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 ne	syeliue delvice						
Submis	sion Identification Number (SID)						
Taxpayer'	s name	Social securi	Social security number				
SRAV	AN KUMAR BOGINENI	134-45	134-45-2126				
Spouse's	name	Spouse's soo	ial secui	rity number	•		
Part I		er year you a	re autl	norizing.)		
	hole dollars only on lines 1 through 5.						
	form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		 	60	501		
	Adjusted gross income		2		,581. ,855.		
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3				
	Amount you want refunded to you		4		,851. ,996.		
	Amount you want refunded to you		5	т	, 990.		
Part I		keep a cop		our retu	rn)		
Under pomy known return (o to send for any condition of the send f	enalties of perjury, I declare that I have examined a copy of the income tax return (original or amende vieldge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aborginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the I initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in 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 terminary, 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 identification number (PIN) below is my signature for the income tax return (original or amended) I increase a constant and the income tax return (original or amended) I authorize GLOBAL TAXES LLC to enter or generate the signature on the income tax return (original or amended) I am now authorizing.	d) I am now autobe are the am nitter, or electricition of the transfer and the transfer autobe. The transfer are the authorized auth	points from the control of the contr	, and to the om the incurn originar sion, (b) the esignated aration sofo this according to revoke (a coronic paramowledge	he best of come tax tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 syment of that the		
	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.	hod. The ERC) must				
Your sig	gnature ► <u>SravanBogineni</u> Date ►	02/10/	2023				
•							
Spouse	e's PIN: check one box only	5111					
	I authorize to enter or generate to enter or generate	_	ter five d	ligits, but	as my		
	signature on the income tax return (original or amended) I am now authorizing.			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.						
Spouse	's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below	v					
Part II	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 ent	6 6 er all zer	1 9 8	9		
authorize	that the above numeric entry is my PIN, which is my signature for the electronic individual income ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	mitting this retu	ırn in ad	ccordance			
ERO'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

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

Filing Status Check only one box.	If yo	u checked the MFS box, enter the n	ame of y	ed filing separately our spouse. If you	,	_	household (H	,	spou	lifying surv use (QSS) name if th	J	
		on is a child but not your dependen							.,			
Your first name			Last nar						Your social security number			
SRAVAN I			BOGI						134-45-2126			
If joint return, s	pouse's	first name and middle initial	Last nar	ne					Spouse'	s social sec	urity number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.		Preside	ntial Electio	n Campaign	
505 COR	CONA	DR								nere if you,	,	
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete sp	oaces below.	Sta	te	ZIP code			this fund. (tly, want \$3	
ORLANDO				FL 32			32828			ow will not		
Foreign country	y name		F	Foreign province/state/county			Foreign postal	Foreign postal code you				
										∐ You	Spouse	
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a	•				•	, .	. ,	Yes	⊠ No	
Standard		eone can claim: You as a de				a dependent						
Deduction Deduction		Spouse itemizes on a separate return	•			•						
Age/Blindness	S You:	☐ Were born before January 2, 1	958	Are blind S	pouse	: Was bor	n before Jan	uary 2	, 1958	☐ Is bli	nd	
Dependent	s (see	instructions):		(2) Social secur	ity	(3) Relationsh	ip (4) Check	the bo	x if qualit	fies for (see	instructions):	
If more		rst name Last name		number	-	to you	Chilo	tax cr	edit	Credit for oth	er dependents	
than four												
dependents, see instruction:												
and check												
here \square]											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .					1a	7	77,651.	
	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							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 instruct	,						1h		0.	
instructions.	i	Nontaxable combat pay election (see instr	uctions)		<u>1i</u>						
	Z	Add lines 1a through 1h							1z		77,651.	
Attach Sch. B	2a	· -	2a			axable interest			2b			
if required.	<u>3a</u>		3a			rdinary divide			3b			
	4a	_	4a			axable amoun						
Standard Deduction for—	5a	_	5a			axable amoun						
Single or	6a	, _	6a			axable amoun			6b			
Married filing separately,	c	If you elect to use the lump-sum election method, check here (see instructions)							┤ ├_			
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here										
Married filing jointly or	8	·	Other income from Schedule 1, line 10						8		9,070.	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-					9		8,581.	
surviving spouse, \$25,900	10	Adjustments to income from Sche							10			
Head of household,	11	Subtract line 10 from line 9. This is							11		58,581.	
\$19,400	12	Standard deduction or itemized							12		2,950.	
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A									0.050	
Standard Deduction,	14	Add lines 12 and 13							14		.2 , 950.	
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								1 5	55,631.	

Form 1040 (2022	2)									Pa	age 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	7,85	55.
Credits	17	Amount from Schedule 2, lir	ne 3						17		
	18	Add lines 16 and 17							18	7,85	55.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812				19		
	20	Amount from Schedule 3, lir	ne 8						20		
	21	Add lines 19 and 20							21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	7,85	55.
	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	7,85	 55.
Payments	25	Federal income tax withheld									
•	а	Form(s) W-2				25a		,851			
	b	Form(s) 1099				25b					
	С	Other forms (see instruction	s)			25c					
	d	Add lines 25a through 25c							25d	9,85	i1.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return				26		
qualifying child,	27	Earned income credit (EIC)				27					
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28					
	29	American opportunity credit	from Form 8863	3, line 8		29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lir	ne 15			31					
	32	,									
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	9,85	<u>.</u>
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you	overpaid		34	1,99	ð6.
riciana	35a	5a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here							35a	1,99)6 .
Direct deposit?	b	Routing number 0 5 3] Chec	king 🗌	Saving	s		
See instructions.	d	Account number 2 3 7	0 3 1 0	3 8 2 !	5 4						
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36					
Amount	37	Subtract line 33 from line 24									
You Owe		For details on how to pay, g	•	-		1	 I		37		
	38	Estimated tax penalty (see in				38					
Third Party		you want to allow another	•				□ v 0			X No	
Designee		structions									
		Designee's Phone Personal identifie no. number (PIN)									
Sign		der penalties of perjury, I declare									
Here		belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which								•	•
	Yo	ur signature	Date	te Your occupation					ent you an Identity PIN, enter it here		
Joint return?				SOFTWARE ENGINEER					ee inst.)	IIV, CINCI II NOIC	\Box
See instructions.	Spouse's signature. If a joint return, both must sign.		Date				If t	If the IRS sent your spouse an			
Keep a copy for your records.								•	ection PIN, enter i	it here	
your records.								(Si	ee inst.)		Ш
	Phone no. (920) 396–2625 Email address BOGINENISRAVAN					GMAIL.CO			Ta		
Paid		eparer's name	Preparer's signat			Date		PTIN		Check if:	
Preparer	SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/10/2023 P0208					Self-employ					
Use Only	Fir	m's name GLOBAL TA						Pł	Phone no. (678) 965-9522		
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Fir							rm's EIN	84-31719	965	

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

REV 02/05/23 PRO

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Form **1040** (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 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	Name(s) shown on Form 1040, 1040-SR, or 1040-NR					
SRAV	SRAVAN KUMAR BOGINENI 134-4					
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. Att	ach Schedule	Ε.	5	-9,070.	
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				
	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				
	Section 951(a) inclusion (see instructions)	8n				
0	Section 951A(a) inclusion (see instructions)	80				
p	Taxable distributions from an ABLE account (see instructions)	8p 8q				
q	Scholarship and fellowship grants not reported on Form W-2	8r				
r s	Nontaxable amount of Medicaid waiver payments included on Form	OI				
5	1040, line 1a or 1d	8s ()			
t	Pension or annuity from a nonqualifed deferred compensation plan or	03 (
	a nongovernmental section 457 plan	8t				
u	Wages earned while incarcerated	8u				
z	Other income. List type and amount:	-				
_	and the state of t	8z				
9	Total other income. Add lines 8a through 8z			9		

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

-9,070.

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

Par	II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b			
	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	, ,, ,, , , , , , , , , , , , , , , ,	4a		
b	Deductible expenses related to income reported on line 8l from the			
		4b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	·	4c		
d		4d		
е	Repayment of supplemental unemployment benefits under the Trade			
		4e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	4g		
h	Attorney fees and court costs for actions involving certain unlawful			
	,	4h		
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	41-		
_	,	4k	_	
Z	Other adjustments. List type and amount:	4z		
25			05	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . E		26	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u> </u>		

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0074

Name(s) shown on return Your social security number SRAVAN KUMAR BOGINENI 134-45-2126 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 . Physical address of each property (street, city, state, ZIP code) 1a H.NO5-4-145 KAMALANAGAR VA NASTALIPURAMHYDERABAD TELANGANA IN 500060 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed 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: 3 623. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 2,258. 7 Cleaning and maintenance. 7 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 1,567. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 1,377. 14 14 Repairs 2,802. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,689. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 9,693. 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 -9,070. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 9,070.) 623. 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 9,693. 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 9,070. 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 .

-9,070.