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	nission Identification Number (SID)	
Taxpay	yer's name	Social security number
CHA	AYA SHETTIHALLIPAPAREDDY	207-97-2594
Spouse	e's name	Spouse's social security number
Par	Tax Return Information — Tax Year Ending December 31, 2022	(Enter year you are authorizing.)
	whole dollars only on lines 1 through 5.	Enter year you are authorizing.)
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1	Adjusted gross income	1 105,721.
2	Total tax	
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	3,510.
Part		
Under	r penalties of perjury, I declare that I have examined a copy of the income tax return (original or	11 1
return to sen for any Agent payme author payme busine taxes persor	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part (original or amended) I am now authorizing. I consent to allow my intermediate service provide and my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reast y delay in processing the return or refund, and (c) the date of any refund. If applicable, I author to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial rization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellages days prior to the payment (settlement) date. I also authorize the financial institutions involv to receive confidential information necessary to answer inquiries and resolve issues related nal identification number (PIN) below is my signature for the income tax return (original or ame onic Funds Withdrawal Consent.	r, transmitter, or electronic return originator (ERO) on for rejection of the transmission, (b) the reason are the U.S. Treasury and its designated Financial count indicated in the tax preparation software for institution to debit the entry to this account. This terminate the authorization. To revoke (cancel) a tition requests must be received no later than 2 and in the processing of the electronic payment of to the payment. I further acknowledge that the
Taxpa	ayer's PIN: check one box only	
		enerate my PIN 7 2 5 9 4 as my
	Signature on the income tax return (original or amended) I am now authorizing.	Enter five digits, but don't enter all zeros
	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner P below.	
Your	signature >	ate▶
_		
Spou	ise's PIN: check one box only	
L		enerate my PIN as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Enter five digits, but don't enter all zeros
_		I) Lam now outhorizing Chock this box anh
L	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner P below.	
Spou	se's signature D	ate ▶
	Practitioner PIN Method Returns Only—continue	below
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 2 4 9 6 6 1 9 8 9 Don't enter all zeros
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual in rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I sements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providence.	am submitting this return in accordance with the
FR∩'	s signature ▶ □	ate ▶
	ERO Must Retain This Form — See Instruct	

Don't Submit This Form to the IRS Unless Requested To Do So

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.

_		Single Married filing jointly	Marrie	ed filing separately (M	1FS)	Head of	household (I	HOH)		ifying survi	iving
Check only one box.	If you	u checked the MFS box, enter the na	ame of y	our spouse. If you ch	neck	ed the HOH or	QSS box, e	enter th		, ,	e qualifying
		on is a child but not your dependent		INATH VEMMENTH							
Your first name and middle initial Last name						Your social security number					
CHAYA			SHET	TIHALLIPAPAR	EDI	Υ			207-97-2594		
If joint return, spouse's first name and middle initial				me					Spouse's social security number		
									753-19-2249		
Home address (numbe	r and street). If you have a P.O. box, see	instructio	ons.			Apt. no				n Campaign
_5550 E D	EER	VALLEY DR 126								ere if you, of filing joint	
City, town, or po	ost offic	ce. If you have a foreign address, also co	emplete spaces below. State ZIF					to		this fund.	
PHOENIX			AZ			85054			box below will not change		
Foreign country	name		Foreign province/state/county			Foreign post	foreign postal code your		ur tax or refund.		
						_				You	Spouse
Digital		y time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a								Yes	⊠ No
Assets Standard		eone can claim: You as a de					asset): (Se	HISHU	Cuons.)		<u> </u>
Deduction		Spouse itemizes on a separate return				а асренает					
Age/Blindness	You:	☐ Were born before January 2, 19	958	Are blind Spo	use	: Was bor	n before Ja	nuary 2	, 1958	Is bli	nd
Dependents	(see i	instructions):		(2) Social security		(3) Relationsh	ip (4) Ched	k the bo	x if qualit	ies for (see i	nstructions):
If more	(1) Fi	rst name Last name	number		to you		Child tax of		edit	Credit for oth	er dependents
than four dependents,								Щ			
see instructions	. ——							<u> </u>			
and check								<u> </u>			
here		T. I	4 /	· · · · · ·							
Income	1a	Total amount from Form(s) W-2, bo	,						1a		8,121.
Attach Form(s)	b c	Household employee wages not re Tip income not reported on line 1a							1b		
W-2 here. Also	d	•	•			ctions)			1d		
attach Forms W-2G and	e	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
1099-R if tax	f	•			•				1e		
was withheld.	g g	Employer-provided adoption benefits from Form 8839, line 29							1g		
If you did not get a Form	h								1h		0.
W-2, see	i	Nontaxable combat pay election (see instructions)									
instructions.	z	Add lines 1a through 1h								11	8,121.
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest	t		2b		
if required.	3a	Qualified dividends	3a		b 0	rdinary divide	nds		3b		
	4a	IRA distributions	la		b Ta	axable amoun	t		4b		
Standard	5a	Pensions and annuities	ā		b Ta	axable amoun	t		5b		
Deduction for— Single or	6a	Social security benefits	Sa		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 Schedule D if required. If not required, check here									
Married filing jointly or	8	Other income from Schedule 1, line 10									2,400.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,			ome				9	10	5,721.
surviving spouse, \$25,900	10	Adjustments to income from Scheo	,						10	_	
Head of household,	11	Subtract line 10 from line 9. This is	•						11		5,721.
\$19,400	12	Standard deduction or itemized							12 13		2,950.
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A								_	
Standard Deduction,	14	Add lines 12 and 13							14		<u>2,950.</u>
see instructions.	15	Subtract line 14 from line 11. If zer	or less	s, enter -u This is yo	our t	axable incom	ie		15	9	2,771.

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	16,102.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	16,102.
	19	Child tax credit or credit for other dependents from Schedule 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	16,102.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	16,102.
Payments	25	Federal income tax withheld from:		
,	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	22,018.
K	26	2022 estimated tax payments and amount applied from 2021 return	26	
If you have a qualifying child,	27	Earned income credit (EIC)		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	22,018.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	5,916.
neiulia	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	5,916.
Direct deposit?	b	Routing number X X X X X X X X X X X C Type: Checking Savings		
See instructions.	d	Account number X X X X X X X X X X X X X X X X X X X		
	36	Amount of line 34 you want applied to your 2023 estimated tax		
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
Third Party Designee		you want to allow another person to discuss this return with the IRS? See tructions	nelow.	X No
D 00191100	De	signee's Phone Personal identif		
	nai			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		
Here	Yo	ur signature Date Your occupation If the	IRS se	nt you an Identity
				IN, enter it here
Joint return?		SOFTWARE ENGINEER (see		
See instructions. Keep a copy for your records.	Sp	Ident		nt your spouse an ection PIN, enter it here
	Ph	one no. (203)491-6718 Email address CHAYAMES12@GMAIL.COM		
		eparer's name Preparer's signature Date PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/01/2023 P02082	2703	Self-employed
Preparer				678)965-9522
Use Only			's EIN	88-2145487

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

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

CHAYA SHETTIHALLIPAPAREDDY

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

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

Sequence No. 01
Your social security number 207-97-2594

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	-12,400.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b	4	
C	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		
I	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	00 (
		8s (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan	8t		
	Wages earned while incarcerated	8u	-	
u	Other income. List type and amount:	ou		
Z		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			-12 400

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

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

Par	t II Adjustments to Income			
11	Educator expenses	[1	11	
12	Certain business expenses of reservists, performing artists, and fee-basis governing	ment		
	officials. Attach Form 2106	1	2	
13	Health savings account deduction. Attach Form 8889		3	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		4	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		6	
17	Self-employed health insurance deduction		7	
18	Penalty on early withdrawal of savings		8	
19a	Alimony paid	. 1	9a	
b	Recipient's SSN			
C	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21 22	Student loan interest deduction		22	
22 23	Archer MSA deduction		23	
23 24	Other adjustments:		.5	
- -	Jury duty pay (see instructions)			
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			
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			
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
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:			
	24z			
25	Total other adjustments. Add lines 24a through 24z	2	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here an	nd on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	2	26	

BAA

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.

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

Attachment Sequence No. 13

OMB No. 1545-0074

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

Your social security number 207-97-2594

CHA	YA SHETTIHALL	IPAPARED	DY					2	107-97-	2594	
Par	Note: If you a	re in the busi	n Rental Real Est ness of renting persona Form 4835 on page 2,	al property,			instruc	ctions. If you are	an individu	ual, repo	ort farm
			2022 that would requ								
В	If "Yes," did you or	will you file	required Form(s) 109	99?						☐ Ye	s 🗌 No
1a	Physical address	s of each pr	operty (street, city, s	tate, ZIP c	ode)						
Α											
В										17	
С											
1b	Type of Property (from list below)	abov	each rental real estat e, report the numbe	Fair Rental Days			Personal Days	QJV			
Α	3		onal use days. Chec			Α		365		0	
В			u meet the requireme fied joint venture. Se			В					
С		quan	nica joint vontare. Oc	oc mondon	0110.	C					
1	of Property: Single Family Resid Multi-Family Resid		3 Vacation/Short-Te 4 Commercial	erm Rental	5 Lar 6 Ro	nd yalties		Self-Rental Other (describ	e)		
								Properties	:		
Incor	ne:			_		Α		В			С
3				-	3	6	00.				
4		d			4						
	nses:										
5	_			-	5						
6			ons)		6						
7	_				7	1,5	00.				
8					8						
9					9						
10			fees		10		0.0				
11					11	1,3	00.				
12		-	nks, etc. (see instruc		12						
13					13	2 2	00				
14	•				14		00.				
15	Supplies				15 16	3,0	00.				
16 17	Taxes			<u> </u>	17	4,0	0.0				
18	Utilities		letion	I .	18	4,0	00.				
19	Other (list)	erise or dep	letion		19						
20		Add lines 5 t	hrough 19		20	13,0	00				
21	•		ents) and/or 4 (royal	_		13,0	00.				
21		see instructi	ons to find out if you	u must	21	-12,4	00.				
22			loss after limitation, ns)	if any,	22 (12,40		()()
23a	Total of all amoun	nts reported	on line 3 for all renta	al propertie	es		23a	(500.		
b			on line 4 for all roya		ies		23b				
С			on line 12 for all pro				23c				
d	Total of all amoun	nts reported	on line 18 for all pro	perties .			23d				
е	Total of all amoun	nts reported	on line 20 for all pro	perties .			23e	13,0	000.		
24	Income. Add pos	sitive amoui	nts shown on line 21	. Do not ir	nclude any	losses			24		
25	Losses. Add roya	lty losses fro	m line 21 and rental r	eal estate l	osses from	line 22. E	nter to	otal losses here	25 (1	L2,400.)
26	here. If Parts II,	III, IV, and	royalty income or line 40 on page 2	do not ap	ply to you	, also er	nter th	is amount on			10 400
	ochequie i (Form	ı 1040), iine	5. Otherwise, includ	e tnis amo	unt in the t	otai on II	ne 4 f	on page 2 .	26	_	-12,400.