/or 4 (royalties). If									
		nstructions to find out if you must			0 (220					
00	file Form 6198		21	-	-9,(J∠U.					
22		estate loss after limitation, if any,	00	,	0 0	۰۰ ۱	/)/		\
222	on Form 8582 (see ins	structions)	22](20.) 23a	(80.)
23a b		eported on line 4 for all royalty prope				23b		0			
C		eported on line 4 for all royally properties	ei iies			23c					
d		eported on line 18 for all properties				23d					
e		eported on line 20 for all properties				23e		9,7	00		
24		e amounts shown on line 21. Do no	t inclu	 ıde anv		236		2,1	24		
25	•	sses from line 21 and rental real estate		-		ter tota	 al losses her	٠.	25 (9,020.)
									20 (J, UZU.)
26		ate and royalty income or (loss). (V, and line 40 on page 2 do not a									
		0), line 5. Otherwise, include this ar							26		-9,020.