# 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

Submi	ssion Identification Number (SID)						
Taxpayer's name Social security							
SAHIT KATTA 867-98-							
Spouse'	s name	Spouse	's so	cial sec	urity n	umber	
RASI	HMINI REDDY DAMMANNA	131	-35	-197	0		
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year y	ou a	are au	thor	izing.	)
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		191	,203.
2	Total tax			2		27	,601.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3		29	,331.
4	Amount you want refunded to you			4		1	,730.
5	Amount you owe			5			
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a	cop	y of	our/	retu	rn)
return ( to send for any Agent t paymer authoriz paymer busines taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected eapy in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the function of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate and, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requise days prior to the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (PIN) below is my signature for the income tax return (original or amended) I are finite funds Withdrawal Consent.	tter, or ection of S. Treas cated in to debte the autors muprocess ayment.	electrithe to the to th	onic recransminand its cax precentry cation. e recentry the e ther action and the ether action.	turn of ssion designation thing to the total to the ved rectroscential to the total	originat , <b>(b)</b> th nated on sof s acco voke (d no late nic pa vledge	or (ERO) e reason Financial tware for unt. This cancel) a or than 2 yment of that the
	yer's PIN: check one box only						
×		nv PIN	8		9   9		as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	,		nter five on't ent			,
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN metholelow.						
Your s	ignature ▶ Date ▶						
C	ele DINI, elecale que hay enle						
· —	e's PIN: check one box only	B.1.			<u> </u>		
X	I authorize GLOBAL TAXES LLC to enter or generate r	ny PIN	5		9 7		as my
	signature on the income tax return (original or amended) I am now authorizing.			nter five on't ent			
	I will enter my PIN as my signature on the income tax return (original or amended) I am notify you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methology.						
Spous	e's signature ► Date ►						
	Practitioner PIN Method Returns Only—continue below						
Part	Certification and Authentication — Practitioner PIN Method Only						
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 Dor	9 n't en	6 6 ter all z	1 eros	9 8	9
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taged 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 <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of In	tting thi	s ret	urn in	accor	dance	
ERO's	signature ▶ Date ▶						
	FRO 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

OMB No. 1545-0074

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

_	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separately	(MFS)	Head of	house	ehold (HOF	l) 🗌		lifying surv	/iving
Check only one box.	If vo	u checked the MFS box, enter the r	name of v	YOUR SHOUSE If YOU	chack	ad the HOH o	r 088	hov ente	r the c		use (QSS) name if th	ne qualifying
ONC BOX.		son is a child but not your dependen		our spouse. It you	CHCCK		i Qoo	box, crite	i tilo c	illia 3	mariic ii ti	c qualifying
Your first name	and m	iddle initial	Last na	me					Yo	our so	cial securit	y number
SAHIT KAT			KATT	'Α						867-98-9996		
If joint return, spouse's first name and middle initial Last n									-	Spouse's social security number		
RASHMIN			DAMM							131-35-1970		
		er and street). If you have a P.O. box, see						Apt. no.				on Campaigr
	,	ERR PASS							- 1		nere if you,	
		ce. If you have a foreign address, also c	omplete si	paces below.	Sta	te	ZIP	code			0,	tly, want \$3
LEANDER		, , , , , , , , , , , , , , , , , , , ,								to go to this fund. Checking a box below will not change		
Foreign country	v name		F	Foreign province/state			_				or refund.	U
	,			g p		-,		9 1			You	Spouse
Digital	Δt ar	ny time during 2022, did you: (a) rec	reive (as	a reward award o	nr navr	nent for prope	erty or	services):	or (b)	sell		
Assets		ange, gift, or otherwise dispose of									Yes	X No
Standard		eone can claim:  You as a de		<u>-</u> _				, . (				
Deduction		Spouse itemizes on a separate retu										
		·										
Age/Blindness	s You:	Were born before January 2,	1958 _	∐ Are blind <b>Տ</b> լ	pouse	: U Was bo		ore Janua	, ,		☐ Is bl	
Dependent	,	*		(2) Social secur	ity	(3) Relationsh	nip (	•		· 1	•	instructions):
If more	(1) F	irst name Last name		number		to you		Child ta	x credi	t	Credit for oth	her dependent
than four dependents,												
see instruction	s —											
and check	, —											
here												
Income	1a	Total amount from Form(s) W-2, k	oox 1 (see	e instructions) .						1a	20	)5,728.
	b	Household employee wages not r	reported	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	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	•	from Form 8919, line 6						1g			
get a Form W-2, see	h	Other earned income (see instruc-	tions) .				· .			1h		0.
instructions.	i	Nontaxable combat pay election (	(see instr	ructions)		<u>1</u> i	i					
	<u>Z</u>	Add lines 1a through 1h	· ; ·							1z		05,728.
Attach Sch. B	<b>2</b> a	Tax-exempt interest	2a			axable interes				2b		
if required.	<u>3a</u>	Qualified dividends	3a			rdinary divide				3b		
	4a	IRA distributions	4a			axable amoun				4b		
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun				5b		
Single or	6a	Social security benefits	6a			axable amoun	ıt		÷	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 Sche		•	•					7		
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, line 10						8		L4,525.		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							9		91,203.	
\$25,900 spouse,	10	Adjustments to income from Schedule 1, line 26							10			
Head of household,	11	Subtract line 10 from line 9. This i	-	-						11		91,203.
\$19,400	12	Standard deduction or itemized		`	,					12		25,900.
If you checked any box under	13	Qualified business income deduc								13		
Standard Deduction,	14	Add lines 12 and 13								14		<u>25,900.</u>
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>						15	16	55,303.		

Form 1040 (2022	2)							Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from F	orm(s): <b>1</b>	4 <b>2</b> 🗌 4972	3 🗌		16	27,601.
Credits	17	Amount from Schedule 2, line 3				[	17	
	18	Add lines 16 and 17				[	18	27,601.
	19	Child tax credit or credit for other depend	dents from Sched	lule 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 le	ss, enter -0				22	27,601.
	23	Other taxes, including self-employment t	ax, from Schedul	e 2, line 21 .		[	23	0.
	24	Add lines 22 and 23. This is your total ta	x			[	24	27,601.
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2			<b>25a</b> 29	,331.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	29,331.
If	26	2022 estimated tax payments and amount	nt applied from 20	021 return		[	26	
If you have a qualifying child,	27	Earned income credit (EIC)		No .	27	Ī		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8	812		28			
	29	American opportunity credit from Form 8	863, 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 y	our <b>total other p</b>	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. These are you	r total payments			[	33	29,331.
Refund	34	If line 33 is more than line 24, subtract lir	ne 24 from line 33	. This is the amou	nt you <b>overpaid</b>		34	1,730.
nerana	35a	Amount of line 34 you want refunded to	you. If Form 8888	8 is attached, che	ck here	. 🗆 [	35a	1,730.
Direct deposit?	b	Routing number 1 1 1 0 0 0			Checking :	Savings		
See instructions.	d	Account number 4 8 8 0 5 2	8 8 3 2	7 9				
	36	Amount of line 34 you want applied to you	our 2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the	amount you owe					
You Owe		For details on how to pay, go to www.irs	.gov/Payments or	see instructions		[	37	
	38	Estimated tax penalty (see instructions)			38			
<b>Third Party</b>	Do	you want to allow another person to	discuss this retu	rn with the IRS?				_
Designee	ins	tructions			<b>Yes.</b> Co	omplete be	elow.	<b>X</b> No
	De: nar	signee's	Phone no.	)		onal identific ber (PIN)	ation [	
0:				d accommon ting act		, ,	L	t of my knowledge and
Sign		der penalties of perjury, I declare that I have exalef, they are true, correct, and complete. Declarate						
Here		ur signature	Date	Your occupation				nt you an Identity
		o.g		Tour occupation			ction PI	N, enter it here
Joint return?				SOFTWARE DEVELOPER				
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>both</b> must sign	n. Date	Spouse's occupat	ion			t your spouse an
your records.				   SOFTWARE	(see in	, .	ection PIN, enter it here	
	————	one no. (713)739-8989	Email address	1		(	,	
		parer's name   Preparer's si		SAUTITION	@GMAIL.COM Date	PTIN	$\overline{}$	Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRI		מווסתי האוויא		P02082	702	Self-employed
Preparer			IA KAN SAGAK	GUPIA IALLAM	U3/10/2023			
Use Only		n's name GLOBAL TAXES LLC n's address 245 ROONEY CT E E	DIINQWTCV N	J 08816				678)965-9522
0-1						Firm's	CIIN	84-3171965
GO TO WWW.Irs.go	ov/Forn	11040 for instructions and the latest information.		BAA	REV 03/09/23 PRO			Form 1040 (2022)

# SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2022

Attachment
Soguence No. 01

Department of the Treasury Internal Revenue Service

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

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
867-98-9996

SAHI	AHIT KATTA & RASHMINI REDDY DAMMANNA 867-9									
Par	t I Additional Income									
1	Taxable refunds, credits, or offsets of state and local income taxes			1						
2a	Alimony received	2	2a							
b										
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	-14,525.					
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								
- 1	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	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:									
	T. I. II. II. II. II. II. II. II. II. II	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 | 10

-14,525.

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 govern			
	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	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			05	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here at Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	Form 1040 or 1040-36, line 10, or form 1040-196, line 10a		20	

#### **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.

Your social security number

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

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

Attachment Sequence No. **13** 

OMB No. 1545-0074

SAHI	T KATTA & RASHMINI REDDY DAMMANNA						867-9	8-9996	
Part	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	d Roy	yalties Schedule	<b>c</b> . See	instrud	ctions. If you ar	e an indiv	vidual, rep	ort farm
	Did you make any payments in 2022 that would require you								s 🛚 No
B	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city, state, ZIF								
Α	22-11-1/1, ADITYA COLONY PALAKOL ANDHRA	A PRA	DESH I	N 534	1260				
В									
С									
1b	Type of Property (from list below)  2 For each rental real estate prope above, report the number of fair real estate property.	rental	and	Fair Rental Days			Person Da	QJV	
Α	personal use days. Check the Qu			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	quaimed joint venture. Occ instru	10110113	•	С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Rent Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya	-	-	Self-Rental Other (descri			
						Propertie	s:		
Incom				Α		В			С
3	Rents received	3		6	80.				
4	Royalties received	4							
Exper		_							
5	Advertising	5							
6	Auto and travel (see instructions)	6		1 0	00				
7	Cleaning and maintenance	7		1,8	90.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10		1 1	2.0				
11	Management fees	11		1,4	30.				
12 13	Mortgage interest paid to banks, etc. (see instructions) Other interest	13							
14		14		3,6	<u>Ω</u> Λ				
15	Repairs	15		3,9					
16	Taxes	16		3,3	10.				
17	Utilities	17		4,2	65				
18	Depreciation expense or depletion	18		-,-	00.				
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		15,2	05.				
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 <b>Form 6198</b>	21	_	-14,5					
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22		14,52		(	)	(	
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		680.		
b	Total of all amounts reported on line 4 for all royalty properties.				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	15,	,205.		
24	Income. Add positive amounts shown on line 21. Do no	<b>t</b> inclu	de any lo	sses			24		
25	Losses. Add royalty losses from line 21 and rental real estat	te losse	es from lir	ne 22. E	nter to	otal losses here	25	(	14,525.
26	Total rental real estate and royalty income or (loss). (here. If Parts II, III, IV, and line 40 on page 2 do not school to 1 (Form 1040), line 5. Otherwise, include this are	apply	to you,	also en	ter th	is amount or	ו ו		14 525
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar	HOUHI	iii tile to	ıaı UII III	1 <del>0</del> 4 1	on page∠ .	26		-14,525.