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

				_		
Submission Identification	on Number (SID)					
Taxpayer's name			Social securi	ty number		
VAIBHAV REDDY N	MODDU		690-40	-3166		
Spouse's name			Spouse's soo	cial security	y number	
Part I Tax Retu	ırn Information — Tax Year	Ending December 31, 20	 22 (Enter year you a	re autho	orizing.)	
Enter whole dollars onl		<u> </u>				
	lers use line 4 only. Leave lines 1	, 2, 3, and 5 blank.				
	-			1	109,8	385.
2 Total tax				2	17,0	098.
3 Federal income	tax withheld from Form(s) W-2 ar	nd Form(s) 1099		3	17,5	509.
4 Amount you wa	int refunded to you			4		411.
				5		
Part II Taxpayer	r Declaration and Signature	Authorization (Be sure you	get and keep a cop	y of you	ır return	1)
return (original or amende to send my return to the I for any delay in processin Agent to initiate an ACH expayment of my federal tax authorization is to remain payment, I must contact business days prior to the taxes to receive confidence personal identification number Electronic Funds Withdraw Taxpayer's PIN: check signature on the will enter my	and I am now authorizing. I consent to IRS and to receive from the IRS (a) and the return or refund, and (c) the detectronic funds withdrawal (direct dexes owed on this return and/or a pay in full force and effect until I notify the U.S. Treasury Financial Agent e payment (settlement) date. I also a nitial information necessary to answimber (PIN) below is my signature for wal Consent. k one box only GLOBAL TAXES LLC ERO firm name the income tax return (original or a PIN as my signature on the income	amended) I am now authorizing. ome tax return (original or amend	der, transmitter, or electrons of for rejection of the transmitter to the transmitter to the transmitter to the transmitter to terminate the authorized authorized in the polyed in the processing of the transmitter to the payment. I furnended I am now author generate my PIN Output	onic return ransmission of its des ax prepara e entry to tradition. To the received ff the elect ther acknowizing and, at the received of the received the received of the rec	n originator on, (b) the signated Firation softw this accour revoke (card no later tronic paynowledge the if application of the site, but ill zeros	r (ERO) reason nancial vare for nt. This uncel) a than 2 nent of hat the ole, my as my x only
		urn is filed using the Practitioner				
Your signature ►			Date ►			
Spaugo's DIN, shock	one boy only					
Spouse's PIN: check	one box only	to optor or	generate my PIN			00 001
signature on t			En do ed) I am now authorizi		its, but Il zeros ck this box	
below.	,	J	Date ▶		·	
Spouse's signature ►	Practitioner PIN	Method Returns Only—contin				
Part III Certification		Practitioner PIN Method Only				
	r your six-digit EFIN followed by		2 2 2 4 9	6 6 1 er all zeros		9
authorized to file for tax	year indicated above for the taxpay	signature for the electronic individua er(s) indicated above. I confirm that landbook for Authorized IRS e-file Pro	I am submitting this retu	urn in acc	ordance w	
ERO's signature ▶			Date ▶			
Li 10 3 Signature	FRO Must Da	tain This Form — See Instru				
		tana i i i i i i i i i i i i i i i i i i				

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 Check only one box.	If yo	u checked the MFS box, enter the n	ame of y	ed filing separately (Nour spouse. If you cl					spou	ise (QSS)	
		on is a child but not your dependent							l		
Your first name and middle initial Last name							Your social security number				
							10-316				
It joint return, s	pouse's	first name and middle initial	Last nai	me					Spouse'	s social sed	curity number
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Apt. ne	D.	Preside	ntial Election	on Campaign
3200 PA	RKWO	DD BLVD					923			ere if you,	
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	paces below.	Stat	е	ZIP code			0,	itly, want \$3 Checking a
PLANO					TX		75093		box belo	ow will not	change
Foreign countr	y name		F	Foreign province/state/o	county	/	Foreign pos	tal code	your tax	or refund.	_
										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:									
Deduction		Bpouse itemizes on a separate retur	•								
Age/Blindness	s You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	rn before Ja	anuary 2	2, 1958	☐ Is bl	ind
Dependent	s (see	instructions):		(2) Social security		(3) Relationsh	nip (4) Che	ck the b	ox if qualit	ies for (see	instructions):
If more	(1) Fi	rst name Last name		number		to you	Ch	ild tax c	redit	Credit for otl	her dependents
than four										[
dependents, see instruction	s ——									[
and check	. —										
here L										[<u> </u>
Income	1a	Total amount from Form(s) W-2, b	,	,					. 1a	12	22,685.
	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)									
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									
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29									
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 (s	see instr	ructions)		<u>1i</u>				1.0	20 605
	<u>z</u>	Add lines 1a through 1h							. 1z		22,685.
Attach Sch. B if required.	2a	· –	2a			axable interes			. 2b		
ii required.	3a		3a			rdinary divide			. 3b		
	4a	_	4a			axable amoun			. 4b		
Standard Deduction for—	5a		5a 6a			axable amoun axable amoun			. 5b		
Single or	6a	If you elect to use the lump-sum e		mathad abaak bara					. 00		
Married filing separately,	С 7	•		•	•	,		[7		
\$12,950 Married filing	8	Other income from Schedule 1, lin	apital gain or (loss). Attach Schedule D if required. If not required, check here								12,800.
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							. 8		09,885.
Qualifying surviving spouse,	10	Adjustments to income from Sche	-	•					. 10		,,,,,,,,,,
\$25,900 • Head of	11	Subtract line 10 from line 9. This is	,						. 11		 09,885.
household,	12	Standard deduction or itemized	•	-					. 12		12,950.
\$19,400 If you checked	13	Qualified business income deduct		•	,	5-A			. 13		,
any box under Standard	14	Add lines 12 and 13							. 14		12,950.
Deduction,	15	Subtract line 14 from line 11. If zer							. 15		96,935.
see instructions.				•							

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from For	rm(s): 1 881	4 2 4972	3 🗌		16	17,098.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	17,098.
	19	Child tax credit or credit for other depende	ents 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	s, enter -0				22	17,098.
	23	Other taxes, including self-employment tax	x, from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your total tax					24	17,098.
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2			25 a 1	7,509.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	17,509.
If you have a	26	2022 estimated tax payments and amount	applied from 20	021 return			26	
qualifying child,	27	Earned income credit (EIC)			27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 88	12		28			
	29	American opportunity credit from Form 88	63, 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 yo	ur total other p	ayments and refu	indable credits		32	
	33	Add lines 25d, 26, and 32. These are your	total payments				33	17,509.
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33	. This is the amour	nt you overpaid		34	411.
riciana	35a	Amount of line 34 you want refunded to y	ou. If Form 8888	3 is attached, chec	ck here	🗌	35a	411.
Direct deposit?	b	Routing number 1 0 3 0 0 0 0						
See instructions.	d	Account number 3 1 6 8 0 6 0						
	36	Amount of line 34 you want applied to you	ur 2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. This is the au For details on how to pay, go to www.irs.g	•				37	
	38	Estimated tax penalty (see instructions)			38			
Third Party Designee		you want to allow another person to distructions				omplete b	pelow.	X No
Ü		signee's	Phone			sonal identi	fication	
	na	me	no.		nun	ber (PIN)		
Sign Here		der penalties of perjury, I declare that I have exam ief, they are true, correct, and complete. Declaration						
TICIC	Yo	ur signature	Date	Your occupation				nt you an Identity
				COETWADE			ection Pi inst.)	N, enter it here
Joint return? See instructions.	Sn	ouse's signature. If a joint return, both must sign.	Date	SOFTWARE E				nt your spouse an
Keep a copy for your records.	Ор	ouse's signature. If a joint return, bour must sign.	Date	opouse s occupan	OH	Iden:		ection PIN, enter it here
	Ph	one no. (913)523-5746	Email address	VAIBHAVREDD	Y97@GMAIL.C	OM		
Doid	Pre	eparer's name Preparer's sign	nature		Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	A RAM SAGAR	GUPTA TALLAM	01/13/2023	P0208	2703	Self-employed
Preparer Use Only	Fir	m's name GLOBAL TAXES LLC				Phor	ne no. (678)965-9522
Use Only	Fin	m's address 245 ROONEY CT E BF	RUNSWICK N	J 08816			's EIN	88-2145487
								1010

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	ocial s	ecurity number			
VAIB	HAV REDDY MODDU		690-4	10-31	66
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	-12,800.
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			
	Olympic and Paralympic medals and USOC prize money (see	OI		-	
Ш	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)	8g			
r	Scholarship and fellowship grants not reported on Form W-2	8r			
	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			
	Wages earned while incarcerated	8u			
Z	Other income. List type and amount:				
		87			

Total other income. Add lines 8a through 8z

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

-12,800.

10

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 governr			
	officials. Attach Form 2106	L	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	L	23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l 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)			
İ	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:			
25			25	
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 . Enter here an Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	Form 1040 or 1040-on, little 10, or Form 1040-inn, little 10a		20	

SCHEDULE E (Form 1040)

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

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. Your social security number

OMB No. 1545-0074 Attachment Sequence No. **13**

VAI	BHAV REDDY MODDU						690-40	0-3166	
Par									
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	erty, use	Schedul	e C. See	instruc	ctions. If you are	an indiv	ridual, rep	ort farm
Α	Did you make any payments in 2022 that would require you		Form(s)	1099? S	ee ins	tructions		. \(\text{Ye}	s X No
		s," did you or will you file required Form(s) 1099?							
1a									
	1 1 3 1 3 1 3 1		<u> </u>	N N T N T N	T E O (2069			
<u>A</u> B	SRI RAM NAGAR COLONY HYDERABAD, L.B.NA	GAR I	LELANG	ANA II	N 500	0068			
1b	Type of Property 2 For each rental real estate property	orty liet	tod		Fai	ir Rental	Person	al Hea	
10	(from list below) above, report the number of fair					Days	Day		QJV
A	personal use days. Check the C	(JV box	k only	Α		365		0	
В	if you meet the requirements to			В					
С	qualified joint venture. See instr	uctions	5.	С					
Туре	of Property:								
	Single Family Residence 3 Vacation/Short-Term Rer	ntal	5 Land			Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (describ	oe)		
						Properties	s:		
Incor	me:			Α		В			С
3	Rents received	3		5	90.				
4	Royalties received	4							
Expe	nses:								
5	Advertising								
6	Auto and travel (see instructions)								
7	Cleaning and maintenance			1,4	80.				
8	Commissions								
9	Insurance								
10	Legal and other professional fees								
11	Management fees			1,3	20.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest			2 1	20				
14	Repairs			3,1					
15 16	Supplies			3,6	00.				
17	Utilities	17		3,8	70				
18	Depreciation expense or depletion			3,0	70.				
19									
20	Other (list) Total expenses. Add lines 5 through 19	20		13,3	90.				
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			-12,8	00.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(12,80	0.)(,)(()
23a	Total of all amounts reported on line 3 for all rental proper				23a		590.		
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	13,	390.		
24	Income. Add positive amounts shown on line 21. Do no		-				24	,	
25	Losses. Add royalty losses from line 21 and rental real esta								12,800.)
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 a						26		-12,800.

Passive Activity Loss Limitations

See separate instructions.

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

OMB No. 1545-1008

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

Go to www.irs.gov/Form8582 for instructions and the latest information.

	Attachment Sequence No. 85	58
Identify	ing number	
C 0 0	10 2166	

VAII	BHAV REDDY MODDU				690	-40	-3166
Pa	-						
	Caution: Complete Parts IV ar	nd V before compl	eting Part I.				
	al Real Estate Activities With Active Parance for Rental Real Estate Activities			ive participation, s	ee Special		
1a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the Combine lines 1a, 1b, and 1c	unt from Part IV, c ne amount from Pa	olumn (b)) art IV, column (c))	1b (1c (0. 12,800.)	1d	-12,800.
All Ot	her Passive Activities						
2a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the Combine lines 2a, 2b, and 2c	unt from Part V, co ne amount from Pa	olumn (b)) art V, column (c))	2b ()	2d	
3	Combine lines 1d and 2d. If this line is all losses are allowed, including any losses on the forms and schedules no	is zero or more, st prior year unallow	op here and inclu	de this form with y	our return;	3	-12,800.
	 If line 3 is a loss and: Line 1d is a loss and: Line 2d is a loss. Instead, go to line 10. 	loss (and line 1d is	•			year,	do not complete
	t II Special Allowance for Rei	ntal Real Estate	Activities With	Active Particin	ation		
ı aı	Note: Enter all numbers in Par			•			
4	Enter the smaller of the loss on line 1	<u> </u>				4	12,800.
5	Enter \$150,000. If married filing separ	rately, see instructi	ons	5 1	.50,000.		•
6	Enter modified adjusted gross income	e, but not less thar	n zero. See instruc	tions 6 1	22,685.		
_	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.		s 7 and 8 and ent				
7	Subtract line 6 from line 5				27,315.		12 (50
8 9	Multiply line 7 by 50% (0.50). Do not e Enter the smaller of line 4 or line 8			• .		9	13,658.
Par						Э	12,800.
10	Add the income, if any, on lines 1a an	nd 2a and enter the	total			10	0.
11	Total losses allowed from all passiv				+		
	out how to report the losses on your t	ax return				11	12,800.
Par	t IV Complete This Part Before	e Part I, Lines 1	a, 1b, and 1c. S	ee instructions.			
	Current year Prior years Over						
	reality of douvity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	1	(e) Loss
SRI	RAM NAGAR COLONY	0.	12,800.				12,800.

Total. Enter on Part I, lines 1a, 1b, and 1c

0.

12,800.

Form 8582 (2022) Page **2**

Part V Complete This Part Befor	e P	art I, Lines 2	a, 2b,	and 2c. S	ee instrud	ctions.			•	
Name of activity		Currer	nt year		Prior y	ears	Overa	ll ga	gain or loss	
Name of activity		(a) Net income (line 2a)		(b) Net loss (line 2b)		owed e 2c)	(d) Gain		(e) Loss	
Total. Enter on Part I, lines 2a, 2b, and 2c										
Part VI Use This Part if an Amour	nt Is	s Shown on F	Part II,	Line 9. S	ee instruc	tions.				
Name of activity	ar to	Form or schedule and line number to be reported on (see instructions)				(c) Special allowance			(d) Subtract column (c) from column (a).	
SRI RAM NAGAR COLONY		E Ln 22		12,800.	1.0000	0000	12,80	0.	0.	
Total				12,800.	1.00	0	12,80	0.	0.	
Allocation of Orlanowed L	.05			5.						
Name of activity	Form or sche and line nun to be reporte (see instruct		mber ted on (a) L		Loss ((b) Ratio (c		(c) Unallowed loss	
Total							1.00			
Part VIII Allowed Losses. See instru	ucti	ons.								
Name of activity		Form or sched and line numl to be reported (see instruction		mber ed on (a) L		(b) Unallowed loss		((c) Allowed loss	
Total										