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 nevertue Service	
Submission Identification Number (SID)	
Taxpayer's name	Social security number
SHYAM SUNDER REDDY YANNAM	895-28-5795
Spouse's name	Spouse's social security number
Down I Tou Deturn Information Tou Very Ending December 24	
	nter year you are 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 83,785.
1 Adjusted gross income	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	nd keep a copy of your return)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amen-	
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trait 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 institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terming payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation 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.	rejection of the transmission, (b) the reason to U.S. Treasury and its designated Financial indicated in the tax preparation software for itution to debit the entry to this account. This inate the authorization. To revoke (cancel) a requests must be received no later than 2 the processing of the electronic payment of the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
▼ I authorize GLOBAL TAXES LLC to enter or general authorize GLOBAL TAXES LLC	ato my PIN 8 5 7 9 5
ERO firm name	Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN and your return is filed using the Practitioner PIN methods.	
Your signature ▶ Date ▶	-
Spouse's PIN: check one box only	
I authorize to enter or general	ato my PIN
ERO firm name	ate my PIN as my Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I at if you are entering your own PIN and your return is filed using the Practitioner PIN m below.	
Spouse's signature ▶ Date ▶	•
Practitioner PIN Method Returns Only—continue bel	
Part III Certification and Authentication — Practitioner PIN Method Only	
EDO'S EFIN (DIN France we six digit FFIN fallowed by your five digit call calcuted DIN 2	2 2 4 0 6 6 1 0 9 0
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 2 4 9 6 6 1 9 8 9 Don't enter all zeros
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 surrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers	ubmitting this return in accordance with the
ERO's signature ▶ Date ▶	•
FRO 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 [u checked the MFS box, enter the n	_	ed filing separately (Nour spouse. If you ch		_				spou	lifying sur use (QSS) name if th	Ü	vina
	-	on is a child but not your dependen	-										,
Your first name	t name and middle initial Last name							Υ	Your social security number				
SHYAM SUNDER REDDY YANNAM									8	895-28-5795			
If joint return, s	pouse's	first name and middle initial	Last nar	me					S	pouse'	s social se	curity nur	nber
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			, A	pt. no.	- 1		ntial Electi	-	aign
4955 USA	AA BI	LVD,	UNIT54							nere if you,	,	ι ΦO	
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete sp	paces below.	Stat	e	ZIP c	ode	spouse if filing jointly, want \$3 to go to this fund. Checking a				
SAN ANTO	ONIO			TX 782			782	40	b	ox belo	ow will not	change	
Foreign country	y name		F	Foreign province/state/o	count	y	Foreig	n postal co	de y	our tax	or refund	∏Spo	ouse
					-		-						
							asset)	? (See ins	struct	ions.)	Yes	⊠ No	1
	_		•			a dependent							
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	rn befo	re Janua	ry 2,	1958	☐ Is b	ind	
Dependents	s (see	nstructions):		(2) Social security number		(3) Relationship		(4) Check the b		if qualit	fies for (see	instruction	ons):
If more	(1) Fi	(1) First name Last name				to you		Child ta	x cred	dit	Credit for ot	her depen	dents
	s ——												
	·												
here													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)						1a		92,96	<u>5.</u>
	b									1b			
. ,	С									1c			
Dependents (see instructions): If more than four dependents, see instructions and check here			1d										
	е	·								1e			
	irrst name and middle initial AM SUNDER REDDY return, spouse's first name and address (number and street). If address (number and street). If 55 USAA BLVD, rown, or post office. If you have I ANTONIO In country name At any time during exchange, gift, or dard Someone can cla Jindness You: Were bot endents (see instructions): endents (see instruction	Employer-provided adoption bene	efits from	Form 8839, line 29						1f			
If you did not	g	Wages from Form 8919, line 6											
•	h	Other earned income (see instruct	tions) .				· ·			1h			0.
,	i	Nontaxable combat pay election (see instr	uctions)		<u>1i</u>	i						
	Z	Add lines 1a through 1h								1z	!	92 , 96	5.
	2a	Tax-exempt interest	2a							2b			
if required.	3a	Qualified dividends	3a		b O	rdinary divider	nds .			3b			
	4a	IRA distributions	4a		b Ta	axable amoun	t			4b			
Standard	5a	Pensions and annuities	5a			axable amoun				5b			
Deduction for— Single or	6a	Social security benefits	6a		b Ta	axable amoun	t			6b			
Married filing	С	If you elect to use the lump-sum election method, check here (see instructions)											
separately, \$12,950	7	Capital gain or (loss). Attach Sche	dule D if	required. If not requ	iired,	check here				7			
Married filing	8	Other income from Schedule 1, line 10								8		-9 , 18	0.
jointly or Qualifying		Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7			ome					9	1 :	83,78	5.
surviving spouse, \$25,900		Adjustments to income from Schedule 1, line 26								10			
Head of		Subtract line 10 from line 9. This is your adjusted gross income								11	1	83,78	
household, \$19,400	12	Standard deduction or itemized deductions (from Schedule A)								12		12 , 95	0.
If you checked any box under		Qualified business income deduct								13			
Standard		Add lines 12 and 13								14		12 , 95	
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ro or less	s, enter -0 This is ye	our t	axable incom	ne .			15	<u> </u>	70,83	5.

	Page 2
16	11,199.
17	
18	11,199.
19	
20	
21	44.400
22	11,199.
23	0.
24	11,199.
25d	14,706.
26	
32	
33	14,706. 3,507. 3,507.
34	3,507.
35a	3,507.
37	

Tax (see instructions). Check if any from Form(s): 1 8814 **2** 4972 3 16 Tax and **Credits** 17 Amount from Schedule 2, line 3 Add lines 16 and 17 18 19 Child tax credit or credit for other dependents from Schedule 8812 20 Amount from Schedule 3, line 8 21 Add lines 19 and 20 22 Subtract line 21 from line 18. If zero or less, enter -0-23 Other taxes, including self-employment tax, from Schedule 2, line 21 Add lines 22 and 23. This is your total tax 24 **Payments** 25 Federal income tax withheld from: 14,706. Form(s) W-2 . 25a а Form(s) 1099 25b b Other forms (see instructions) 25c С d Add lines 25a through 25c 26 2022 estimated tax payments and amount applied from 2021 return If you have a 27 Earned income credit (EIC) 27 qualifying child, attach Sch. EIC. 28 Additional child tax credit from Schedule 8812 28 29 American opportunity credit from Form 8863, line 8. 29 30 30 Reserved for future use 31 Amount from Schedule 3, line 15 31 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid Refund Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a Routing number 1 1 1 1 0 0 0 0 0 2 5 Direct deposit? b **c** Type: X Checking Savings See instructions. 5 | 8 | 6 | 0 | 3 | 7 | 8 | 6 | 2 | 2 | 3 | 0 | d 36 Amount of line 34 you want applied to your 2023 estimated tax . . . 36 Amount 37 Subtract line 33 from line 24. This is the amount you owe. You Owe For details on how to pay, go to www.irs.gov/Payments or see instructions . Estimated tax penalty (see instructions) . . . Third Party Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete b Designee Designee's Phone Personal identif number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and Sign belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Here If the IRS sent you an Identity Your signature Date Your occupation Protection PIN, enter it here (see inst.) SOFTWARE ENGINEER Joint return? See instructions. If the IRS sent your spouse an Spouse's signature. If a joint return, both must sign. Date Spouse's occupation Keep a copy for Identity Protection PIN, enter it here your records. (see inst.) Phone no. (210)984-7769Email address SHYAMYANNAM@GMAIL.COM Preparer's name PTIN Check if: Preparer's signature Date **Paid** Self-employed SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/01/2023 P02082703 **Preparer** Phone no. (678) 965-9522 GLOBAL TAXES LLC Firm's name Use Only 84-3171965 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's address Firm's EIN

Form 1040 (2022)

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
SHYAM SUNDER REDDY YANNAM

Your social security number
895-28-5795

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. Atta		5	-9,180.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	' •	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		
į	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	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	OI		
1111		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 ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	·	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	-9 , 180.

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

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-t			
	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 8I from the			
	rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
		24c		
d		24d		
е	Repayment of supplemental unemployment benefits under the Trade			
		24e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	24g		
h	Attorney fees and court costs for actions involving certain unlawful			
	·	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	- 41		
	F	24i		
j	<u> </u>	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	S.4.		
		24k		
Z	Other adjustments. List type and amount:			
05		24z	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 .		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.)

Your social security number

OMB No. 1545-0074

Department of the Treasury

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Attachment Sequence No. 13

Internal Revenue Service Go to www.irs.gov/ScheduleE for instructions and the latest information. Name(s) shown on return

SHYA	M SUNDER REDD	Y YANNAM						895-2	8-5795	
Part	Income or L	Loss From Rental Real Estate and in the business of renting personal proper or loss from Form 4835 on page 2, line 40.	d Ro	yalties e Schedul	e C. See	instruc	tions. If you			
Α [yments in 2022 that would require you	to file	Form(s)	1099? S	ee inst	ructions .		. \(\sum \text{Ye}	es 🛮 No
ВΙ	f "Yes," did you or w	vill you file required Form(s) 1099?							. 🗌 Ye	es 🗌 No
1a		of each property (street, city, state, ZIF								
Α	2-21 VELGOMU	LA MIDJIL MANDAL MAHABUBNA	AGAR	, TELAN	GANA 1	N 50	9357			
В				<u>, </u>						
С										
1b	Type of Property (from list below)						r Rental Days	1	nal Use ays	QJV
Α	3	personal use days. Check the Q							0	
В		if you meet the requirements to f qualified joint venture. See instru			В					
С		quaimed joint venture. See instru	CLIOI	5.	С					
1	of Property: Single Family Reside Multi-Family Reside		tal	5 Lan 6 Roy						
					_		Propert	ies:		
ncon					Α	30.	В			С
3 4			3		3.	30.				
Exper			4							
5			5							
6	-	e instructions)	6							
7	•	tenance	7	1,100.						
8			8							
9			9			_				
10		ofessional fees	10							
11	Management fees									
12		paid to banks, etc. (see instructions)	12		1/2	10.				
13	0 0		13							
14			14		2,4	50.				
15	•		15		3,5	_				
16			16							
17	Utilities		17		1,42	20.				
18	Depreciation exper	nse or depletion	18							
19	Other (list)		19							
20	Total expenses. Ac	dd lines 5 through 19	20		9,7	10.				
21	result is a (loss), se	om line 3 (rents) and/or 4 (royalties). If see instructions to find out if you must	21		-9,1	80				
22	Deductible rental re	eal estate loss after limitation, if any, instructions)	22	(9,18			,)()
23a	,	s reported on line 3 for all rental prope				23a		530.		
b		s reported on line 4 for all royalty prop			+	23b			1	
С		s reported on line 12 for all properties				23c				
d		s reported on line 18 for all properties				23d				
е		s reported on line 20 for all properties			- t	23e	(9,710.		
24		tive amounts shown on line 21. Do no								
25	•	y losses from line 21 and rental real estat		-		nter to	tal losses he		(9,180.
26		estate and royalty income or (loss).								. ,
-	here. If Parts II, III	I, IV, and line 40 on page 2 do not 1040), line 5. Otherwise, include this ar	apply	to you,	also en	ter thi	s amount o			-9,180.