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

- Internal ne	venue Service						
Submis	sion Identification Number (SID)						
Taxpayer'	s name	Social securi	ty numb	er			
VISW	ANATH KOLACHINA	809-65	-9307	7			
Spouse's	name	Spouse's social security number					
Part I	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you a	re aut	horizing.)		
	nole dollars only on lines 1 through 5.						
	orm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		4	0.1	EOE		
	Adjusted gross income		1		<u>,505.</u>		
	otal tax		3		704.		
			4		,008.		
	Amount you want refunded to you		5		,304.		
Part II	,			our retu	rn)		
	enalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)						
to send it for any d Agent to payment authoriza payment business taxes to personal	iginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transminy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectles in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indiction for my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate. I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation required days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the payment of the income tax return (original or amended) I and Europe Withdray I Consent.	ction of the to S. Treasury a cated in the to n to debit the the authorize ests must be processing or ayment. I fur	ransmis nd its dax preperently to attorn. The received the electrical the rack ther acl	sion, (b) the esignated aration sofo this according revoke (red no late ectronic parknowledge	ne reason Financial ftware for bunt. This cancel) a er than 2 syment of that the		
	c Funds Withdrawal Consent. er's PIN: check one box only						
X	•	m, DIN 5	9 3	0 7	00 m)/		
	I authorize GLOBAL TAXES LLC to enter or generate r ERO firm name signature on the income tax return (original or amended) I am now authorizing.	En		digits, but all zeros	as my		
	I will enter my PIN as my signature on the income tax return (original or amended) I am no	ou outhorizi	na Ch	ook thio h	ov onl v		
	if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.						
Your sig	nature ►	04/07/202	23				
Spouse	's PIN: check one box only						
	I authorize to enter or generate r	nv PIN			as my		
	ERO firm name		ter five o	digits, but	ao my		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN method below.		_		-		
Spouse	s signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part II	Certification and Authentication — Practitioner PIN Method Only						
ERO's I	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 1	8 9 5 Don't ent	2 3	1 9 8	9		
		Don tent	or un 20				
authorize	hat the above numeric entry is my PIN, which is my signature for the electronic individual income ta d to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submi ents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this retu	ırn in a	ccordance			
FR∩'e e	ignature ▶ Date ▶						
LI 10 5 5	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To D	o So					

E1040 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	Single Married filing jointly u checked the MFS box, enter the on is a child but not your depender	mame of y	ed filing separately	,	_		`	_	spou	lifying sunuse (QSS) name if th	Ü	lifying
Your first name	and middle initial Last name You							our so	cial securit	y numł	ber		
VISWANATH				CHINA					8	809-65-9307			
		first name and middle initial	Last na							Spouse's social security number			
Home address	(numbe	r and street). If you have a P.O. box, se	e instruction	ons.			Ap	t. no.	Pi	Presidential Election Campaign			
2250 HOT	T.Y F	HALL STREET					20	1			Check here if you, or your		
		ce. If you have a foreign address, also o	complete spaces below. State ZIP					IP code sp		spouse if filing jointly, want \$3			
HOUSTON				F							to go to this fund. Checking a box below will not change		
Foreign country	name		Foreign province/state/county					~		your tax or refund.			•
											You	S	pouse
Digital	At ar	ny time during 2022, did you: (a) re	ceive (as	a reward, award,	or payr	ment for prope	erty or se	ervices);	or (b)	sell,			
Assets	exch	ange, gift, or otherwise dispose of	a digital	asset (or a financi	al inter	est in a digital	asset)?	(See ins	tructi	ons.)	☐ Yes	X N	lo
Standard	Som	eone can claim: 🗌 You as a d	ependent	t 🗌 Your spo	use as	a dependent							
Deduction		Spouse itemizes on a separate retu	ırn or you	ı were a dual-statı	ıs alien	1							
Age/Blindness	You:	☐ Were born before January 2,	1958	Are blind S	pouse	: Was bo	rn befor	e Januai	ry 2, 1	958	☐ Is bl	ind	
Dependents	s (see	instructions):		(2) Social secu	rity	(3) Relationsh	nip (4)	Check the	e box i	f qualif	fies for (see	instruct	tions):
If more	(1) First name Last name			number		to you		Child tax cre		it	Credit for ot	her depe	endents
than four													
dependents, see instructions													
and check	· —												
here													
Income	1a	Total amount from Form(s) W-2,	box 1 (se	e instructions) .						1a		92,00	00.
	b	Household employee wages not	reported	on Form(s) W-2 .						1b			
Attach Form(s) W-2 here. Also	С	c Tip income not reported on line 1a (see instructions)								1c			
attach Forms	d	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	Wages from Form 8919, line 6 .	3							1g			
get a Form W-2, see	h	ther earned income (see instructions)							1h			0.	
instructions.	i Nontaxable combat pay election (see instructions)												
	Z	Add lines 1a through 1h								1z		92,00	00.
Attach Sch. B	2a	Tax-exempt interest	2a			axable interes				2b			
if required.	3a	Qualified dividends		b Ordinary dividends					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				6b	_		
Married filing separately,	c	If you elect to use the lump-sum		•	•	,				-	4		
\$12,950	7	Capital gain or (loss). Attach Sch Other income from Schedule 1, li		•	•				Ш	7	-	1 0 4	
Married filing jointly or	8	·								8		10,49	
Qualifying surviving spouse,	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b,								10		81,50	<u>05.</u>
\$25,900		Adjustments to income from Schedule 1, line 26									_	01 E	
 Head of household, 	11	Standard deduction or itemized								11		81,50	
\$19,400 If you checked	12 13	Qualified business income deduction		•	,					13		12,95	<u>JU.</u>
any box under	14	Add lines 12 and 13								14	_	12,95	50
Standard Deduction,	15	Subtract line 14 from line 11. If ze								15		68,55	
see instructions.		Castract into 11 month into 11. II Z	01 100	c, 511101 0 1 11110 h	, Jour				•	13		, o , o	.

Form 1040 (2022	2)							Page 2	
Tax and	16	Tax (see instructions). Check i	if any from Form	(s): 1 881	4 2 4972	3 🗌	16		
Credits	17	Amount from Schedule 2, line					17	7	
0.000	18	Add lines 16 and 17					18	10,704.	
	19	Child tax credit or credit for o	other dependent	ts from Sched	ule 8812		19		
	20	Amount from Schedule 3, line	e 8				20)	
	21	Add lines 19 and 20					21	ı	
	22	Subtract line 21 from line 18.	If zero or less,	enter -0			22	10,704.	
	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		
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				25a 13,	.008.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c .					25	d 13,008.	
If you have a	26	2022 estimated tax payments	s and amount a	pplied from 20	21 return		26	3	
qualifying child,	27	Earned income credit (EIC) .			No .	27			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28			
	29	American opportunity credit	from Form 8863	3, 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	2	
	33	Add lines 25d, 26, and 32. Th	nese are your to	tal payments			33	13,008.	
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	2,304.	
riciana	35a	Amount of line 34 you want r			is attached, chec	ck here	. 35	a 2,304.	
Direct deposit?	b	Routing number 1 1 1				Checking S	avings		
See instructions.	d	Account number 4 8 8	0 6 4 9	7 6 4 4	1 6				
-	36	Amount of line 34 you want a	pplied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. For details on how to pay, go					37	7	
	38	Estimated tax penalty (see in	structions) .			38			
Third Party Designee		you want to allow another structions			rn with the IRS?		mplete belov	v. 🔀 No	
· ·		signee's		Phone			nal identificatio	on	
	nai			no.			er (PIN)		
Sign Here		der penalties of perjury, I declare the ief, they are true, correct, and comp			, , ,		,	, ,	
11010	Yo	ur signature		Date	Your occupation			sent you an Identity PIN, enter it here	
Joint return?	SOFTWARE ENGINEER					(see inst.)			
See instructions.	Sp	Spouse's signature. If a joint return, both must sign. Date		Date	Spouse's occupati		If the IRS	sent your spouse an	
Keep a copy for your records.						Identity Pr (see inst.)	Identity Protection PIN, enter it here		
	Ph	one no. (870) 949-4723	3	Email address	VISWA.KOLACH	INA@GMAIL.CON	M		
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN	Check if:	
	SYAN	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	04/05/2023	P0208270	3 Self-employed	
Preparer Use Only	Fin	m's name GLOBAL TAX	KES LLC				Phone no.	. (678)965-9522	
————	Fin	m's address 245 ROONEY	CT E BRU	NSWICK N	J 08816		Firm's EIN	84-3171965	
Go to www.irs.go	ov/Form	n1040 for instructions and the lates	st information.		BAA	REV 03/22/23 PRO		Form 1040 (2022)	

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								
VISW	65 - 93	07								
Par	t I Additional Income									
1	Taxable refunds, credits, or offsets of state and local income taxes		1							
2 a	Alimony received		2a							
b	,									
3	Business income or (loss). Attach Schedule C									
4	Other gains or (losses). Attach Form 4797		4							
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule	E .	5	-10,495.					
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								
	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:									
		87								

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

-10,495.

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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 go		
	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:		
0E		OF	
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 he	00	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	 26	

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. Department of the Treasury Go to www.irs.gov/ScheduleE for instructions and the latest information. Internal Revenue Service

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return

Your social security number

VISV	VANATH KOLACHINA						809-6	5-9307	
Part									
	Note: If you are in the business of renting personal proper	ty, use	Schedule	C. See	instru	ctions. If you a	re an indi	vidual, rep	ort farm
	rental income or loss from Form 4835 on page 2, line 40.		- () 4	2222					571.11
	Did you make any payments in 2022 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .							. L Ye	es U No
1a	Physical address of each property (street, city, state, ZIF	od cod	e)						
Α	H.NO 7-2-129/A, ASHOKCOLONY SANATHNAGAR	R, HYI	DERABAD	TEL	ANGA	NA IN 500	018		
В									
С									
1b	Type of Property 2 For each rental real estate prope	rtv lis	ted		Fa	ir Rental	Person	al Use	
	(from list below) above, report the number of fair in					Days		ıys	QJV
Α	personal use days. Check the QJ			Α		365		0	
В	if you meet the requirements to f			В					
С	qualified joint venture. See instru	ictions	S	С					
Tvpe	of Property:		ı		ı				
	Single Family Residence 3 Vacation/Short-Term Rent	tal	5 Land		7	Self-Rental			
	Multi-Family Residence 4 Commercial		6 Roya	lties	8	Other (descr	ibe)		
			1						
_						Propertie	es:		
Incon				Α		В			С
3	Rents received	3		6	73.				
4	Royalties received	4							
Expe		_							
5	Advertising	5							
6	Auto and travel (see instructions)	7		2 4	1.0				
7	Cleaning and maintenance	8		Z,4	10.				
8 9		9							
10	Insurance	10							
11	Management fees	11		2 2	34.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		2,3	34.				
13	Other interest	13							
14	Repairs	14		1 0	58.				
15	Supplies	15			77.				
16	Taxes	16			, , .				
17	Utilities	17		2.5	89.				
18	Depreciation expense or depletion	18		2,0	03.				
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		11,1	68.				
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	_	-10,4	95.				
22	Deductible rental real estate loss after limitation, if any,			<u> </u>					
	on Form 8582 (see instructions)	22	(10,49	95.)	()	()
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		673.		
b	Total of all amounts reported on line 4 for all royalty prope				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	11	,168.		
24	Income. Add positive amounts shown on line 21. Do no						. 24		
25	Losses. Add royalty losses from line 21 and rental real estat		-		enter to	otal losses her	e 25	(10,495.)
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 10/0) line 5. Otherwise include this an	mount	t in the tot	al on li	no /11	on nage 2	06		_10 /05