## 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

Subn	nission Identification Number (SID)				
Taxpay	yer's name	Social securit	y number		
RAF	KESH NADENDLA	892-72-	-8299		
Spous	e's name	Spouse's soc	ial security number		
Par	Tax Return Information — Tax Year Ending December 31, 2021 (Enter	⊥ r year you a	re autho	rizing.)	
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	76 <b>,</b> 81	
2	Total tax		2	9,82	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12,33	
4	Amount you want refunded to you		4	3,40	
5	Amount you owe		5		
Par	Taxpayer Declaration and Signature Authorization (Be sure you get and I rependities of perjury, I declare that I have examined a copy of the income tax return (original or amended				
to sen for an Agent payme author payme busine taxes persor Electre	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmording my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejuy delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutionization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requess days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the particular information in the set of the particular information in the payment (approximation in the payment (approxim	ection of the tr .S. Treasury ar icated in the ta on to debit the e the authoriza- uests must be processing of payment. I furt	ansmission and its design ax preparate entry to the ation. To re- received the electron her ackno	n, (b) the rea gnated Finar- tion software is account evoke (cance no later tha onic paymer wledge that	
Taxp	ayer's PIN: check one box only	2	8 2 9	9 9	
	I authorize GLOBAL TAXES LLC to enter or generate signature on the income tax return (original or amended) I am now authorizing.	my PIN Lent	er five digit n't enter all	s, but	
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methoelow.				
Your	signature ▶ Date ▶				
Spou	se's PIN: check one box only				
[	I authorize to enter or generate	mv PIN		as	
_	ERO firm name		er five digit		
	signature on the income tax return (original or amended) I am now authorizing.	dor	n't enter all	zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.				
Spou	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part	Certification and Authentication — Practitioner PIN Method Only				
ERO'	s <b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8		8 6 1 er all zeros	9 8 9	
autho	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income to rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS <i>e-file</i> Providers of In	nitting this retu	rn in acco	rdance with	
FR∩'	s signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				

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

### **E1040**

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 Married filing jointly [ ou checked the MFS box, enter the reson is a child but not your depender	name of									
Your first name	and m	iddle initial	Last na	ame					You	social s	ecurit	y number
RAKESH				ENDLA					89:	892-72-8299		
If joint return, spouse's first name and middle initial				ame					Spor	Spouse's social security number		
Home address	,	er and street). If you have a P.O. box, see AVE	instruct	ions.				Apt. no.	Che	ck here i	f you,	
City, town, or p		ce. If you have a foreign address, also co	omplete s					ZIP code 07306		spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change		
Foreign countr	y name			Foreign province/sta	te/coun	ty	Fore			your tax or refund.		
At any time du	ıring 20	021, did you receive, sell, exchange	, or othe	erwise dispose of a	any fina	ancial intere	st in an	y virtual cur	rency?		Yes	⊠ No
Standard Deduction		<b>leone can claim:</b> You as a de Spouse itemizes on a separate retu					nt					
Age/Blindnes	s You:	: Were born before January 2,	1957 [	Are blind	pouse	: Was I	born be	efore Januar	y 2, 195	57	ls bli	ind
Dependent	,	instructions): irst name Last name		(2) Social security (3) Relationship to you				(4) (4) √ i Child tax	f qualifie: x credit	1 '		ctions): ner dependents
than four											[	<u> </u>
dependents, see instruction	e										[	<u> </u>
and check here ▶ □									]		[	<u>]</u>
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1		33,766.
Attach	2a	Tax-exempt interest	2a		b T	axable inter	est		. Г	2b		
Sch. B if	За	Qualified dividends	За		<b>b</b> Ordinary dividends				. Г	3b		
required.	4a	IRA distributions	4a		<b>b</b> Taxable amount .			nt		4b		
	5a	Pensions and annuities	5a		b T	axable amo	unt .		. [	5b		
Standard	6a	Social security benefits	6a		b T	axable amo	unt .		. [	6b		
Deduction for—	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							· 🖂 🛚	7		
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, lir	ne 10		٠				. [	8	_	-6 <b>,</b> 950.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								9		76,816.
Married filing	10	Adjustments to income from Schedule 1, line 26								10		
jointly or Qualifying	11	Subtract line 10 from line 9. This is your adjusted gross income							▶ □	11	7	76,816.
widow(er), \$25,100	12a	Standard deduction or itemized	•	-			12a	12,5	50.			
\$25,100 • Head of	b	Charitable contributions if you take		,	,	ructions)	12b		00.			
household, \$18,800	С	Add lines 12a and 12b							.	12c	1	12,850.
If you checked	13	Qualified business income deduct	tion fron	n Form 8995 or Fo	rm 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 lir	ne 11. If zero or les	s, ente	er -0			.	15		63,966.

	16	Tax (see instructions). Check if any from Form	(s): <b>1</b> 8814	4 <b>2</b> 4972	3 🗌			16	9,823.
	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	9,823.
	19	Nonrefundable child tax credit or credit for o	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	9,823.
	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	9,823.
	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a	12	,335.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	12,335.
15	26	2021 estimated tax payments and amount a	26						
If you have a qualifying child,	27a	Earned income credit (EIC)		No	27a				
attach Sch. EIC.		Check here if you were born after Janu	ary 1, 1998,	and before					
		January 2, 2004, and you satisfy all the							
		taxpayers who are at least age 18, to claim t	1 1	structions					
	b	Nontaxable combat pay election			-				
	С	Prior year (2019) earned income		0.1					
	28	Refundable child tax credit or additional child			28			-	
	29	American opportunity credit from Form 8863			29		000	-	
	30	Recovery rebate credit. See instructions .			30		896.	-	
	31	Amount from Schedule 3, line 15 Add lines 27a and 28 through 31. These are			31	dabla arad	ito la	- 00	896.
	32 33	Add lines 25d, 26, and 32. These are your <b>to</b>						32	13,231.
							. ▶	33 34	3,408.
Refund	34	If line 33 is more than line 24, subtract line 2			•	-		35a	3,408.
Direct deposit?	35a ▶ b								3,400.
See instructions.	►d	Routing number       1       2       1       0       0       0       3       5       8       ▶ c Type:       ▼ Checking       Savings         Account number       3       2       5       0       6       1       2       6       6       5       2							
	36	Amount of line 34 you want applied to your 2022 estimated tax   36							
Amount	37	Amount you owe. Subtract line 33 from line				ructions	. ▶	37	
You Owe	38	Estimated tax penalty (see instructions) .			38	idotions		01	
Third Party		you want to allow another person to disc							
Designee		tructions				Yes. Co	mplete b	elow.	× No
3	Des	signee's	Phone			Perso	nal identif	ication <sub>I</sub>	
	nar	ne ►	no. ►			numb	er (PIN)	•	
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the life of the control of the life of								
Here		belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							nt vou an Identity
	YOU	ur signature	Date	Your occupation			1		N, enter it here
Joint return?				SOFTWARE I	DEVEL	OPER		nst.) ►	
See instructions.	Spo	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat	ion				nt your spouse an
Keep a copy for your records.	,							ity Prote nst.) ▶	ection PIN, enter it here
,		(400) 050 0000		0110110101	40100		1,	1131.)	
		parer's name Preparer's signat	Email address	CHOWDARY07	491@G Date	<u>мать.COl</u> Т	M PTIN	1	Check if:
Paid		, , , , , , , , , , , , , , , , , , , ,		ייי דיים מחמווי		14/2022		,,,,,	Self-employed
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	KAM SAGAK	GUPTA TALLAM	102/0	14/2022	P02082		
Use Only		n's name ► GLOBAL TAXES LLC	n Cummi	~ C7 20041					678) 965-9522
0-1		m's address ► 2530 Pebble Creek L	ii Cuilliling				Firm'	s EIN 🕨	
GO TO WWW.Irs.go	ov/Form	1040 for instructions and the latest information.		BAA	REV 01	/31/22 PRO			Form <b>1040</b> (2021)

Form 1040 (2021)

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# 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

RAKESH NADENDLA

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 892-72-8299

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	ı
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, tro		5	-6,950.
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	<b>8d</b> ( )		
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		10	_6 950

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	 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	<b></b>		
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	24g		
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	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 <b>adjustments</b> there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line		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

	SH NADENDLA								92-72-829	
Part		s From Rental Real Estate and Ro	-		-				• .	
		instructions. If you are an individual, repo								
		nts in 2021 that would require you to		. ,						res 🔀 No
B If "	Yes," did you or will you	ou file required Form(s) 1099?							🗆 🕆	res 🗌 No
1a	Physical address of	each property (street, city, state, ZIP	code	e)						
Α	RAMNAGAR ONGOL	E, PRAKASHAM (DT) ANDHRA E	PRAD	ESH IN	523	001				
В										
С										
1b	Type of Property	2 For each rental real estate prop	erty I	isted			Rental	Per	sonal Use	QJV
	(from list below)	above, report the number of fair personal use days. Check the	ir rent	al and		[	Days		Days	401
Α	3	if you meet the requirements to	o file a	as a	Α		365		0	
В		qualified joint venture. See inst	ructio	ns.	В					
С					С					
Туре	of Property:									
1 Sing	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd		7 Self-	Rental			
2 Mul	ti-Family Residence		6 Ro	yalties		8 Othe	r (describe)	)		
Incom	ie:	Properties:			Α		Е	3		С
3			3			450.				
4	Royalties received .		4							
Expen										
5	Advertising		5							
6	Auto and travel (see i	nstructions)	6							
7	•	nance	7			800.				
8			8							
9	Insurance		9							
10		essional fees	10							
11	_		11		1,	200.				
12	Mortgage interest pai	d to banks, etc. (see instructions)	12							
13	Other interest		13							
14	•		14			500.				
15	Supplies		15		1,	800.				
16			16							
17			17		2,	100.				
18		e or depletion	18							
19	Other (list)		19							
20	•	lines 5 through 19	20		7,	400.				
21		line 3 (rents) and/or 4 (royalties). If								
		instructions to find out if you must				0.5.0				
	file <b>Form 6198</b>		21		-6,	950.				
22		l estate loss after limitation, if any,		,		, , ,	,			
	on Form 8582 (see in		_22	[(	6,9	50.)	(		)(	)
23a		eported on line 3 for all rental prope				23a		4	50.	
b		eported on line 4 for all royalty properties				23b				
C		eported on line 12 for all properties				23c				
d		eported on line 18 for all properties				23d			0.0	
е		eported on line 20 for all properties				23e		7,4		
24	· ·	e amounts shown on line 21. <b>Do no</b>		-					24	6 050
25		sses from line 21 and rental real estate							25 (	6 <b>,</b> 950.)
26		ate and royalty income or (loss).								
		V, and line 40 on page 2 do not a							00	6 050
	Schedule 1 (Form 104	40), line 5. Otherwise, include this ar	tioun'	ı ın the t	otai on	iine 41	on page 2		26	-6 <b>,</b> 950.