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 Number (SID)		•				
Taxpayer's name	Social security	Social security number				
ARJUN JUJJURI	783-10-	4238				
Spouse's name	Spouse's soci	al security nun	nber			
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you ar	e authorizi	ng.)			
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			99 , 756.			
2 Total tax			<u>14,719.</u>			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			<u>16,930.</u>			
4 Amount you want refunded to you		4	2,211.			
5 Amount you owe		5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)		<u> </u>				
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indic payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requires a days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payments are ceive confidential information necessary to answer inquiries and resolve issues related to the payersonal identification number (PIN) below is my signature for the income tax return (original or amended) I am Electronic Funds Withdrawal Consent.	ter, or electro ction of the tra 5. Treasury ar tated in the ta in to debit the the authoriza ests must be processing of syment. I furth	nic return origansmission, (k) and its designar x preparation entry to this a tion. To revol received no the electronic ner acknowle	yinator (ERO) b) the reason ted Financial software for account. This ke (cancel) a later than 2 payment of dge that the			
Taxpayer's PIN: check one box only						
I authorize GLOBAL TAXES LLC to enter or generate n ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	4 2 3 er five digits, b i't enter all zero				
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow. Your signature ▶ Date ▶						
Spouse's PIN: check one box only						
I authorize to enter or generate n ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent dor	er five digits, b	os			
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.						
Spouse's signature ▶ Date ▶						
Practitioner PIN Method Returns Only—continue below						
Part III Certification and Authentication — Practitioner PIN Method Only						
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 1		2 3 1 9 er all zeros	8 9			
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of Indicated	tting this retu	rn in accorda	nce with the			
ERO's signature ▶ Date ▶						
ERO Must Retain This Form — See Instructions						

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

E1040 Department of the Treasury-Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-007

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

_		Single Married filing jointly	Marrie	d filing separate	ly (MFS)	☐ Head of	house	ehold (HOH)			ifying surv ise (QSS)	/iving	
Check only one box.	If yo	u checked the MFS box, enter the na	ame of v	our spouse If vo	u check	ed the HOH o	r OSS	hox enter t			, ,	ne qualifying	
one box.		on is a child but not your dependent		OTIGA KLIN			, doc	box, critor t	110 011	iiu 5	namo ii ti	io qualityirig	
Your first name			Last nar		111111111	1			You	ır soc	cial securit	v number	
ARJUN JUJJURI											783-10-4238		
	oouse's	first name and middle initial	Last nar						_			curity number	
, , , ,											32-447		
Home address (number and street). If you have a P.O. box, see in				instructions. Apt. no.								on Campaign	
		ERSITY BLVD						14105	1		ere if you,		
		ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	ite		code				itly, want \$3	
DALLAS			TX 75				752	209			this fund. ow will not	Checking a	
Foreign country name			Foreign province/state/county			_	gn postal code	7	your tax or refund.				
											You Spous		
Digital	At an	y time during 2022, did you: (a) rec	eive (as a	a reward, award,	or payr	ment for prope	erty or	services); o	r (b) s	ell,			
Assets		ange, gift, or otherwise dispose of a	•				•				Yes	⊠ No	
Standard	Som	eone can claim:	pendent	☐ Your spo	ouse as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-stat	tus alien								
Ago/Blindness	Valu	Were born before January 2, 1	050 [Are blind	Chauca	. Nas ba	rn haf	oro lonuon	2 10	E0	☐ Is bl	ind	
			330 _		Spouse			ore January				instructions):	
Dependents		rst name Last name		(2) Social section number	urity	(3) Relationsh to you	ין קור	Child tax		· 1	•	her dependents	
If more than four	(1)	Last name				,			credit	+			
dependents,							-			\dashv		=	
see instructions	s —						_			\dashv			
and check here										\dashv		╡	
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	instructions)					_	1a	1 1(09 , 821.	
Income	b	Household employee wages not re	•	,						1b	1	7070211	
Attach Form(s)	c	Tip income not reported on line 1a (see instructions)							1c				
W-2 here. Also attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d				
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26							1e	1			
1099-R if tax 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	h	Other earned income (see instructi	ions) .							1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	see instri	uctions)		1i	i						
III STI UCTIONS:	z	Add lines 1a through 1h	. , .						. [1z	1(09,821.	
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	st .		. [2b			
if required.	3 a	Qualified dividends	3a		b C	ordinary divide	nds .			3b			
	4a	IRA distributions	4a		b T	axable amoun	nt		. [4b			
Standard	5a	Pensions and annuities	5a		b T	axable amoun	nt		.	5b			
• Single or	6a	,	6a			axable amoun	nt.		<u>.</u>	6b			
Married filing	С	If you elect to use the lump-sum e							닏ㅣ		4		
separately, \$12,950	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here					\sqcup	7						
 Married filing jointly or 	8	Other income from Schedule 1, lin								8		10 , 065.	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•						9		99 , 756.	
surviving spouse, \$25,900	10	Adjustments to income from Sche								10			
 Head of household, 	11	Subtract line 10 from line 9. This is	•	-					.	11		99 , 756.	
\$19,400	12	Standard deduction or itemized							.	12	 	12 , 950.	
 If you checked any box under 	13	Qualified business income deducti							.	13	+		
Standard Deduction,	14	Add lines 12 and 13							14		12,950.		
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -U INIS	is your 1	taxable incon	ne .		.	15		36,806.	

Form 1040 (2022	2)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	14,	719.
Credits	17	Amount from Schedule 2, line	e3					17		
	18	Add lines 16 and 17						18	14,	719.
	19	Child tax credit or credit for o	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, line	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	14,	719.
	23	Other taxes, including self-er	mployment tax,	from Schedule	e 2, line 21			23		0.
	24	Add lines 22 and 23. This is y	our total tax					24	14,	719.
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25a 16	5,930.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c .						25d	16,	930.
If you have a	26	2022 estimated tax payment	Check if any from Form(s): 1							
qualifying child,	27	Earned income credit (EIC) .				27				
attach Sch. EIC.	28	Additional child tax credit fron	n Schedule 8812			28				
	29	American opportunity credit	from Form 8863	8, line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line	e 15			31				
	32	Add lines 27, 28, 29, and 31.	These are your	total other pa	ayments and refu	indable credits		32		
	33	Add lines 25d, 26, and 32. The	nese are your to	tal payments				33		930.
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34		211.
riciana	35a	Amount of line 34 you want r	efunded to you	ı. If Form 8888	is attached, chec	k here	. 🗆	35a	2,	211.
Direct deposit?	b									
See instructions.	d	Account number 3 2 5	0 4 8 2	3 5 2 5	5 3					
	36	Amount of line 34 you want a	pplied to your	2023 estimate	ed tax	36				
Amount You Owe	37							37		
	38					1 1				
Third Party		you want to allow another				See _			_	
Designee						. LYes. C	omplete l	oelow.	X No	
		signee's me						fication		
0:			act I have exemine		d accompanying ach		, ,	the her	et of my knowl	odgo ope
Sign					, , ,				,	0
Here	Yo	ur signature		Date	Your occupation		If the	RS se	nt you an Iden	tity
					, '				IN, enter it her	e
Joint return?										$\perp \perp$
See instructions. Keep a copy for your records.	Sp	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupati	Ide				
•		one no (OE4) 070 1000	<u> </u>	Empil oddress	 	ID TOOMS TT CO				
		one no. (254) 979-190(eparer's name			AKJUN.JUJJL		1		Chack if:	
Paid		'			СПОПЛ ПЛІТЛЬ			2702	l —	nloved
Preparer				KAM SAGAK	GUPTA TALLAM	103/29/2023				
Use Only	0.15									
	Fir	m's address 245 ROONEY	CI F BKU	NOWICK N	7 00010		Firm	s EIN	84-31/	<u> 1965</u>

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

ARJUN JUJJURI

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.

Your social security number 783-10-4238

Schedule 1 (Form 1040) 2022

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-bas	is government		
	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			
	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:			
25	Total other adjustments. Add lines 24a through 24z		25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income . En		23	
20	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	Tomi toto of toto-on, line to, of Form toto-in, line tod		20	

BAA

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

OMB No. 1545-0074

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

Name(s) shown on return Your social security number ARJUN JUJJURT 783-10-4238

	11 00000111						_ , 0 0 1		
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.			e C. See	instru	ctions. If you a	are an ind	ividual, rep	oort farm
	Did you make any payments in 2022 that would require you f "Yes," did you or will you file required Form(s) 1099? .								
1a	Physical address of each property (street, city, state, ZIF								
Α	12-10-45, PRAKASH NAGAR NARASARAOPET GU	ווידוו	R ANDHI	RA PRI	ADES	H TN 5226	601		
В	12 10 45,11010001 WION WINDOWNOTH	71110.	IX, MINDIII		טבטנ	11 111 522	301		
C									
1b	Type of Property (from list below) 2 For each rental real estate prope above, report the number of fair real estate property above.				Fa	ir Rental Days	Personal Use Days		QJV
Α	personal use days. Check the Qu	JV bo	x only	Α	365		0		П
В	if you meet the requirements to f			В					
С	qualified joint venture. See instru	ction	S.	С					
Гуре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Reni Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (desc			
						Properti	ies:		
ncon				Α		В			С
3	Rents received	3		5	21.				
4	Royalties received	4							
хреі		_	ļ.						
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		9	46.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,1	43.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13			4.1				
14	Repairs	14		2,9					
15	Supplies	15		3,4	56.				
16	Taxes	16		2 1	0.0				
17	Utilities	17 18		2,1	00.				
18 19	Depreciation expense or depletion	19							
20	Other (list) Total expenses. Add lines 5 through 19	20		10,5	06				
		20		10,5	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		-10,0	65.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(10,06		()(
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		521.		
b	Total of all amounts reported on line 4 for all royalty prop	erties			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	10	,586.		
24	Income. Add positive amounts shown on line 21. Do no		-				. 24		
25	Losses. Add royalty losses from line 21 and rental real estat	te loss	ses from li	ne 22. E	inter to	otal losses he	re 25	(10,065.
26	Total rental real estate and royalty income or (loss). On the the state of the stat	apply	to you,	also er	nter th	nis amount o	on		-10,065.

-10,065.