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	number			
LAKSHMI NAGA VENKATA PASUMARTHI	HMI NAGA VENKATA PASUMARTHI 892-35-5653				
Spouse's name	Spouse's social security number				
UMA RUKMINI DEVI BATCHU	699-57-	4313			
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you ar	e authorizing.)			
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	[1 101,0	27.		
2 Total tax	[2 8,6	04.		
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	[3 17,4	39.		
4 Amount you want refunded to you	[4 8,8	35.		
5 Amount you owe		5			
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and ke	еер а сору	of your return))		
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 rejet 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 requebusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payments to receive 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 electror trion of the tra 5. Treasury and at the table of the attention of the term of the authorization o	nic return originator insmission, (b) the red its designated Finick preparation softwatentry to this accountaion. To revoke (can received no later the electronic paymer acknowledge the	(ERO) eason ancial are for t. This ncel) a han 2 ent of at the		
Taxpayer's PIN: check one box only					
▼ I authorize GLOBAL TAXES LLC to enter or generate m	3V DINI 5	5 6 5 3	s my		
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ente	er five digits, but 't enter all zeros	Silly		
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 ▶					
Chausaia Dibit abaak ana bay anby					
Spouse's PIN: check one box only	DIN 7	1 2 1 2 -			
▼ I authorize GLOBAL TAXES LLC to enter or generate n ■ ERO firm name		$4 \mid 3 \mid 1 \mid 3$ as a five digits, but	s my		
signature on the income tax return (original or amended) I am now authorizing.		't enter all zeros			
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. 2 2	2 4 9 6 Don't enter		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 Inc.	ting this retur	n in accordance wit			
ERO's signature ▶ Date ▶					
ERO 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

2022

OMB No. 1545-0074

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

Filing Statu	s 🗌 s	Single X Married filing jointly	Marrie	ed filing separately	(MFS)	☐ Head of	household (HO	H) [fying survi se (QSS)	ving
Check only one box.	-	u checked the MFS box, enter the nonis a child but not your dependent	-	our spouse. If you	check	ed the HOH or	QSS box, ent	er the		` ,	qualifying
Your first name	and mi	ddle initial	Last nar	me				Y	our soc	ial security	number
LAKSHMI	NAGA	A VENKATA	PASU	MARTHI				8	392-3	5-5653	
If joint return, s	pouse's	first name and middle initial	Last nar	me				S	Spouse's	social secu	urity number
UMA RUKI	INIM	DEVI	BATC	HU				16	599-5	7-4313	
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	F	residen	tial Election	n Campaign
2401 W	PFLUC	GERVILLE PKWY					721			ere if you, o	
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete sp	paces below.	Sta	te	ZIP code			f filing joint	
ROUND RO	OCK				T	ζ	78664			this fund. C	
Foreign countr			F	oreign province/stat	e/count	ty	Foreign postal c			or refund.	3.
										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: You as a de				a dependent	, ,				
Deduction	_	Spouse itemizes on a separate retur	•			•					
Age/Blindnes	s You:	☐ Were born before January 2, 1	958	Are blind S	pouse	: Was bor	n before Janua			☐ Is blir	
Dependent	s (see	instructions):		(2) Social secur	rity	(3) Relationsh	ip (4) Check t	he box	if qualifi	es for (see i	nstructions):
If more	(1) Fi	rst name Last name		number		to you	Child t	ax cred	dit (Credit for other	er dependents
than four]
dependents, see instruction	s]
and check _]
here]
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .					1a	11	0,540.
	b	Household employee wages not r	•	` '					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 bene	efits from	Form 8839, line 2	29 .				1f		
If you did not	g	Wages from Form 8919, line 6 .							1g		
get a Form	h	Other earned income (see instruct	tions) .						1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (see instr	uctions)		<u>1</u> i					
	Z	Add lines 1a through 1h							1z	11	0,540.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interest	t		2b		
if required.	3a	Qualified dividends	3a		b C	rdinary divide	nds		3b		
	4a	IRA distributions	4a		b T	axable amoun	t		4b		
Standard	5a	Pensions and annuities	5a		b T	axable amoun	t		5b		
Deduction for— Single or	6a	Social security benefits	6a		b T	axable amoun	t		6b		
Married filing	С	If you elect to use the lump-sum e	election n	nethod, check her	e (see	instructions)					
separately, \$12,950	7	Capital gain or (loss). Attach Sche	dule D if	required. If not re	quired	, check here			7		
Married filing	8	Other income from Schedule 1, lin	ne 10 .						8	_	9,513.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8. ⁻	This is your total i	incom	e			9	10	1,027.
surviving spouse, \$25,900	10	Adjustments to income from Sche	edule 1, li	ine 26					10		
Head of	11	Subtract line 10 from line 9. This is	s your ac	djusted gross inc	ome				11	10	1,027.
household, \$19,400	12	Standard deduction or itemized	deducti	ons (from Schedu	ıle A)				12	2	5,900.
If you checked	13	Qualified business income deduct	tion from	Form 8995 or For	m 899	5-A			13		
any box under Standard	14	Add lines 12 and 13							14	2	5,900.
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ro or less	s, enter -0 This is	s your t	taxable incom	ie		15	7	5,127.
	,										

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check if a	any from Form	(s): 1 881	4 2 4972	3 🗌		16	8,604.
Credits	17	Amount from Schedule 2, line 3	-				Ī	17	
	18	Add lines 16 and 17						18	8,604.
	19	Child tax credit or credit for oth	ner dependent	ts from Schedi	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,	enter -0				22	8,604.
	23	Other taxes, including self-emp	olovment tax,	from Schedule	2, line 21			23	0.
	24	Add lines 22 and 23. This is yo						24	8,604.
Payments	25	Federal income tax withheld from							<u>, </u>
,	а	Form(s) W-2				25a 17	,439.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c .						25d	17,439.
	26	2022 estimated tax payments a						26	,
If you have a qualifying child,	27	Earned income credit (EIC) .				27			
attach Sch. EIC.	28	Additional child tax credit from S				28			
	29	American opportunity credit from				29			
	30	Reserved for future use		•		30			
	31	Amount from Schedule 3, line				31			
	32	Add lines 27, 28, 29, and 31. T				ndable credits		32	
	33	Add lines 25d, 26, and 32. The						33	17,439.
Defund	34	If line 33 is more than line 24, s	•					34	8,835.
Refund	35a	Amount of line 34 you want ref				•	. П	35a	8,835.
Direct deposit?	b	Routing number 0 1 1 9					 Savings		
See instructions.	d	Account number 3 8 5 0					ı ı		
	36	Amount of line 34 you want ap				36			
Amount	37	Subtract line 33 from line 24. T	his is the amo	ount vou owe					
You Owe		For details on how to pay, go t			see instructions .			37	
	38	Estimated tax penalty (see inst	ructions) .			38			
Third Party Designee		you want to allow another p			n with the IRS?		mnlete be	elow	X No
D 00191100		signee's		Phone		_	nal identific		
	naı			no.			er (PIN)		
Sign		der penalties of perjury, I declare that ief, they are true, correct, and comple							
Here	Yo	ur signature		Date	Your occupation		If the I	IRS ser	nt you an Identity
									N, enter it here
Joint return? See instructions.				5.	SOFTWARE E		(see ir		
Keep a copy for	Sp	ouse's signature. If a joint return, bot	h must sign.	Date	Spouse's occupation	on			t your spouse an ection PIN, enter it here
your records.					HOME MAKER		(see in		
	Ph	one no. (203) 690-4609		Email address		16@GMAIL.CO	M M		
		(=11) 111	reparer's signat	l		Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM S'	YAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/30/2023	P02082	703	Self-employed
Preparer		n's name GLOBAL TAXE							678) 965-9522
Use Only		n's address 245 ROONEY		NSWICK N	J 08816		Firm's		88-2145487
Go to www.irs.go	ov/Forn	1040 for instructions and the latest i	nformation.		BAA	REV 01/24/23 PRO			Form 1040 (2022)

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

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

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

L PASUMARTHI & U BATCHU

Sequence No. 01

Your social security number 892-35-5653

Par	Additional income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
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	-9,513.
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		
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	or 1040-NR line 8	10	-9.513

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-ba	asis 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)	a		
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit	łb		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m		-	
d	Reforestation amortization and expenses	ła	-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	le		
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24	łq		
	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	h		
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	1j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	łk		
Z	Other adjustments. List type and amount:			
	24			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . E			
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

SCHEDULE E (Form 1040)

18

19

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21

Supplemental Income and Loss

(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. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 892-35-5653 L PASUMARTHI & U BATCHU Part I **Income or Loss From Rental Real Estate and Royalties Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions В ☐ Yes ☐ No Physical address of each property (street, city, state, ZIP code) 1a 2-70, BODAPATI STREET POLAMURU, PENUMANTRA ANDHRA PRADESH IN 534238 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Days Davs** personal use days. Check the QJV box only Α Α 352 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 7 Self-Rental 1 Single Family Residence 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 580. Rents received . 4 Royalties received . 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 285. 956. 7 Cleaning and maintenance. 7 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 1,127. 11 Management fees 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest 2,459. 14 14 Repairs 15 Supplies 15 3,522. 16 16 Taxes 17 Utilities 17 1,744.

	file Form 6198	21	-9, 5	13.			
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(9,51	3.)	()	()
23a	Total of all amounts reported on line 3 for all rental proper	ties		23a	5	80.	
b	Total of all amounts reported on line 4 for all royalty proper	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	10,0	93.	
24	Income. Add positive amounts shown on line 21. Do not	t inclu	ide any losses			24	
25	Losses. Add royalty losses from line 21 and rental real estate	e loss	es from line 22. E	nter to	otal losses here	25	(9,513.)
26	Total rental real estate and royalty income or (loss).						
	here. If Parts II, III, IV, and line 40 on page 2 do not a						
	Schedule 1 (Form 1040), line 5. Otherwise, include this an	nount	in the total on li	ne 41		26	-9, 513.
			ע כווע		_0 513		

18

19

20

Depreciation expense or depletion

Total expenses. Add lines 5 through 19

Subtract line 20 from line 3 (rents) and/or 4 (royalties). If recult is a (loss), see instructions to find out if you must 10,093.