Form 8879
(Rev. January 2021)
Depertment of the Treesury

epartment 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.

Submission Identification Number (SID)

Taxpay	r's name	Social security num	ber
VIN	AY SAI VADAPALLI	150-87-065	64
Spouse	s name	Spouse's social sec	urity number
Part	Tax Return Information – Tax Year Ending December 31, 2022 (Ent	er year you are au	Ithorizing.)
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	Adjusted gross income	1	60,628.
2	Total tax	2	6,106.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	8,038.
4	Amount you want refunded to you	4	1,932.
5	Amount you owe	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	Lauthorize	GLOBAL TA	AXES LLO	to to	enter or	generate m	v Pll
	rautionze			10		generale m	y I II

	7	0	6	5	4	
	as					

my

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 authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

as mv Enter five digits, but don't enter all zeros

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 authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature 🕨	Date 🕨				
Practitioner PIN Method Returns Only—continue below					
Part III Certification and Authentication – Prac	titioner PIN Method Only				
ERO's EFIN/PIN. Enter your six-digit EFIN followed by you	r five-digit self-selected PIN. 2 2 2 4 9 6 6 1 9 8 9				

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature 🕨	Date 🕨	
Don't S		
For Denemicarly Deduction Act Nation and		Earm 8879 (Bay, 01 2021)

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

REV 02/10/23 PRO

E 1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn 202	22	OMB No. 1545	5-0074	IRS U	se Only	–Do not v	write or stap	ble in this spac	ce.
Filing Status Check only one box.	lf yo	Single Arried filing jointly u checked the MFS box, enter the n son is a child but not your dependent	ame of y	ed filing separately vour spouse. If you	,				,	spc	alifying su buse (QSS s name if	S)	ying
Your first name		, ,	Last na	me						Your se	ocial secu	rity numbe	ər
VINAY SA	т			PALLI							87-06	-	
		s first name and middle initial	Last na									security nun	mber
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.				Apt. no.		Preside	ential Elec	ction Camp	aiar
5100 USA	AB	LVD						2106				u, or your	Ũ
		ce. If you have a foreign address, also co	mplete s	paces below.	Sta	te	T	code				ointly, want	
SAN ANTC	ONIO				TΣ	ζ	78	240		Ŭ		d. Checking ot change	g a
Foreign country	name		F	oreign province/state	e/count	ty	Fore	ign postal	code	1	x or refun	0	
											Υοι	J 🗌 Spo	ouse
Digital Assets		ny time during 2022, did you: (a) rec aange, gift, or otherwise dispose of a									_	s 🛛 No)
Standard Deduction	_	eone can claim:	•	— .									
Age/Blindness	You	: 🗌 Were born before January 2, 1	958	Are blind S	pouse	: 🗌 Was bo	rn be	fore Jan	uary 2	2, 1958	ls	blind	
Dependents	-			(2) Social secur	itv	(3) Relationsh	ain	(4) Check	the b	ox if qual	lifies for (se	ee instructio	ons):
If more		irst name Last name		number	,	to you		Child	l tax c	redit	Credit for	other depend	dente
than four													
dependents,													
see instructions and check	s —												
here													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions) .						. 1a	a	67,628	8.
meome	b	Household employee wages not re								. 11	b		
Attach Form(s)	с	Tip income not reported on line 1a	(see ins	structions)						. 10	c		
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s) W-2 (see	e instru	ictions)				. 10	d		
W-2G and	е	Taxable dependent care benefits f	rom For	m 2441, line 26						. 10	e		
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	n Form 8839, line 2	9.					. 1	f		
If you did not	g	Wages from Form 8919, line 6 .								. 1	g		
get a Form	h	Other earned income (see instruct	ions) .							. 11	h		0.
W-2, see instructions.	i	Nontaxable combat pay election (see instr	ructions)		<u>1</u> i	i						
	z	Add lines 1a through 1h	• • •							. 1:	z	67,628	8.
Attach Sch. B	2a	Tax-exempt interest	2a		bΤ	axable interes	t			. 21	b		
if required.	3a		3a			ordinary divide				. 31	b		
	4a	IRA distributions	4a		bΤ	axable amoun	nt.		•	. 41	b		
Standard Deduction for –	5a		5a			axable amoun				. 51			
Single or	6a	, _	6a			axable amoun	nt.		•	. 61	b		
Married filing separately,	С	If you elect to use the lump-sum e		,		,	•		. L				
\$12,950	7	Capital gain or (loss). Attach Sche					•		. [
 Married filing jointly or 	8	Other income from Schedule 1, lin		 			•		•	. 8		-7,000	
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7					·		·	. 9		60,628	8.
\$25,900	10	Adjustments to income from Sche	-				·		·	. 10			
 Head of household, 	11	Subtract line 10 from line 9. This is	•				•		·	· 1		60,62	
\$19,400	12	Standard deduction or itemized					·		•	. 12		12,95	υ.
 If you checked any box under 	13	Qualified business income deduct					·		•	. 1:		10.05	
Standard Deduction,	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer							·	. 14		12,95	
see instructions.	15		U UI IES		your		e		·	. 1		47,678	0.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)									Page
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3			16	6,106.
Credits	17	Amount from Schedule 2, lir	ne3					[17	
	18	Add lines 16 and 17						[18	6,106.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			[19	
	20	Amount from Schedule 3, lir	ne8					[20	
	21	Add lines 19 and 20						[21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				[22	6,106.
	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	6,106.
Payments	25	Federal income tax withheld								
2	а	Form(s) W-2				25a	8,	038.		
	b	Form(s) 1099				25b				
	с	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c							25d	8,038.
If you have a	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return			[26	
qualifying child,	27	Earned income credit (EIC)			No	27				
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	2		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	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	undable o	credits	[32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	8,038.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you ov	erpaid	[34	1,932.
	35a	Amount of line 34 you want			is attached, che	ck here		. 🗆	35a	1,932.
Direct deposit?	b	Routing number 0 2 1				Checkin	g 🗌 Sa	vings		
See instructions.	d	Account number 3 8 1	0 4 9 1	1 2 3 2	2 2					
	36	Amount of line 34 you want a	applied to your	2023 estimate	edtax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g							07	
	38	Estimated tax penalty (see in	-			38			37	
Third Party Designee		you want to allow another	•				Yes. Con	nplete be	low.	× No
Designee		signee's		Phone				al identific		
	nai			no.			numbe	r (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com			1 2 0			,		, 0
Here		ur signature		Date	Your occupation					nt you an Identity
	10	ar oignataro		Duto						N, enter it here
Joint return?					SOFTWARE H	ENGINE	ER	(see ir	ist.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupat	ion		Identit	y Prote	nt your spouse an ection PIN, enter it he
your records.								(see in	st.)	
		one no. (860)839-677		Email address	VINAYSAIVADA					
Paid		eparer's name	Preparer's signat			Date		PTIN		Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/21	/2023 P	02082	703	Self-employed
Use Only	Fir	m's name GLOBAL TA						Phone	no. (678)965-9522
			Y CT E BRU	NSWICK N	J 08816			Firm's	EIN	84-3171965
Go to www.ire a	ov/Form	n1040 for instructions and the late	et information		DAA					Earm 1040 (202

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

BAA REV 02/10/23 PRO

Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20

Department of the Treasury Internal Revenue Service		Attachment Sequence No. 01	
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
VINAY SAI VAD	APALLI	150-87	-0654

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	Alimony received		2 a	
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 E .	5	-7,000.
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		
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		
Ο	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	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	k, or 1040-NR, line 8	10	-7,000.

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

Schedule 1 (Form 1040) 2022

Par	II Adjustments to Income					
1	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee			vernmen	t	
	officials. Attach Form 2106				12	
13	Health savings account deduction. Attach Form 8889					
14	Moving expenses for members of the Armed Forces. Attach Form 3903					
15	Deductible part of self-employment tax. Attach Schedule SE					
16	Self-employed SEP, SIMPLE, and qualified plans					
17	Self-employed health insurance deduction				17	
8	Penalty on early withdrawal of savings					
19a						
b	Recipient's SSN					
	Date of original divorce or separation agreement (see instructions):	•			-	
20	IRA deduction					
21	Student loan interest deduction					
22	Reserved for future use					
23	Archer MSA deduction				23	
24	Other adjustments:		• •		20	
a		24a				
	Deductible expenses related to income reported on line 81 from the	2-14				
D		24b				
с	Nontaxable amount of the value of Olympic and Paralympic medals	2-10				
U	and USOC prize money reported on line 8m	24c				
d		24d				
e	Repayment of supplemental unemployment benefits under the Trade	2-14			_	
C	Act of 1974	24e				
f	Contributions to section 501(c)(18)(D) pension plans	24f			_	
q		24g			_	
·	Attorney fees and court costs for actions involving certain unlawful	279			_	
		24h				
		2411			_	
	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	24i				
;	Housing deduction from Form 2555	24i 24j				
	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24j			_	
ĸ		24k				
_		24K			_	
Z	Other adjustments. List type and amount:	24z				
					05	
25	Total other adjustments. Add lines 24a through 24z					
26	Add lines 11 through 23 and 25. These are your adjustments to income					
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	 REV			-	le 1 (Form 1040) 202

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

(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.

)	2022
	Attachment Sequence No. 13

) shown on return					150-87-0654				
	AY SAI VADAPALLI		voltino				120-0	/-0054		
Part	Income or Loss From Rental Real Estate ar Note: If you are in the business of renting personal prope			C See	instruc	tions If you	are an indiv	vidual ren	ort farm	
	rental income or loss from Form 4835 on page 2, line 40.	rty, use	ochedule	0.000	motruc	lions. Il you i		nauai, rep	ortiann	
A D	Did you make any payments in 2022 that would require you	ı to file	Form(s) 1	099? 5	See ins	tructions .		. 🗌 Ye	es 🛛 No	
B li	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No	
1a	Physical address of each property (street, city, state, ZI									
A	Seetharamapuram Vijayawada ANDHRA PRA		,	002						
B			IN JZC	002						
1b	Type of Property 2 For each rental real estate prope	arty liet	tod		Eai	r Rental	Person			
		the number of fair rental and		_		Days	Da		QJV	
Α	personal use days. Check the Q			Α	365		0			
В	if you meet the requirements to			B						
С	qualified joint venture. See instru	uctions	5.	C						
	of Property:									
	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Land		7	Self-Rental				
	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)			
	,		,							
						Propert	les:		•	
Incom		•		<u>A</u>	00.	В			С	
3 4	Rents received	3		5	00.					
	Royalties received	4								
Expen 5		5								
6	Advertising	6								
7	Cleaning and maintenance	7		1,0	00					
8		8		1,0	00.					
9		9								
10	Legal and other professional fees	10								
11	Management fees	11		8	00.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14		2,0	00.					
15	Supplies	15		1,5						
16	Taxes	16		-						
17	Utilities	17		2,2	00.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		7,5	00.					
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		-7,0	00.					
22	Deductible rental real estate loss after limitation, if any,									
	on Form 8582 (see instructions)	22	(7,00	0.)()	()	
23a	Total of all amounts reported on line 3 for all rental prope				23a		500.			
b	Total of all amounts reported on line 4 for all royalty prop				23b					
С	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties				23d					
е	Total of all amounts reported on line 20 for all properties				23e		7,500.			
24	Income. Add positive amounts shown on line 21. Do no		-		• •		. 24	1		
25	Losses. Add royalty losses from line 21 and rental real esta							(7,000.)	
26	Total rental real estate and royalty income or (loss). here. If Parts II, III, IV, and line 40 on page 2 do not									

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2