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

initial foreign control							
Submission Identification Number (SID)							
Taxpayer's name	Social securi	Social security number					
ESWAR ANIL KUMAR MOGILI	383-53	383-53-4959					
Spouse's name	Spouse's soo	Spouse's social security number					
Part I Tax Return Information — Tax Year Ending December 31, 20	 21 (Enter year you a	re authorizino	(.r				
Enter whole dollars only on lines 1 through 5.	21 (2110) your your	additionizmi	9./				
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1 Adjusted gross income		 1 9	1,228.				
2 Total tax		2 1	2 , 991.				
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 1	6,746.				
4 Amount you want refunded to you			3,755.				
5 Amount you owe		5					
Part II Taxpayer Declaration and Signature Authorization (Be sure you	get and keep a cop	y of your ret	urn)				
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in return (original or amended) I am now authorizing. I consent to allow my intermediate service provides send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I auth Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution a payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial unthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancibusiness days prior to the payment (settlement) date. I also authorize the financial institutions involves to receive confidential information necessary to answer inquiries and resolve issues relatives to receive the financial information recessary to answer inquiries and resolve issues relatives to the payment (settlement) and the income tax return (original or an extensional identification number (PIN) below is my signature for the income tax return (original or an extensional identification number (PIN) below is my signature for the income tax return (original or an extensional identification number (PIN) below is my signature for the income tax return (original or an extensional identification number (PIN) below is my signature for the income tax return (original or an extensional identification number (PIN) below is my signature for the income tax return (original or an extensional identification number (PIN) below is my signature for the income tax return (original or an extensional identification number (PIN) below is my signature for the income tax return (original or an extensional identification number (PIN) the extensional identification in the payment (pinancial institutions in the payment (pinancial institutions in the	der, transmitter, or electriason for rejection of the transcrize the U.S. Treasury a account indicated in the trail to the transcrize the u.S. Treasury a account indicated in the trail to the to terminate the authorizablation requests must be obved in the processing or ed to the payment. I fur	onic return original ransmission, (b) and its designate ax preparation seentry to this acceptation. To revoke received no laft the electronic pather acknowledges.	nator (ERO) the reason d Financial oftware for count. This (cancel) a ater than 2 payment of ge that the				
Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only			7				
	generate my PIN	4 9 5 9	as my				
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Š Én	ter five digits, but n't enter all zeros					
I will enter my PIN as my signature on the income tax return (original or amend if you are entering your own PIN and your return is filed using the Practitioner below.							
Your signature ▶	Date ▶						
Spouse's PIN: check one box only			_				
· _	generate my PIN		as my				
ERO firm name	• -	ter five digits, but	_				
signature on the income tax return (original or amended) I am now authorizing.	do	n't enter all zeros					
I will enter my PIN as my signature on the income tax return (original or amend if you are entering your own PIN and your return is filed using the Practitioner below.							
Spouse's signature ►	Date ►						
Practitioner PIN Method Returns Only—contin							
Part III Certification and Authentication — Practitioner PIN Method Only	y						
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5 8 7 2 7 Don't ent	8 6 1 9 er all zeros	8 9				
I certify that the above numeric entry is my PIN, which is my signature for the electronic individua authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Pr	al income tax return (orig I am submitting this retu	inal or amended urn in accordance					
ERO's signature ►	Date ►						
ERO Must Retain This Form — See Instru Don't Submit This Form to the IRS Unless Reque							
שטוו ו טעטווווג דיווא רטוווו נט נוופ ואס Uniess Keque	3160 10 D0 30						

E1040 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.

Filing Status Check only one box.	If yo	Single Married filing jointly uchecked the MFS box, enter the notion is a child but not your dependent	ame of	ied filing separately your spouse. If you	` ′	_		` ,	_	, 0	` , ` ,
Your first name and middle initial Last name Yo							Your social security number				
ESWAR A	NIL 1	KUMAR	MOG	ILI					383-53-4959		
If joint return, s	pouse's	s first name and middle initial	Last na	ame					Spouse's social security number		
	•	er and street). If you have a P.O. box, see	instruct	tions.				Apt. no.			on Campaign
11349_C								303		here if you, if filing joir	or your ntly, want \$3
ORLANDO	ost offi	ce. If you have a foreign address, also co						code 1786	to go to	0,	Checking a
Foreign country	y name			Foreign province/stat	e/coun	ty	For	eign postal code	your tax or refund. You Spou		. Spouse
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of a	ny fina	ancial interes	st in ar	ny virtual curre	ncy?	☐ Yes	⊠ No
Standard Deduction	_	eone can claim:				'	it				
Age/Blindness	s You:	: Were born before January 2, 1	957	Are blind S	oouse	: Was b	orn be	efore January 2	2, 1957	☐ Is b	lind
Dependent	s (see	instructions):		(2) Social secur	ity	(3) Relation		(4) ✓ if q	ualifies fo	r (see instru	ıctions):
If more	(1) Fi	irst name Last name	number			to you		Child tax c	redit	Credit for ot	her dependents
than four											
dependents, see instruction	s										
and check here ► □											
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1	1	01,708.
Attach	2a		2a ်		b T	axable inter	est		. 2b		
Sch. B if	3a	Qualified dividends	3a			Ordinary divid			. 3b	,	
required.	4a	IRA distributions	4a	,					. 4b)	
	5a	Pensions and annuities	5a	b Taxable amount					. 5b)	
Standard	6a	Social security benefits	b Taxable amount						. 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, lin								-	10,480.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income									91,228.
Married filing	10	Adjustments to income from Sche	dule 1,	line 26					. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is your adjusted gross income							▶ 11		91,228.
widow(er), \$25,100	12a	-									
Head of	b	Charitable contributions if you take the standard deduction (see instructions) 12b 300.									
household, \$18,800	С	Add lines 12a and 12b	ld lines 12a and 12b							С	12,850.
If you checked	13	Qualified business income deducti	on fron	n Form 8995 or For	m 899	95-A			. 13		
any box under Standard	14	Add lines 12c and 13							. 14		12,850.
Deduction,	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less	s, ente	er -0			. 15	5	78 , 378.

	16	Tax (see instructions). Check if any from Form(s): 1	8814 2 4972	3 🗌		16	12,991.					
	17	Amount from Schedule 2, line 3				17						
	18	Add lines 16 and 17				18	12,991.					
	19	Nonrefundable child tax credit or credit for other dep	pendents from Schedule	e 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	12,991.					
	23	Other taxes, including self-employment tax, from Sc	hedule 2, line 21 .			23	0.					
	24	Add lines 22 and 23. This is your total tax				24	12,991.					
	25	Federal income tax withheld from:					·					
	а	Form(s) W-2		25a 16	,746.							
	b	Form(s) 1099		25b								
	С	Other forms (see instructions)		25c								
	d	Add lines 25a through 25c				25d	16,746.					
	26	2021 estimated tax payments and amount applied fr				26	·					
If you have a Lagrangian qualifying child,	27a	Earned income credit (EIC)	Mo	27a								
attach Sch. EIC.		Check here if you were born after January 1,										
		January 2, 2004, and you satisfy all the other	requirements for									
		taxpayers who are at least age 18, to claim the EIC.										
	b	' '	27b	_								
	С	, , ,	27c									
	28	Refundable child tax credit or additional child tax cred		28								
	29	American opportunity credit from Form 8863, line 8		30								
	30	Recovery rebate credit. See instructions										
	31	Amount from Schedule 3, line 15										
	32	Add lines 27a and 28 through 31. These are your tot	32	16 746								
	33	Add lines 25d, 26, and 32. These are your total pays			. •	33	16,746.					
Refund	34	If line 33 is more than line 24, subtract line 24 from li		•	 ▶ □	34	3,755.					
D: 1.1 '10	35a	Amount of line 34 you want refunded to you. If Form	35a	3,755.								
Direct deposit? See instructions.	▶b	Routing number 0 3 1 2 0 2 0 8 4										
	► d	Account number 3 8 3 0 1 4 0 1 6 1 5 0										
A	36	-				07						
Amount You Owe	37	Amount you owe. Subtract line 33 from line 24. For		1 1	. ▶	37						
	38	Estimated tax penalty (see instructions)		38								
Third Party Designee		you want to allow another person to discuss this ructions		. —	mnlete h	elow	X No					
Designee			Phone		onal identif							
		ee ►	•									
Sign		er penalties of perjury, I declare that I have examined this ret										
Here	beli	of, they are true, correct, and complete. Declaration of prepare		, ,								
11010	You	r signature Date	Your occupation		1		it you an Identity N, enter it here					
Joint return?			SOFTWARE	ENGINEER		nst.) ▶	N, enter it fiere					
See instructions.	Spo	use's signature. If a joint return, both must sign. Date					it your spouse an					
Keep a copy for					Identi	ty Prote	ection PIN, enter it here					
your records.				(see i	nst.) ►							
		ne no. (626) 417-1490 Email ad	ddress EASHWAR.92	2@GMAIL.COM		-						
Paid		parer's name Preparer's signature		Date	PTIN P02082		Check if:					
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SA	RAM SAGAR GUPTA TALLAM 04/02/2022				Self-employed					
Use Only		o's name ► GLOBAL TAXES LLC			Phon	ne no. (678) 965-9522						
	Firr	n's address ▶ 2530 Pebble Creek Ln Cun	mming GA 30041		Firm'	s EIN 🕨						
Go to www.irs.go	ov/Form	1040 for instructions and the latest information.	BAA	REV 03/26/22 PRO			Form 1040 (2021)					

Form 1040 (2021)

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SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment

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. Sequence No. 01

Your social security number

ESWAR ANIL KUMAR MOGILI 383-53-4959 Part I Additional Income Taxable refunds, credits, or offsets of state and local income taxes 1 2a **b** Date of original divorce or separation agreement (see instructions) 3 3 4 4 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach 5 -10,480.6 6 7 7 Other income: 8 8a 8b 8c **d** Foreign earned income exclusion from Form 2555 8d e Taxable Health Savings Account distribution 8e 8f 8a **h** Prizes and awards 8h i Activity not engaged in for profit income 8i 8i 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 8k I Olympic and Paralympic medals and USOC prize money (see 81 m Section 951(a) inclusion (see instructions) 8_m Section 951A(a) inclusion (see instructions) 8n o Section 461(I) excess business loss adjustment 80 **p** Taxable distributions from an ABLE account (see instructions). **q8 z** Other income. List type and amount ▶ 9 Total other income. Add lines 8a through 8z 9 Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 10

-10,480.

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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	>		ı
С	Date of original divorce or separation agreement (see instructions)	•		ı
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			ı
а	Jury duty pay (see instructions)	24a		ı
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		ı
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		ı
d	Reforestation amortization and expenses	24d		ı
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		ı
f	Contributions to section 501(c)(18)(D) pension plans	24f		ı
g	Contributions by certain chaplains to section 403(b) plans	24g		ı
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		ı
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		ſ
j	Housing deduction from Form 2555	24j		ı
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		ſ
Z	Other adjustments. List type and amount ▶	24z		ı
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	<u> 10a</u> .	26	I

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

Department of the Treasury Internal Revenue Service (99)

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

Attachment Sequence No. 13

Name(s)	shown on return							·	Your soci	al securit	y number
ESWA:	R ANIL KUMAR MC								383-5		
Part	Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use										
	Schedule C. See	instructions. If you are	e an individual, rep	ort far	m rental	income	or loss f	rom Form 48	35 on page	2, line 4	0.
A Did	you make any payme	nts in 2021 that wou	uld require you to	o file F	orm(s) 1	1099? 8	See inst	ructions .		. 🗆 ነ	∕es ⊠ No
B If "	Yes," did you or will yo	ou file required Forr	n(s) 1099?							. 🗆 ነ	∕es 🗌 No
1a	Physical address of	each property (stree	et, city, state, ZIF	ode	e)						
Α	H.NO-2, SRINIVA	SA ANNAPURNA	NILAYAM, N	ARAS.	ARAOP	ET GU	NTUR	ANDHRA I	PRADESH	IN 52	22601
В											
С											
1b	Type of Property	2 For each rent	al real estate pro	perty l	listed		Fair	Rental	Personal Use		QJV
	(from list below)	above, report	the number of fa	ir rent	tal and			Days	Day	S	
A	3	if you meet th	days. Check the le requirements to	o file a	as a	Α		365	0		
В		qualified joint	venture. See inst	tructio	ns.	В					
C						С					
	of Property:										
_	le Family Residence	3 Vacation/Sho	ort-Term Rental	5 La	ınd		7 Self-	Rental			
	i-Family Residence	4 Commercial		6 Ro	yalties		8 Othe	r (describe)			
Incom	e:		Properties:			Α		В	3		С
	Rents received			3			620.				
4	Royalties received .			4							
Expen											
	Advertising			5							
	Auto and travel (see in	·		6							
	Cleaning and mainter			7		1,	650.				
8	Commissions			8							
9	Insurance			9							
10	Legal and other profe			10							
11	Management fees .			11		1,	990.				
	Mortgage interest pai	·		12							
	Other interest			13							
	Repairs			14			150.				
	Supplies			15		2,	360.				
	Taxes			16							
	Utilities			17		2,	950.				
	Depreciation expense			18							
19	Other (list) ► Total expenses. Add			19			100				
				20		11,	100.				
	Subtract line 20 from										
	result is a (loss), see		out if you must			1.0	480.				
				21		-10 ,	400.				
22	Deductible rental real			00	,	1.0	400 \	,	\	,	\
	on Form 8582 (see in Total of all amounts re	·		22	Į(480.) 23a	(620.	()
		•							020.		
	Total of all amounts re Total of all amounts re	•					23b 23c				
	Total of all amounts re						23d				
	Total of all amounts re	•					23a 23e	1	1,100.		
	Income. Add positive	•							. 24		
	Losses. Add royalty lo				-			al locces har		(10,480.)
										\	10,100.)
	Total rental real esta here. If Parts II, III, I								I		
	Schedule 1 (Form 104								. 26		-10,480.