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	er's name	Social security number									
ANI	SH REDDY NOMULA	350-47	-2082								
Spouse	's name	Spouse's social security number									
Par	Tax Return Information — Tax Year Ending December 31, 2021 (Enter	year you a	are authoriz	zing.)							
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	46,912.							
2	Total tax		2	3,890.							
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	7,176.							
4	Amount you want refunded to you		4	3,286.							
5	Amount you owe		5								
Part	Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)										

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

	I authorize	CTORAT	TAVEC	TTC	to optor or gonorate my DIN		
<u> </u>	rauthorize	GLUBAL	TAVES		to enter or generate my PIN	-	_
				ERO firm name		티	1

7	2	0	8	2	00 mV
Ent don	er fiv n't er	/e di nter a	gits, all ze	but ros	as my

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							 		
Practitioner PIN Method Returns Only—	continue	bel	ow						
Part III Certification and Authentication – Practitioner PIN Metho	d Only								
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected	ed PIN.	5	8		 	 6 all zer	 9	8 9)

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 >			
	ist Retain This Form — See his Form to the IRS Unless		
For Department Reduction Act Nation and your tax	aturn instructions	BEV 01/21/22 BBO	Earm 8879 (Pov. 01 2021)

E 1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		(99) urn	202	21	OMB No. 1	545-00	74 IRS U	lse Only	r−Do not v	vrite or staple	in this space.	
Filing Status Check only one box.	lf yo	Single D Married filing jointly unchecked the MFS box, enter the norm is a child but not your dependent	ame of	-									low(er) (QW) he qualifying	
Your first name	and mi	ddle initial	Last na	ime							Your so	cial securi	ty number	
ANISH R	EDDY		NOM	JLA							350-	47-208	2	
If joint return, spouse's first name and middle initial				ime							Spouse	's social se	curity number	
		er and street). If you have a P.O. box, see INAS BLVD W	instructi	ons.					Apt. no. 368		•	ential Electi here if you,	on Campaign	
		ce. If you have a foreign address, also co	mplete s	paces be	ow.	Sta	ate	ZI	P code				ntly, want \$3	
IRVING			inpiere e	puece se		T			5039				Checking a	
Foreign countr	/ name			Foreign p	rovince/state				preign posta	l code	1	ow will not x or refund	0	
				roroigir pi	ovinco, otate	, oouri	, y		i olgi i poote	. 0000	,	You Spous		
At any time du	iring 20	021, did you receive, sell, exchange	, or othe	erwise di	spose of ar	ny fina	ancial intere	est in a	ny virtua	curre	ncy?	Yes	X No	
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur Were born before January 2, 1	n or you		dual-status		_		pefore Jai		2 1057	□ Is b	lind	
			307 L	1							-			
Dependent				(2) 8	Social securi number	ty	(3) Relation to yo			✓ If q d tax c		r (see instru	uctions): ther dependents	
If more (1) First name Last name than four							-			reuit				
dependents,														
see instruction	s ——													
and check here ►														
	1	Wages, salaries, tips, etc. Attach F	- orm(s)	W/_2							. 1		<u> </u>	
Attach			2a	vv- <u> </u>	· · ·	 ь т	••••	· ·		·	. 1 2t		10,912.	
Sch. B if	2a 3a	· ·	2a 3a				axable inte		· · ·	·	· 21			
required.	4a		4a				Drdinary div Taxable amo		· · ·	·	. <u>4</u> t			
							axable amo			•	. 5k			
Standard	6a		6a				axable amo			•	. 6t			
Deduction for –	7	Capital gain or (loss). Attach Sche		frequire						▶ [
 Single or Married filing 	8	Other income from Schedule 1, lin								-	. 8			
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,								•	. <u> </u>	-	46,912.	
\$12,550Married filing	10	Adjustments to income from Sche		-				• •		•	. 10		10,912.	
jointly or	11	Subtract line 10 from line 9. This is						• •		•	► <u>11</u>		46,912.	
Qualifying widow(er),	12a	Standard deduction or itemized						12a					10,912.	
\$25,100 • Head of			eduction or itemized deductions (from Schedule A)12a12,550.pontributions if you take the standard deduction (see instructions)12b280.											
household,	c	Add lines 12a and 12b				0 11100		120		20	. 12	c l	12,830.	
\$18,800If you checked	13	Qualified business income deduct	• •	יייייי דסריייה איז ד	995 or For	n 890				•	. 13			
any box under Standard	14	Add lines 12c and 13									. 14		12,830.	
Deduction,	15	Taxable income. Subtract line 14									. 15		34,082.	
see instructions.													,	

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

Form **1040** (2021)

July Chily	Firr	n's address 🕨 2530 Pebbl	le Creek L	n Cummin	g GA 30041		Firm	s EIN 🕨	30-1017196
Use Only		n's name 🕨 GLOBAL TAX					Phor	ne no. (678)965-9522
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLA	M 02/07/2022	P02083		Self-employed
Paid		parer's name	Preparer's signat			Date	PTIN		Check if:
		one no. (313)610-501		Email address	ANISHREDDY	.729@GMAIL.CO			
Keep a copy for your records.							Ident (see		ection PIN, enter it here
Joint return? See instructions.	Spo	ouse's signature. If a joint return, t	ooth must sian.	Date	MECHANICA Spouse's occupa	AL ENGINEER		inst.) ► IRS ser	nt your spouse an
	Υοι	ur signature		Date	Your occupation		Prote	ection Pl	nt you an Identity N, enter it here
Sign Here		der penalties of perjury, I declare the first declare the set, they are true, correct, and com			1 7 0		,		, ,
		signee's ne ►		Phone no.			nal identi er (PIN) ₽		
Third Party Designee	ins	you want to allow another tructions	•		n with the IRS	. 🕨 🗌 Yes. Co	•		X No
		Estimated tax penalty (see in				38			
Amount You Owe	37 38	Amount you owe. Subtract					. 🖻	37	
A	36	Amount of line 34 you want a						07	
	► d	Account number 0 0 0							
Direct deposit? See instructions.	►b	Routing number 0 7 2							
	35a	Amount of line 34 you want					► □ Savings	35a	3,286.
Refund	34	If line 33 is more than line 24				•	· <u>·</u>	34	3,286.
	33	Add lines 25d, 26, and 32. T					. 🕨	33	7,176.
	32	Add lines 27a and 28 throug						32	
	31	Amount from Schedule 3, lin				31			
	30	Recovery rebate credit. See	instructions .			30			
	29	American opportunity credit		,		29			
	28	Refundable child tax credit or				28			
	С	Prior year (2019) earned inco	ome	. 27c					
	b	Nontaxable combat pay elec	tion	. 27b					
		Check here if you were b January 2, 2004, and you taxpayers who are at least a	a satisfy all the	e other requi	rements for				
qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC)				27a			
If you have a	26	2021 estimated tax payment			37			26	
	d	Add lines 25a through 25c						25d	7,176.
	С	Other forms (see instructions	,						_
	b	Form(s) 1099				25b			
	а	Form(s) W-2				25 a 7	,176.		
	25	Federal income tax withheld	from:						
	24	Add lines 22 and 23. This is	your total tax				. 🕨	24	3,890.
	23	Other taxes, including self-e						23	0.
	22	Subtract line 21 from line 18						22	3,890.
	21	Add lines 19 and 20						21	
	20	Amount from Schedule 3, lin						20	
	19	Nonrefundable child tax cred						19	5,000.
	18	Add lines 16 and 17						18	3,890.
	10	Amount from Schedule 2, lin						17	5,890.
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	3,890.