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

Submissi	on Identification Number (SID)		•					
Taxpayer's	name	Social securit	Social security number					
SANGA	VI GUNUKUNTLA	282-31-	282-31-5760					
Spouse's na	ame	Spouse's social security number						
Part I	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	⊥ r vear vou a	re aut	horiz	ing.)			
	ole dollars only on lines 1 through 5.							
Note: For	rm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1 Ac	djusted gross income		1		93,	160.		
	otal tax		2		13,	267.		
	ederal income tax withheld from Form(s) W-2 and Form(s) 1099		3		15,	618.		
	mount you want refunded to you		4		2,	351.		
	mount you owe		5					
Part II	Taxpayer Declaration and Signature Authorization (Be sure you get and latties of perjury, I declare that I have examined a copy of the income tax return (original or amended							
for any de Agent to ir payment of authorizati payment, business of taxes to re personal id	y return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejlay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Unitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income from the financial institution account income from the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminat I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation receives prior to the payment (settlement) date. I also authorize the financial institutions involved in the eceive confidential information necessary to answer inquiries and resolve issues related to the dentification number (PIN) below is my signature for the income tax return (original or amended) I a Funds Withdrawal Consent.	J.S. Treasury a licated in the ta on to debit the e the authoriza luests must be processing of payment. I furt	nd its of ax prepending the entry the electric than t	lesigna earation to this to revolved no ectron knowle	ated Fin softwaccount account bke (can later ic payredge t	nancial vare for nt. This ancel) a than 2 ment of hat the		
	r's PIN: check one box only				\neg			
	I authorize GLOBAL TAXES LLC to enter or generate	my DIN 1	5 7	7 6	0	ac my		
	ERO firm name	ž En	er five		but	as my		
	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 r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.							
Your sign	nature ▶ Date ▶							
Spouse's	s PIN: check one box only							
. —	I authorize to enter or generate	my PIN				as my		
	ERO firm name	_	er five	digits,		ao my		
:	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all ze	ros			
	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 and your return is filed using the Practitioner PIN metholow.							
Spouse's	signature ► Date ►							
	Practitioner PIN Method Returns Only—continue below	1						
Part III	Certification and Authentication — Practitioner PIN Method Only							
ERO's El	FIN/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 ent	- -		1 - 1			
authorized	at the above numeric entry is my PIN, which is my signature for the electronic individual income to the file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submoths of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of I	nitting this retu	ırn in a	ccord	ance v			
ERO's sid	gnature ▶ 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. 1545-0074

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

Filing Status	\mathbf{X}	Single Married filing jointly	Marrie	ed filing separately (N	MFS)	☐ Head of	househo	old (HO	H) [ifying survi	ving
Check only one box.		u checked the MFS box, enter the na on is a child but not your dependent	-	our spouse. If you c	heck	ed the HOH or	QSS be	ox, ente	er the		ise (QSS) name if the	e qualifying
Your first name	and mi	ddle initial	Last nar	me					Y	our so	cial security	number
SANGAVI			GUNU	KUNTLA					2	282-31-5760		
If joint return, spouse's first name and middle initial			Last nar	ne					s	Spouse's social security number		
Home address ((numbe	er and street). If you have a P.O. box, see	instructio	ons.			Ар	t. no.	F	resider	ntial Election	n Campaign
		ROLYN PKWY					31	.11	- 1	Check here if you, or your		
		ce. If you have a foreign address, also co	· · ·			ZIP coc			spouse if filing jointly, want \$3			
IRVING						7503			to go to this fund. Checking a box below will not change			
Foreign country	name		F	oreign province/state/	count	:y				your tax or refund.		
										You Spouse		
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a	,				•	,	,	,	Yes	⊠ No
Standard		eone can claim: You as a de						`				
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien	·						
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spe	ouse	: Was bor	n before	e Janua	ary 2,	1958	Is blir	nd
Dependents	-			(2) Social security	/	(3) Relationsh	nip (4)	Check t	he box	if qualif	ies for (see i	nstructions):
If more		rst name Last name		number		to you		Child t	ax cred	dit	Credit for other	er dependents
than four								[
dependents, see instructions								[
and check	,							[
here								[
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions) .						1a	10	2,729.
	b	Household employee wages not re	eported	on Form(s) W-2 .						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							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	, , , ,							1e			
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29							1f			
If you did not	g	Wages from Form 8919, line 6 .								1g		
get a Form W-2, see	h	Other earned income (see instruction	ions) .				, .			1h	_	0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		<u>1i</u>						
	Z	Add lines 1a through 1h		· · · · · i						1z	10	2,729.
Attach Sch. B	2 a	'	2a			axable interest				2b		
if required.	3a	Qualified dividends	3a		b O	rdinary divide	nds .			3b		
	4a		4a			axable amoun				4b	+	
Standard Deduction for—	5a	_	5a			axable amoun				5b		
• Single or	6a	,	6a			axable amoun	t			6b	-	
Married filing separately,	С	If you elect to use the lump-sum e		*	`	,			. 📙			
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							. Ш	7		
 Married filing jointly or 	8	Other income from Schedule 1, line 10							8		9,569.	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•						9	9	3,160.
surviving spouse, \$25,900	10	Adjustments to income from Sche								10		
 Head of household, 	11	Subtract line 10 from line 9. This is your adjusted gross income						11		3,160.		
\$19,400	12	Standard deduction or itemized		•	,					12	1 1	2,950.
If you checked any box under	13	Qualified business income deducti								13	+	
Standard Deduction,	14	Add lines 12 and 13								14		2 , 950.
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -U This is y	our t	axable incom	1e .			15	8	0,210.

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from Form	n(s): 1 881	4 2 4972	3 🗌		16	13,267.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	13,267.
	19	Child tax credit or credit for other depender	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	13,267.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your total tax					24	13,267.
Payments	25	Federal income tax withheld from:						
	а	Form(s) W-2			25a 1.	5,618.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	15,618.
If you have a	26	2022 estimated tax payments and amount a	applied from 20	021 return			26	
qualifying child,	27	Earned income credit (EIC)			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 refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. These are your to	otal payments				33	15,618.
Refund	34	If line 33 is more than line 24, subtract line 2	24 from line 33.	This is the amour	nt you overpaid		34	2,351.
	35a	Amount of line 34 you want refunded to yo		3 is attached, chec	k here	🗌	35a	2,351.
Direct deposit?	b	Routing number 2 1 1 3 9 1 8		c Type: 🛛	Checking	Savings		
See instructions.	d	Account number 1 8 2 2 7 2 4	9					
	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 <i>www.irs.go</i>	•				37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to dis				omplete b	elow.	X No
		signee's	Phone			onal identif	ication I	
		me	no.			iber (PIN)		
Sign Here		der penalties of perjury, I declare that I have examin ief, they are true, correct, and complete. Declaration						
TICIC	Yo	ur signature	Date	Your occupation				nt you an Identity
				 SOFTWARE DEVE		/!		N, enter it here
Joint return? See instructions.	Sn	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupati		`		nt your spouse an
Keep a copy for your records.	Op	odoo o dignataro. Il a joint rotam, both made dign	Date	Speado o occupation			ity Prote	ection PIN, enter it here
	Ph	one no. (941) 916-0201	Email address	SANGAVI.SRIKA	NTH96@GMAIL.C	OM		
Doid	Pre	eparer's name Preparer's signa	ture		Date	PTIN		Check if:
Paid	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/24/2023	P02082	2703	Self-employed
Preparer	Fir	m's name GLOBAL TAXES LLC				Phor	e no. (678) 965-9522
Use Only	Fir	m's address 245 ROONEY CT E BRU	JNSWICK N	J 08816			s EIN	88-2145487
								1010

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 Fo	orm 1040, 1040-SR, or 1040-NR	Your soc	ial security numbe
SANGAVI GUNUKU	NTLA	282-31	-5760

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	ach Schedule E .	5	-9,569.
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	-	
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			
	instructions)	8m	-	
n	Section 951(a) inclusion (see instructions)	8n	-	
0	Section 951A(a) inclusion (see instructions)	80	-	
p	Section 461(I) excess business loss adjustment	8p	-	
q	Scholarship and fellowship grants not reported on Form W-2	8q 8r	-	
r	Nontaxable amount of Medicaid waiver payments included on Form	OI	-	
S	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or	05 (
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z				
~	other meetine. 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		$\overline{}$	-9,569.

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-	-basis government		
	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	, , , , ,	24a		
b	Deductible expenses related to income reported on line 8l from the			
		24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	· · · · · · · · · · · · · · · · · · ·	24c		
d	' '	24d	_	
е	Repayment of supplemental unemployment benefits under the Trade			
	F	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			
		24i	-	
j		24j	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
		24k	-	
Z	Other adjustments. List type and amount:	0.4		
0-		24z	0.5	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. Enter 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.)

OMB No. 1545-0074

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041, Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

Your social security number

SANGAVI GUNUKUNTLA 282-31-5760 Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions 1a Physical address of each property (street, city, state, ZIP code) PLOTNO: 342, SRI SAI KRUPA A KOMPALLY, HYDERABAD TELANGANA IN 500014 Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 620. 4 Royalties received . 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 289. 917. 7 Cleaning and maintenance. 7 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 1,273. 11 Management fees 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,650. 14 14 Repairs 3,250. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,810. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 10,189. 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 -9,569. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 9.569.)620. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 10,189. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 9,569. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 . -9,569.