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

Subm	sission Identification Number (SID)						
Taxpay	er's name	Social secu	urity numb	er			
NAR	OTHAM REDDY GANGULA	801-0	9-5218	3			
Spouse	Spouse's name Spouse's soc						
Par	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you	are aut	horizing.)		
	whole dollars only on lines 1 through 5.	, ,			,		
	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		2	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		4	1	,472.		
5	Amount you owe						
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a co	ppy of y	our retu	rn)		
return to sen for any Agent payme author payme taxes persor Electro	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abov (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected y 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 indicated in the fundamental service of the payment of estimated tax, and the financial institution ization 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 requises 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 payment (PIN) below is my signature for the income tax return (original or amended) I are prioric Funds Withdrawal Consent. **Easy PIN: check one box only** I authorize GLOBAL TAXES LLC to enter or generate in the service of the income tax.	tter, or election of the S. Treasury cated in the n to debit t the author ests must processing ayment. I for now auth	etronic retermine transmiser and its control to the etax preprint the entry the distribution. The ereceive of the electric arizing are set of the electric ari	urn origina ssion, (b) th designated paration sof to this acco or revoke (c) wed no late ectronic pa knowledge and, if applic	tor (ERO) ne reason Financial itware for bunt. This cancel) a er than 2 syment of that the		
	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 if you are entering your own PIN and your return is filed using the Practitioner PIN method.	ow authori	don't ente izing. Ch	r all zeros neck this b			
V	below. signature ► Date ►	02/-	1 / / / 0				
Your	signature ► Date ►	03/	14/2	023			
Spou	se's PIN: check one box only	Г					
	I authorize to enter or generate r 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		don't ente	digits, but r all zeros	as my		
	if you are entering your own PIN and your return is filed using the Practitioner PIN methology.	od. The Ef	RO must	t complete	e Part III		
Spou	se's signature ▶ Date ▶						
	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. 2 2	2 4 9 Don't e	6 6 enter all ze	1 9 8	9		
author	by that the above numeric entry is my PIN, which is my signature for the electronic individual income ta 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 Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this re	eturn in a	ccordance			
EDO'	s signature ▶ Date ▶						
<u> </u>	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 Check only one box.		Single Married filing jointly uchecked the MFS box, enter the n		ed filing separately (Nour spouse. If you cl					spou	ifying survi se (QSS) name if the	Ü	
		on is a child but not your dependent		,			,				, , ,	
Your first name	and mi	iddle initial	Last na	me				,	our soc	cial security	y number	
NAROTHAM REDDY				ULA					801-09-5218			
If joint return, spouse's first name and middle initial				me					Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			Apt. no.	ı	Presider	tial Electio	n Campaign	
4595 W S	SPRI	NG CREEK PKWY			3914				Check here if you, or your			
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	Stat	е	ZIP code			spouse if filing jointly, want \$3 to go to this fund. Checking a		
PLANO					TX		75024			w will not		
Foreign country	y name		F	oreign province/state/	county	y	Foreign postal	ode)	our tax	or refund.	· ·	
										You	Spouse	
Digital Assets		ny time during 2022, did you: (a) rec lange, gift, or otherwise dispose of a					-			Yes	⊠ No	
Standard		eone can claim: You as a de		<u></u>			, (/			
Deduction		Spouse itemizes on a separate retur	•	•								
Age/Blindness	s You:	Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before Janu	ary 2,	1958	☐ Is bli	nd	
Dependent	s (see	instructions):		(2) Social security	.	(3) Relationsh	ip (4) Check	the box	if qualif	es for (see i	instructions):	
If more	(1) Fi	(1) First name Last name		number		to you	Child	tax cre	dit	Credit for oth	ner dependents	
than four											<u> </u>	
dependents, see instruction	s ——											
and check												
here											<u> </u>	
Income	1a	Total amount from Form(s) W-2, b	,	,					1a	6	50,000.	
	b	Household employee wages not re							1b			
Attach Form(s) W-2 here. Also	С	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1							1c			
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							1e			
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 instructions)							1h		0.	
instructions.	i	Nontaxable combat pay election (see instructions)										
	Z	Add lines 1a through 1h							1z	- 6	50,000.	
Attach Sch. B	2a	· -	2a			axable interes			2b			
if required.	3a		3a			rdinary divide			3b			
	4a		4a				t		4b			
Standard Deduction for—	5a	-	5a				t		5b			
Single or	6a	,	6a				t		6b	_		
Married filing separately,	C	If you elect to use the lump-sum election method, check here (see instructions)							7			
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						7		7 0 6 7		
 Married filing jointly or 	8	Other income from Schedule 1, line 10						9		7,867.		
Qualifying surviving spouse,	9 10	Add lines 12, 2b, 3b, 4b, 5b, 6b, 7, Adjustments to income from Sche							10	+ 3	52,133.	
\$25,900		•	,						11	+	2 122	
 Head of household, 	11 12	Subtract line 10 from line 9. This is Standard deduction or itemized	•	-					12		2,133.	
\$19,400 If you checked	13	Qualified business income deduct							13	+	2,950.	
any box under	14	Add lines 12 and 13							14	1	2,950.	
Standard Deduction,	15	Subtract line 14 from line 11. If zer							15		.2,950. 39,183.	
see instructions.		Captract into 14 HOITI III 6 11. II 26	0 01 1033	o, onitor o inio is y	Jui u				13		J, 103.	

Form 1040 (202)	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	4,496.
Credits	17	Amount from Schedule 2, lin	те 3					17	
	18	Add lines 16 and 17	18	4,496.					
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	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-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	4,496.
Payments	25	Federal income tax withheld							
•	а	Form(s) W-2				25a 5	5,968.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	5,968.
	26	2022 estimated tax paymen						26	·
If you have a qualifying child,	27					27			
attach Sch. EIC.	28								
	29	American opportunity credit				29		-	
	30	Reserved for future use .		•		30			
	31	Amount from Schedule 3, lir				31		1	
	32	Add lines 27, 28, 29, and 31	32						
	33	Add lines 25d, 26, and 32. T	33	5,968.					
	34	If line 33 is more than line 24		34	1,472.				
Refund	35a	Amount of line 34 you want				•		35a	1,472.
Direct deposit?	b	Routing number 1 1 1					Savings	Jou	,
See instructions.		Account number 5 8 6							
	36	Amount of line 34 you want				36			
Amount	37	Subtract line 33 from line 24				00			
You Owe	31							37	
	38	For details on how to pay, go to www.irs.gov/Payments or see instructions							
Third Party		you want to allow another							
Designee		structions					omplete b	elow.	× No
Doolgilloo		signee's		Phone			onal identif		
		name no. reisonal identification number (PIN)							
Sign		der penalties of perjury, I declare t							
Here	bel	elief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							, ,
11010	Yo								nt you an Identity
1					 IT EMPLOY	I ,			N, enter it here
Joint return? See instructions.	Sn	ouse's signature. If a joint return, I	hath must sign	Date	Spouse's occupa			nt your spouse an	
Keep a copy for	ОР	oddo 3 dignature. Ir a joint rotain, i	John mast sign.	Date	opouse s occupa			ection PIN, enter it here	
your records.						(see i	nst.)		
	Ph	Phone no. (870) 949-9054 Email address NAROTHAMG89@GMAIL.COM							
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/14/2023	P02082	2703	Self-employed
Preparer	Fin	m's name GLOBAL TA	XES LLC			·			678) 965-9522
Use Only	Fin		Y CT E BRU	NSWICK N	J 08816		Firm'		84-3171965
Go to www.irs.a	ov/Forn	n1040 for instructions and the late			BAA	REV 03/02/23 PRO			Form 1040 (2022
3									

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

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

Sequence No. 01

Your social security number 801-09-5218

Par	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. Atta	ach Schedule E .	5	-7,867.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
- 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)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
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	8s (<u>)</u>	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
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 1040, 1040-SR	or 1040-NR line 8	10	-7.867

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.

Attachment Sequence No. 13

Your social security number

NARC	THAM REDDY GANGUI	LA						801-	09-5218	
Part		From Rental Real Estate and					'			
	Note: If you are in the	e business of renting personal propert from Form 4835 on page 2, line 40.	ty, use	Schedule	C . See	instru	ctions. If you a	are an in	dividual, rep	ort farm
A [, , ,	to file	Form(s) 1	10002 5	Saa ins	tructions			ae X No
		ents in 2022 that would require you to file Form(s) 1099? See instructions								
				<u> </u>						
_ <u>A</u>										
B_										
<u>C</u>	T (D)					_		_		
1b		For each rental real estate proper above, report the number of fair r			Fa	ir Rental Days	Pers	QJV		
A		personal use days. Check the QJ			Α		365	Days		
		if you meet the requirements to fi	ile as a	a	В		303			
C		qualified joint venture. See instru	ctions	i.	C					
	of Property:									
	Single Family Residence	3 Vacation/Short-Term Rent	tal	5 Lanc	I	7	Self-Rental			
	Multi-Family Residence	4 Commercial		6 Roya			Other (desci	ribe)		
				,-						
l					Α		Properti	es:		
Incon					A	2.4	В			С
3 4			3		0	34.				
Exper			4							
5			5							
6	•	ructions)	6							
7		nce	7		1,2	96				
8			8		-,2	, ,				
9			9							
10		ional fees	10							
11	-		11		1,8	33.				
12	_	o banks, etc. (see instructions)	12		, -					
13			13							
14	Repairs		14		1,6	95.				
15	Supplies		15		1,7	49.				
16	Taxes		16							
17			17		1,9	28.				
18		r depletion	18							
19	Other (list)		19							
20	Total expenses. Add line	es 5 through 19	20		8,5	01.				
21		e 3 (rents) and/or 4 (royalties). If								
		structions to find out if you must			7 0	67				
00			21		-7, 8	0/.				
22		state loss after limitation, if any, ructions)	20	/	7 0 0	. ,	(\(
220	•	orted on line 3 for all rental prope	22	(1,00	7.) 23a	(634)(
23a b		orted on line 3 for all rental prope orted on line 4 for all royalty prope				23a 23b		004	•	
C		orted on line 12 for all properties				23c				
d						23d				
e	•					23e	8	,501		
24		mounts shown on line 21. Do no t						. 24	_	
25	•	es from line 21 and rental real estat		•		nter to	tal losses he			7,867.
26		e and royalty income or (loss).							1	,
		and line 40 on page 2 do not a								
		. line 5. Otherwise, include this an						. 26		-7.867