## 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	y number						
SUBBIAH VIMAL KUMAR DAVID	-6649						
Spouse's name	al security number						
RAJASUNDARI KESAVAN 977-92-7569							
Part I Tax Return Information — Tax Year Ending December 31, 2021 (En	ter year you ar	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		<b>1</b> 138,	074.				
2 Total tax		2 16,	219.				
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 29,	859.				
4 Amount you want refunded to you		4 13,	640.				
5 Amount you owe		5					
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	d keep a copy	of your return	1)				
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I al 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 instit authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termin payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation in 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 electro rejection of the tra e U.S. Treasury are indicated in the ta ution to debit the nate the authoriza equests must be the processing of e payment. I furtle	nic return originator ansmission, (b) the nd its designated Fix entry to this accountion. To revoke (careceived no later the electronic paysher acknowledge to	r (ERO) reason inancial vare for nt. This ancel) a than 2 ment of hat the				
Taxpayer's PIN: check one box only							
X   lauthorize GLOBAL TAXES LLC to enter or general	te my PIN	6 6 4 9	as my				
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, but 't enter all zeros	as my				
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 <b>and</b> your return is filed using the Practitioner PIN me below.							
Your signature ► Date ►							
Spouse's PIN: check one box only							
	to 1001 DINI 2	7 5 6 9					
X I authorize GLOBAL TAXES LLC to enter or genera		7 5 6 9 er five digits, but	as my				
signature on the income tax return (original or amended) I am now authorizing.		i'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 <b>and</b> 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							
<b>ERO's EFIN/PIN.</b> 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 income 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 <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of	bmitting this retu	rn in accordanće v					
ERO's signature ▶ Date ▶							
ERO Must Retain This Form — See Instructions							

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

### **£1040**

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

2021

OMB No. 1545-0074

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

Filing Status Check only one box.	If yo	Single X Married filing jointly under the new son is a child but not your dependent	ame of	ied filing separately (	,			` '	_	, ,	` , ` ,	
Your first name and middle initial Last name You							Your social security number					
SUBBIAH VIMAL KUMAR DAVI					ID				476-	41-664	9	
If joint return, s	pouse's	s first name and middle initial	Last n	ame					Spouse	's social se	curity number	
RAJASUN	DARI		KES	AVAN					977-92-7569			
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.				Apt. no.	Preside	ntial Electi	on Campaign	
14636 M	ARTII	N CREEK CV							Check	here if you,	or your	
		ce. If you have a foreign address, also co	mplete	e spaces below. State ZIP code				code	spouse if filing jointly, want \$3 to go to this fund. Checking a			
ROANOKE			TX 7				76	262				
Foreign country	y name			Foreign province/state/county Foreign p					box below will not change your tax or refund.  You Spou			
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of ar	y fina	ancial interest	in an	y virtual curre	ncy?	Yes	⊠ No	
Standard Deduction	_	eone can claim:										
Age/Blindness	You:	: Were born before January 2, 1	957	Are blind Sp	ouse	: Was bo	rn be	fore January 2	2, 1957	☐ Is b	lind	
Dependents	s (see	instructions):		(2) Social securit	у	(3) Relations	hip	<b>(4) ✓</b> if q	ualifies fo	r (see instru	uctions):	
If more	(1) F	irst name Last name		number		to you			redit	Credit for ot	her dependents	
than four												
dependents, see instruction												
and check	5 —											
here ▶												
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1	1	49,074.	
Attach	2a	Tax-exempt interest	2a		b T	axable interes	st		. 2b	)		
Sch. B if	За	Qualified dividends	3a		b Ordinary dividends b Taxable amount			ds		)		
required.	4a	IRA distributions	4a						. 4b	)		
	5a	Pensions and annuities	5a		<b>b</b> T	axable amour	nt .		. 5b	)		
Standard	6a	Social security benefits	6a		<b>b</b> T	axable amour	nt .		. 6b	)		
Deduction for —	7	Capital gain or (loss). Attach Scheo	dule D	if required. If not req	uired	l, check here		▶ [	7			
Single or Married filing	8	Other income from Schedule 1, lin	e 10						. 8	-	11,000.	
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.								38,074.	
\$12,550 Married filing	10	Adjustments to income from Sche		•		. 10						
jointly or Qualifying	11	Subtract line 10 from line 9. This is			me				▶ 11		38,074.	
widow(er),	12a	Standard deduction or itemized	-			12	2a	25,10	0.			
\$25,100 • Head of	b	Charitable contributions if you take		•	,		-	60				
household,	c					· · · ·			. 12	С	25,700.	
\$18,800 If you checked	13	Qualified business income deducti			1 899	95-A			. 13			
any box under Standard	14	Add lines 12c and 13							. 14	_	25,700.	
Deduction,	15	<b>Taxable income.</b> Subtract line 14	from li	ne 11. If zero or less	ente	er -0			. 15		12,374.	

Form 1040 (202	1)				Page <b>2</b>					
	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3		. 16	16,219.					
	17	Amount from Schedule 2, line 3	<del></del> .	. 17						
	18	Add lines 16 and 17		. 18	16,219.					
	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	16,219.					
	23	Other taxes, including self-employment tax, from Schedule 2, line 21		. 23	0.					
	24	Add lines 22 and 23. This is your <b>total tax</b>		▶ 24	16,219.					
	25	Federal income tax withheld from:								
	а	Form(s) W-2	29,85	9.						
	b	Form(s) 1099								
	С	Other forms (see instructions)								
	d	Add lines 25a through 25c		. <b>25d</b>	29,859.					
If you have a	26	2021 estimated tax payments and amount applied from 2020 return		. 26						
qualifying child,	27a	Earned income credit (EIC)								
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 ▶ □								
	h	Nontaxable combat pay election								
	b	Prior year (2019) earned income								
	с 28	Refundable child tax credit or additional child tax credit from Schedule 8812 28								
	29			-						
	30	American opportunity credit from Form 8863, line 8		-						
	31	•		-						
	32	Amount from Schedule 3, line 15								
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	29,859.						
	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you of	. 34	13,640.						
Refund	35a	Amount of line 34 you want <b>refunded to you.</b> If Form 8888 is attached, check here	. 34 35a	13,640.						
Direct deposit?	⊳ b	Routing number 2 1 1 1 3 9 1 8 2 5 C Type: X Checking		13,010.						
See instructions.	▶d	Account number 4 4 2 3 2 9 9 9	ing ∐ Savin	igs						
	36	Amount of line 34 you want applied to your 2022 estimated tax <b>3</b> 6	_i							
Amount	37	Amount you owe. Subtract line 33 from line 24. For details on how to pay, see insti	ructions	▶ 37						
You Owe	38	Estimated tax penalty (see instructions)	detions .	31						
Third Party	Do	you want to allow another person to discuss this return with the IRS? See								
Designee	ins	structions	Yes. Comple		X No					
		rsignee's Phone me ▶ no. ▶	Personal ic number (Pl	dentification						
C:		der penalties of perjury, I declare that I have examined this return and accompanying schedules a			t of my knowledge and					
Sign		lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on a								
Here	You	ur signature Date Your occupation		If the IRS ser	nt you an Identity					
	k				N, enter it here					
Joint return?	<b>L</b>	SOFTWARE ENGIN	DDIC	(see inst.) ▶						
See instructions. Keep a copy for	Spe	ouse's signature. If a joint return, <b>both</b> must sign. Date Spouse's occupation			nt your spouse an ection PIN, enter it here					
your records.		HOME MAKER		(see inst.) ▶	Scholl in, enter it here					
	Pho	one no. (612)814-5621 Email address VIMAL.DAVID@GM	AIL.COM							
Deid	Pre	eparer's name Preparer's signature Date	PTIN	١	Check if:					
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/2	2/2022 P02	082703	Self-employed					
Preparer	Firr	m's name ► GLOBAL TAXES LLC	Phone no. (	678)965-9522						
Use Only	Firr	m's address ▶ 2530 Pebble Creek Ln Cumming GA 30041		Firm's EIN	30-1017196					
Go to www.irs.g	ov/Forn	m1040 for instructions and the latest information.	/12/22 PRO		Form <b>1040</b> (2021)					

# SCHEDULE 1 (Form 1040)

#### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2021

Attachment

Department of the Treasury Internal Revenue Service

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

SUBBIAH VIMAL KUMAR DAVID & RAJASUNDARI KESAVAN

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No. 01 Your social security number

476-41-6649

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
<b>2</b> a	Alimony received	<b>2</b> a		
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, tru Schedule E			-11,000.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	<b>8a</b> (	)	
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 10 1040-NR, line 8			-11,000.

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis go 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)			
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 ▶24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to incom			
	here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a.		26	

# 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.

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

OMB No. 1545-0074

2021

Attachment
Sequence No. 13

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

Your social security number

SUBB		R DAVID & RAJASUNDARI KES								L-664:	
Part		s From Rental Real Estate and Roy instructions. If you are an individual, repo									
		ents in 2021 that would require you to									'es 🔀 No
B If "	Yes," did you or will y	ou file required Form(s) 1099?								. 🗌 Y	'es 🗌 No
1a		each property (street, city, state, ZIP		e)							
Α	MOOSAPET HYDEA	ARABAD TELANGANA IN 52246	3								
В											
С		T.									
1b	1	ype of Property 2 For each rental real estate property listed Fair Rental Personal Use							QJV		
	(from list below)	above, report the number of fai personal use days. Check the	<b>2JV</b> b	ai and ox only <sub>i</sub>			ays		Days		
A	2	if you meet the requirements to qualified joint venture. See insti	file a	is a	Α		365			0	
В		- quaimed joint venture. See insti	luctio	115.	В						
С	- ( D				С						
	of Property:	2 Vacation/Short Torm Dantal	E la	nd		7 Colf	Dontol				
-	gle Family Residence ti-Family Residence	3 Vacation/Short-Term Rental				7 Self-					
Z Mul		4 Commercial Properties:	o no	yalties		8 Otne	<u>r (describe)</u> <b>B</b>				С
3			3		Α	600.		•			
4			4			000.					
Expen			7								
5			5								
6		nstructions)	6								
7	-	nance	7		1	,600.					
8			8			, , , , ,					
9			9								
10		essional fees	10								
11			11		1	,000.					
12		id to banks, etc. (see instructions)	12			, , , , , ,					
13			13								
14			14		2	,500.					
15			15		2	,500.					
16			16								
17	Utilities		17		4	,000.					
18	Depreciation expense	e or depletion	18								
19	Other (list)		19								
20	Total expenses. Add	lines 5 through 19	20		11	,600.					
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If									
		instructions to find out if you must									
	file <b>Form 6198</b>		21		-11	,000.					
22		I estate loss after limitation, if any,		,			,			,	,
	·	nstructions)	22	(	11,	000.)	(		)(		)
23a		eported on line 3 for all rental proper				23a		6	00.		
b		eported on line 4 for all royalty proper				23b					
C		eported on line 12 for all properties				23c					
d		eported on line 18 for all properties				23d	-1	1 (			
e 24		eported on line 20 for all properties	 Hadi		 looss-	23e	1	1,6	_		
24 25		e amounts shown on line 21. <b>Do not</b> esses from line 21 and rental real estate		,			· · · ·		24	1	11 000 \
25									25 (		11,000.)
26		ate and royalty income or (loss).									
		IV, and line 40 on page 2 do not a		-				UII	26		-11.000.