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)

Тахрау	/er's name	Social securit	ty numb	er				
NIF	KHIL CHEPURI	865-79-	-4100)				
Spouse	o's name	Spouse's soc	ial secu	rity number				
Par	Part I Tax Return Information – Tax Year Ending December 31, 2021 (Enter year you are authorizing.)							
Enter	whole dollars only on lines 1 through 5.	<u> </u>						
Note	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income		1	65,246.				
2	Total tax		2	7,271.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	8,883.				
4	Amount you want refunded to you		4	3,012.				
5	Amount you owe		5					
Dar	Part II Taxpayor Declaration and Signature Authorization (Be sure you get and keep a copy of your return)							

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

Under penalties of perjury, 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	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	
				ERO firm name		Er

9	4	1	0	0	as mv
			gits, all ze		asiny

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 o	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 E	ate 🕨								
Practitioner PIN Method Returns Only—continue below									
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	7			6 all zer	 9 8	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 Retain Don't Submit This Form	n This Form — See to the IRS Unless							
For Paperwork Reduction Act Notice, see your tax return instr	uctions. BAA	REV 02/11/22 PRO	Form 8879 (Rev. 01-2021)					

1040		Artment of the Treasury-Internal Revenue Servi		⁽⁹⁹⁾ 202	21	OMB No. 1545	-0074	IRS Use	Only	—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single D Married filing jointly understand filing jointly understand the MFS box, enter the national source dependent on is a child but not your dependent of the source depen	ame of y	ed filing separately (/our spouse. If you				•	'			. , . ,
Your first name			Last nar	me						Your so	cial securi	ty number
NIKHIL	ana m		CHEP								79-410	-
	pouse's	first name and middle initial	Last nar									curity number
Home address		r and street). If you have a P.O. box, see LN	instructio	DNS.			/	Apt. no.		Check	here if you,	
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	ite	ZIP co	ode				ntly, want \$3 Checking a
ALLEN					T	X	750)13		box bel	low will not	change
Foreign country	/ name		F	Foreign province/state	/coun	ty	Foreię	gn postal co	ode	your ta	x or refund.	
At any time du	ring 20	021, did you receive, sell, exchange,	or othe	rwise dispose of ar	iy fina	ancial interest i	n any	virtual cu	urrer	ncy?		X No
Standard Deduction Age/Blindness		eone can claim: You as a de Spouse itemizes on a separate return Were born before January 2, 19	n or you	were a dual-status		_	n befo	ore Janua	ary 2	., 1957	Is bl	lind
Dependent				(2) Social securit		(3) Relationsh					or (see instru	uctions):
If more		rst name Last name		number	.,	to you		Child ta			1	ther dependents
than four										[
dependents, see instruction											[
and check	s							[
here 🕨 🗌								[<u> </u>	
	1	Wages, salaries, tips, etc. Attach F	Form(s) V	N-2						. 1		72,254.
Attach Sch. B if	2a	Tax-exempt interest	2a		b٦	axable interes	t.			2b)	
required.	3a	Qualified dividends	3a		b (Ordinary divide	nds .			. 3b)	
	4a	IRA distributions	4a		b٦	axable amoun	t			. 4b)	
	5a	Pensions and annuities	5a		b٦	axable amoun	t	• •	• •	. 5b)	
Standard Deduction for —	6a		6a			axable amoun	t	• •	• _	. 6b		
Single or	7	Capital gain or (loss). Attach Schee		required. If not rec	uirec	l, check here	• •			7		
Married filing separately,	8	Other income from Schedule 1, line					• •	• •	• •	8	_	<u>-7,008.</u>
\$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a		-	ome		• •	• •	.	9		65,246.
 Married filing jointly or 	10	Adjustments to income from Sche			• •		• •		• •	10		<u></u>
Qualifying widow(er),	11	Subtract line 10 from line 9. This is					· ·		. !	11		65,246.
\$25,100	12a	Standard deduction or itemized			,	12	-	12,				
 Head of household, 	b	Charitable contributions if you take	the stan		e inst	ructions) 12	0		300			10 050
\$18,800	C 12	Add lines 12a and 12b Qualified business income deducti					• •		• •	. 12		12,850.
 If you checked any box under 	13 14	Add lines 12c and 13					• •	• •	• •	. 13		12,850.
Standard Deduction,	14 15	Taxable income. Subtract line 14		e 11 lf zero or less			• •	• •	• •	. 14	-	52,396.
see instructions.					, 0/10		• •		• •		<u>'</u>	52,590.

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

Form **1040** (2021)

Form 1040 (2021	1)				Page 2
	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🗌 4972 3 🗌		16	7,271.
	17	Amount from Schedule 2, line 3		17	
	18	Add lines 16 and 17		18	7,271.
	19	Nonrefundable child tax credit or credit for other dependents 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	7,271.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21		23	0.
	24	Add lines 22 and 23. This is your total tax	. 🕨	24	7,271.
	25	Federal income tax withheld from:			
	а	Form(s) W-2	,883.		
	b	Form(s) 1099			
	с	Other forms (see instructions)			
	d	Add lines 25a through 25c		25d	8,883.
	26	2021 estimated tax payments and amount applied from 2020 return		26	· · · · ·
If you have a qualifying child,	27a	NO I I			
attach Sch. EIC.		Check here if you were born after January 1, 1998, and before			
		January 2, 2004, and you satisfy all the other requirements for			
		taxpayers who are at least age 18, to claim the EIC. See instructions ►			
	b	Nontaxable combat pay election 27b			
	С	Prior year (2019) earned income 27c			
	28	Refundable child tax credit or additional child tax credit from Schedule 8812 28		-	
	29	American opportunity credit from Form 8863, line 8		-	
	30		,400.	_	
	31	Amount from Schedule 3, line 15			
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable cred		32	1,400.
	33	Add lines 25d, 26, and 32. These are your total payments	. 🕨	33	10,283.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	· .	34	3,012.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here		35a	3,012.
Direct deposit?	►b		avings		
See instructions.	►d	Account number 3 2 5 1 0 1 0 1 7 2 4 0			
	36	Amount of line 34 you want applied to your 2022 estimated tax			
Amount	37	Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions	. 🕨	37	
You Owe	38	Estimated tax penalty (see instructions)			
Third Party	Do	o you want to allow another person to discuss this return with the IRS? See			_
Designee	ins	structions	mplete l	below.	X No
			nal identi er (PIN) 🖡		
<u></u>			. ,		
Sign		Ider penalties of perjury, I declare that I have examined this return and accompanying schedules and statemen lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information			
Here		ur signature Date Your occupation			nt you an Identity
					N, enter it here
Joint return?		SOFTWARE ENGINEER	(see	inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, both must sign. Date Spouse's occupation			nt your spouse an
Keep a copy for your records.	·			· ·	ection PIN, enter it here
your rocordo.			,	inst.) 🕨	
		ione no. (510) 458-9197 Email address NIKHILCHEPURI1@GMMAIL.CO			
Paid			PTIN		Check if:
Preparer	SYAM		P0208		Self-employed
Use Only	-	m's name GLOBAL TAXES LLC	Phor	ne no. (678)965-9522
	Firi	m's address ► 2530 Pebble Creek Ln Cumming GA 30041	Firm	's EIN ▶	· 30-1017196
.	-	n1040 for instructions and the latest information. BAA REV 02/11/22 PRO			Form 1040 (2021)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

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 2 Attachment

Internal Revenue Service		Sequence No. 01	
Name(s) shown on Fo	Your soc	al security number	
NIKHIL CHEPURI	865-79	-4100	
Part I Addition	onal 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	-7,008.
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	-7,008.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	ile 1 (Form 1040) 2021

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	►		
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 81	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	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	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	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 here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line		26	

REV 02/11/22 PRO

(Form 1040)		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)												
Department of the Treasury Internal Revenue Service (99)		► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.												
		► Go to www.irs.gov/ScheduleE for instructions and the latest information.									Sequence No. 13			
Name(s)	shown on return											al security number		
	IL CHEPURI								865-7					
Part			om Rental Real Estate and R	-					• •			, use		
			uctions. If you are an individual, re in 2021 that would require you	-										
			le required Form(s) 1099?		.,									
<u>- Б</u> п 1а			n property (street, city, state, Z							. [] 1	es			
A			<u> </u>			JCANA	TN 5	05001						
B	1101 NO.2	PLOT NO:2-10-300 JYOTHI NAGAR, KARIMNAGAR, TELANGANA IN 505001												
C														
1b	Type of Pro	pertv 2	For each rental real estate pr	ronarty I	istad		Personal	l Use						
1.0	(from list be		above, report the number of	fair rent	ir rental and		Fair Rental Days		Days		QJV			
Α	3	personal use days. Check the of if you meet the requirements to qualified joint venture. See inst			QJV box only —		355		0					
В														
С						С					[
Туре о	of Property:	I												
1 Sing	le Family Resid	lence	3 Vacation/Short-Term Renta	l 5 La	nd		7 Self-	Rental						
2 Mul	ti-Family Reside	ence	4 Commercial	6 Ro	yalties		8 Othe	r (describe)						
ncom	e:		Properties	5:		Α		B	}		С			
3	Rents received	1		3			480.							
4	Royalties recei	ved		4										
Expen														
5	Advertising .			5			80.							
6	Auto and trave	l (see instru	uctions)	6			220.							
7	Cleaning and r	naintenanc	e	7			600.							
8	Commissions.			8										
9	Insurance			9										
10	•	•	onal fees	10										
11	0			11		1,	000.							
12		•	banks, etc. (see instructions)	12										
13				13										
14	•			14			650.							
15				15		1,	588.							
16				16			0.5.0							
17				17		1,	350.							
18	•	xpense or	depletion	18										
19 00	Other (list) ►		E through 10				100							
20	•		s 5 through 19	20		/,	488.							
21	result is a (loss	s), see insti	3 (rents) and/or 4 (royalties). I ructions to find out if you mus			-7,	008.							
22			ate loss after limitation, if any ctions)	[,] 22	(7,0)08.)	()	(
23a		•	rted on line 3 for all rental prop				23a	<u>,</u>	480.	`				
b		•	rted on line 4 for all royalty pro				23b							
c		•	rted on line 12 for all propertie	•			23c							
d		•	rted on line 18 for all propertie				23d							
е		•	rted on line 20 for all propertie				23e		7,488.					

Supplemental Income and Loss

SCHEDULE E

For Pa	perwork Reduction Act Notice, see the separate instructions. NPA -7,008.	Sc	hedule E (Form 1040) 2021
	Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .	26	-7,008.
	here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on		
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result		
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here .	25	(7,008.)
24	Income. Add positive amounts shown on line 21. Do not include any losses	24	
C		00.	

OMB No. 1545-0074