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

Internal	Theverlide Service				
Subm	nission Identification Number (SID)				
Taxpay	ver's name	Social sec	urity numb	er	
NAR	OTHAM REDDY GANGULA	801-0	9-521	3	
Spouse	s's name	Spouse's	social secu	rity number	r
Par	Tax Return Information — Tax Year Ending December 31, 2022 (Enti-	er vear vol	ı are aut	horizina.	.)
	whole dollars only on lines 1 through 5.	or your you	<i>a</i> a.o aa.		'/
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		. 1	52	,133.
2	Total tax			4	,496.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		. 3	5	,968.
4	Amount you want refunded to you			1	,472.
5	Amount you owe		. 5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and penalties of perjury, I declare that I have examined a copy of the income tax return (original or amende				
return to sen for any Agent payme author payme busine taxes persor	conveledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I ab (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rey delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in ent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminatent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation receive confidential information necessary to answer inquiries and resolve issues related to the nali identification number (PIN) below is my signature for the income tax return (original or amended) I price Funds Withdrawal Consent.	mitter, or ele ejection of th U.S. Treasur dicated in th tion to debit the autho quests must te processing payment. I	ctronic ret e transmis y and its c e tax prep the entry t rization. T be receiv g of the ele further ac	urn origina ssion, (b) the designated paration soft to this acco or revoke (oved no late ectronic parknowledge	tor (ERO) ne reason Financial ftware for ount. This cancel) a er than 2 ayment of that the
	ayer's PIN: check one box only	[0 5 6		
>	I authorize GLOBAL TAXES LLC to enter or generate	e my PIN	9 5 2		as my
	Signature on the income tax return (original or amended) I am now authorizing.	,	Enter five don't ente		,
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Your	signature ▶ Date ▶				
Snou	se's PIN: check one box only	_			
Г	☐ I authorize to enter or generate	a my PINI			as my
	ERO firm name		Enter five	digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.		don't ente	r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Spou	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	W			
Part	Certification and Authentication — Practitioner PIN Method Only				
ERO'	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 9 Don't	6 6 enter all ze	1 9 8	9
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subtements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	mitting this i	return in a	ccordance	
ERO's	s signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-007

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

Filing Status	s 🔀 S	Single Married filing jointly	Marrie	ed filing separately	(MFS)	☐ Head of	household (HOH)		ifying su			
Check only one box.	•	u checked the MFS box, enter the r on is a child but not your dependen	,	our spouse. If you	u check	ed the HOH or	QSS box, enter t		ise (QSS name if	,		
Your first name and middle initial Las			Last nar	me				Your social security number				
NAROTHAM REDDY GA			GANG	ULA				801-09-5218				
If joint return, spouse's first name and middle initial Last				me				Spouse's social security number				
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	Presidential Election Campaign				
4595 W S	SPRI	NG CREEK PKWY					3914	1	Check here if you, or your			
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete sp	paces below.	te	ZIP code		0,	ointly, want \$3 d. Checking a			
PLANO				TX 7			75024	box bel	ow will no	ot change		
Foreign countr	y name		F	oreign province/sta	ite/coun	ty	Foreign postal code	your tax	or refun			
 Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward, award,	or payr	ment for prope	rty or services); o	r (b) sell,				
Assets	exch	ange, gift, or otherwise dispose of	a digital a	asset (or a financi	al inter	est in a digital	asset)? (See instr	uctions.)	Yes	S ⊠ No		
Standard Deduction		eone can claim:	•	•		a dependent						
Age/Blindness	You:	Were born before January 2, 1	958	Are blind	Spouse	: Was bor	n before January	2, 1958	☐ Is I	blind		
Dependent	s (see	instructions):		(2) Social secu	ırity	(3) Relationsh	ip (4) Check the b	oox if quali	ies for (se	e instructions		
If more		rst name Last name		number	-	to you	Child tax of	credit	Credit for	other depender		
than four												
dependents, see instruction	s ——											
and check												
here]											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .				. 1a		60,000.		
	b	Household employee wages not r		. ,				. 1b				
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)										
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)										
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26										
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29										
If you did not	g	Wages from Form 8919, line 6.						. 1g				
get a Form W-2, see	h	Other earned income (see instruct								0.		
instructions.	i	Nontaxable combat pay election (see instr	uctions)		<u>1</u> i				60 000		
	<u>z</u>	Add lines 1a through 1h	· · ·					. 1z	_	60,000.		
Attach Sch. B if required.	2a	Tax-exempt interest	2a			axable interes		. 2b				
ii required.	3a	Qualified dividends	3a			ordinary divide		. 3b	_			
	4a	IRA distributions	4a			axable amoun axable amoun			_			
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun axable amoun		. 5b	_			
Single or	6a	Social security benefits	6a	nothed shook he			t	. 6b				
Married filing separately,		c If you elect to use the lump-sum election method, check here (see instructions)										
\$12,950 Married filing	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here					. 8		-7,867.				
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						. 9		52,133.		
Qualifying surviving spouse,	10	Adjustments to income from Sche		•				. 10		JZ, 1JJ.		
\$25,900 • Head of	11	Subtract line 10 from line 9. This is						. 11		52,133.		
household,	12	Standard deduction or itemized						. 12		12,950.		
\$19,400 If you checked	13	Qualified business income deduction		•	,			. 13		<u> </u>		
any box under Standard	14									12,950.		
Deduction,	15		Id lines 12 and 13							39,183.		
see instructions.	1			.,	. ,			. 15		33,103.		

Form 1040 (202:	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from Form	n(s): 1 881	4 2 4972	3 🗌		. 16	4,496.
Credits	17	Amount from Schedule 2, line 3					. 17	
	18	Add lines 16 and 17					. 18	4,496.
	19	Child tax credit or credit for other dependen	nts from Sched	ule 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	4,496.
	23	Other taxes, including self-employment tax		*				0.
	24	Add lines 22 and 23. This is your total tax					. 24	4,496.
Payments	25	Federal income tax withheld from:						
	а	Form(s) W-2			25a	5,9	68.	
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					. 25d	5,968.
If you have a	26	2022 estimated tax payments and amount a	applied from 20)21 return			. 26	
qualifying child,	27	Earned income credit (EIC)		No .	27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 881	2		28			
	29	American opportunity credit from Form 886	3, line 8		29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15			31			
	32	Add lines 27, 28, 29, and 31. These are you	r total other pa	ayments and ref	undable cre	edits .	. 32	
	33	Add lines 25d, 26, and 32. These are your t	. 33	5,968.				
Refund	34	If line 33 is more than line 24, subtract line 2	24 from line 33.	This is the amou	nt you over	paid .	. 34	1,472.
	35a	Amount of line 34 you want refunded to yo		3 is attached, che	ck here .		35a	1,472.
Direct deposit?	b	Routing number 1 1 1 0 0 0 0	ngs					
See instructions.	d	Account number 5 8 6 0 3 7 0	3 7 7 0	0 6				
	36	Amount of line 34 you want applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. This is the am For details on how to pay, go to www.irs.go					. 37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to distructions				es. Comp	lete below.	⊠ No
		signee's	Phone				dentification	
		me	no.			number (F		
Sign		der penalties of perjury, I declare that I have examir ief, they are true, correct, and complete. Declaration						
Here	Yo	ur signature	Date	Your occupation			If the IRS se	nt you an Identity
								IN, enter it here
Joint return?				IT EMPLOY			(see inst.)	
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.			Spouse's occupat	ion			nt your spouse an ection PIN, enter it here
	Ph	one no. (870) 949-9054	Email address	NAROTHAMG	89@GMAI	L.COM		
Doid	Pre	eparer's name Preparer's signa	ature		Date	PT	N	Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/14/2	2023 PO	2082703	Self-employed
Preparer	Fir	m's name GLOBAL TAXES LLC					Phone no.	(678) 965-9522
Use Only	Fir	m's address 245 ROONEY CT E BRI	UNSWICK N	J 08816			Firm's EIN	84-3171965
Co to many in-	ou/Fa::::	a10.40 for instructions and the latest inf						T 1040 (2000)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment Sequence No. 01

Your social security number

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.

IARC	THAM REDDY GANGULA	801-	09-521	8
Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		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, trusts, etc. Attach Sche		5	-7,867.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss			
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555 8d ()	
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends 8g			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
- 1	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 81			
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)			
n	Section 951(a) inclusion (see instructions)			
0	Section 951A(a) inclusion (see instructions)			
р	Section 461(I) excess business loss adjustment			
q	Taxable distributions from an ABLE account (see instructions) 8q			
r	Scholarship and fellowship grants not reported on Form W-2 8r			
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d)	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan			
u	Wages earned while incarcerated			
Z	Other income. List type and amount:			
	87			

-7,867.

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Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-base			
	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)	1		
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit)		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses	i e		
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g	1		
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	1		
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:			
05	Tatal athous diseases and Add lines Of a three will Of		05	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . En		00	
	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.

OMB No. 1545-0074

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

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

2022	
Attachment Sequence No. 13	

Your social security number

NARO	THAM REDDY GANGULA						801-09	9-5218	
Part		d Ro	yalties						
	Note: If you are in the business of renting personal proper	ty, use	Schedule	C . See	instru	ctions. If you ar	e an indiv	idual, rep	ort farm
	rental income or loss from Form 4835 on page 2, line 40.		- () 4						571.11
	Did you make any payments in 2022 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .							. <u>□</u> Y€	es U No
1a	Physical address of each property (street, city, state, ZIF	ode	e)						
Α	2-4-118/166 S SWAROOP NAGA UPPAL IN 50	00039	9						
В									
С									
1b		For each rental real estate property listed above, report the number of fair rental ar			Fa	ir Rental Days	Person Day		QJV
Α	personal use days. Check the Qu			Α		365		0	
В	if you meet the requirements to f			В					
С	qualified joint venture. See instru	ictions	S	С					
Туре	of Property:					'			
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental			
	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (descri	be)		
			,						
				•		Propertie	es:		
Incon				Α	34.	В			С
3 4	Rents received	3		0	34.				
	Royalties received	4							
Expe		5							
5 6	Advertising	6							
7	Auto and travel (see instructions)	7		1 2	96.				
8	Cleaning and maintenance	8		⊥,∠	90.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1 Q	33.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		1,0	٥٥.				
13	Other interest	13							
14	Repairs	14		1 6	95.				
15	Supplies	15			49.				
16	Taxes	16		-, ,	10.				
17	Utilities	17		1.9	28.				
18	Depreciation expense or depletion	18			20.				
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		8,5	01.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If								
	result is a (loss), see instructions to find out if you must								
	file Form 6198	21		-7,8	67.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(7,86	57.)	()(()
23a	Total of all amounts reported on line 3 for all rental prope				23a		634.		,
b	Total of all amounts reported on line 4 for all royalty properties				23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	8,	501.		
24	Income. Add positive amounts shown on line 21. Do no						24		
25	Losses. Add royalty losses from line 21 and rental real estat		•		nter to	otal losses here		(7,867.)
26	Total rental real estate and royalty income or (loss).								•
	here. If Parts II, III, IV, and line 40 on page 2 do not								
	Schedule 1 (Form 10/0) line 5. Otherwise include this ar	mount	t in the tot	al on li	no /11	on nage 2	06		-7 867