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

Subm	ission Identification Number (SID)							
Taxpaye	er's name	Social seci	urity numb	er				
RAK	ESH MUNIGANTI	026-5	026-53-3556					
	's name	Spouse's s			er			
Doub	The Date was left and a first transfer of the Control of the Contr	-1		ula a silaisa	\			
Part		nter year you	are au	ınorızın	g.)			
	whole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income		1 1	l 8	6,68	37		
2	Total tax		2		1,83			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		3,77			
4	Amount you want refunded to you		4		1,94			
5	Amount you owe		5					
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get a	nd keep a co	ppy of y	our ret	urn)			
my know return of to send for any Agent of payme authori payme busines taxes to person	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amer owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trading my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of 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 termint, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation as days prior to the payment (settlement) date. I also authorize the financial institutions involved in to receive confidential information necessary to answer inquiries and resolve issues related to taxelial identification number (PIN) below is my signature for the income tax return (original or amended and Financial Withdrawal Consent.	above are the a insmitter, or elect rejection of the ne U.S. Treasury t indicated in the itution to debit t inate the author requests must the processing he payment. I f	mounts fatronic reference transmission and its content to the entry frization. The elements of	rom the iturn originatesion, (b) designate paration sto this acrowled to revoke ved no lates throwledge.	income nator (E the rea of Final oftware count. e (cance ater that payme ge that	e tax ERO) ason ncial e for This el) a an 2 nt of t the		
	ayer's PIN: check one box only	Γ			7			
X		ate mv PIN └		5 5 6	່ as	my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.			digits, but r all zeros		,		
	I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN in below.	nethod. The El	RO mus	t comple	ete Pa			
Your s	signature ▶ Date	02/1	LO/	20 2	3			
Spous	se's PIN: check one box only	_			_			
Ороц	I authorize to enter or gener	ate my PIN			20	my		
	ERO firm name		Enter five	digits, but	_	iiiy		
	signature on the income tax return (original or amended) I am now authorizing.	•	don't ente	r all zeros	;			
	I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN n below.							
Spous	se's signature ▶ Date	•						
	Practitioner PIN Method Returns Only—continue be	low						
Part	Certification and Authentication — Practitioner PIN Method Only							
ERO's	S EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2		1 - 1 -	1 9	8 9			
		Don't e	enter all ze	103				
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual incor ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am s ements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers	submitting this re	eturn in a	accordano				
ERO's	s signature ► Date	•						
	ERO Must Retain This Form — See Instruction							
	Don't Submit This Form to the IRS Unless Requested							

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	s X	Single Married filing jointly	Marrie	ed filing separatel	y (MFS)	☐ Head of	household (HO	H) 🗌		ifying sun	viving		
Check only one box.	If vo	u checked the MFS box, enter the n	ame of w	our spouse. If vo	u check	ed the HOH or	QSS box. ent	er the c		ise (QSS) name if th	ne qualifying		
01.0 207.1	-	son is a child but not your dependen		our opoucor ii yo	u 000		Q00 2011, 0111				q		
Your first name and middle initial			Last na	me				Yo	Your social security number				
RAKESH			MUNI	GANTI				0.0	026-53-3556				
If joint return, spouse's first name and middle initial			Last na	me				Sp	Spouse's social security number				
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	Pr	esider	ntial Flection	on Campaign		
3 S PINI							405		Check here if you, or your				
		ce. If you have a foreign address, also co					ZIP code	sp	ouse i	ouse if filing jointly, want \$3			
FORT LA		,					33324		go to this fund. Checking a below will not change				
Foreign countr		211111	F	oreign province/sta				20/1		ur tax or refund.			
3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	,			3 p		,	J 1 3 1				Spouse		
Digital		ny time during 2022, did you: (a) rec	,					. ,					
Assets		ange, gift, or otherwise dispose of		<u></u>			asset)? (See in	struction	ons.)	∐ Yes	⊠ No		
Standard	_	eone can claim: You as a de	•	•		a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-stat	us alien	1							
Age/Blindnes	You:	Were born before January 2, 1	958	Are blind	Spouse	: Was bo	n before Janua			☐ Is bl			
Dependent		(see instructions): (1) First name Last name		(2) Social secu	ırity	(3) Relationsh	"P ' '			,	instructions):		
If more	(1) Fi			number		to you	Child t	ax credi	t (Credit for ot	her dependents		
than four dependents,								ᆗ					
see instruction	s							ᆗ					
and check	, —							ᆗ	_				
here									\perp				
Income	1a	Total amount from Form(s) W-2, b	,	,					1a		95,500.		
Attach Form(s)	b	Household employee wages not r	•						1b				
W-2 here. Also	С	h							1c				
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)											
1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26							1e				
was withheld.	f		provided adoption benefits from Form 8839, line 29										
If you did not get a Form	g	Wages from Form 8919, line 6 .							1g				
W-2, see	h :	Other earned income (see instruct	·						1h		0.		
instructions.	i	Nontaxable combat pay election (Add lines 1a through 1h	see mstr	uctions)		11			4-	١.	95,500.		
Attach Sch. B	z 2a	Ŭ I	2a		 ьт	axable interes			1z 2b		93,300.		
if required.	3a	· -	3a			ordinary divide			3b				
	4a		4a			axable amoun			4b				
Standard	-та 5а		5a			axable amoun			5b				
Deduction for—	6a		6a			axable amoun			6b				
Single or Married filing	c If you elect to use the lump-sum election method, check here (see instructions)				· .	OD							
separately,	7	•	edule D if required. If not required, check here					. П	7				
\$12,950 Married filing							8	<u> </u>	-8,813.				
jointly or	9	·							9		86,687.		
Qualifying surviving spouse,	10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income									50,007.		
\$25,900 • Head of	11	Subtract line 10 from line 9. This is your adjusted gross income							10	†	86 , 687.		
household,	12	Standard deduction or itemized							12		12,950.		
\$19,400 If you checked	13	Qualified business income deduct		`	,				13	1	,		
any box under Standard	14								14	1 .	12,950.		
Deduction,	15		ero or less, enter -0 This is your taxable income						15		73,737.		
see instructions.					-					•			

Form 1040 (2022	2)										Pa	age 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 4972	3 🔲			16	1	1,83	7.
Credits	17	Amount from Schedule 2, lin	ne 3						17			
	18	Add lines 16 and 17							18	1	1,83	7.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812				19			
	20	Amount from Schedule 3, lir	ne 8						20			
	21	Add lines 19 and 20							21			
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	1	1,83	7.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .				23			0.
	24	Add lines 22 and 23. This is	your total tax					🗔	24	1	1,83	7.
Payments	25	Federal income tax withheld										
•	а	Form(s) W-2				25a	13,7	778.				
	b	Form(s) 1099				25b						
	С	Other forms (see instruction	s)			25c						
	d	Add lines 25a through 25c						2	25d	1	3,77	8.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return			🗀	26			
If you have a qualifying child,	27	Earned income credit (EIC)				27						
attach Sch. EIC.	28	Additional child tax credit from				28						
	29	American opportunity credit	from Form 8863	3, line 8		29						
	30	Reserved for future use .				30						
	31	Amount from Schedule 3, lir	ne 15			31						
	32	Add lines 27, 28, 29, and 31					redits .		32			
	33	Add lines 25d, 26, and 32. T	•		-			_	33	1	3,77	8.
Defined	34	If line 33 is more than line 24							34		1,94	1.
Refund	35a	Amount of line 34 you want				-	=		35a		1,94	1.
Direct deposit?	b	Routing number 0 7 4				Checkin						
See instructions.	d	Account number 7 1 8					J	3-				
	36	Amount of line 34 you want			ed tax	36						
Amount	37	Subtract line 33 from line 24				1 22						
You Owe	01	For details on how to pay, g							37			
	38	Estimated tax penalty (see in	_	-		38						
Third Party		you want to allow another										
Designee		structions					Yes. Com	plete bel	ow.	X No		
3	De	Designee's					I identifica	tion _				
	naı	me		no.			number	(PIN)	L	\perp		Ш
Sign		der penalties of perjury, I declare										
Here				of preparer (other than taxpayer) is based on all information of								•
	Your signature		Date	Date Your occupation				If the IRS sent you an Identity Protection PIN, enter it here				
Joint return?					SOFTWARE	DEVELO	PER	(see ins		T	1 1	\Box
See instructions.	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupat			If the IR	S sent	your sp	ouse an		
Keep a copy for	.,			Special 3 decupation			,		tion PIN	l, enter it	t here	
your records.								(see ins	i.)	$\perp \perp$	$\perp \perp \perp$	Ш
		one no. (551) 283-292		Email address	RAKESHMUNIG	ANTII@GM						
Paid	Pre	eparer's name	Preparer's signat	ure		Date		TIN		Check if		
Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	1 02/16	/2023 P(020827	03	Self	-employ	'ed
Use Only	Fin	Firm's name GLOBAL TAXES LLC						Phone r	Phone no. (678) 965-9522			22
OSE OIIIY	Г:	2/5 DOONE	v cm r ppii	NCMICE N	T 00016			Firm's F	111	0.4	21710	CE

245 ROONEY CT E BRUNSWICK NJ 08816

Firm's address

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

REV 02/05/23 PRO

BAA

Firm's EIN

84-3171965

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

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

RAKE	AKESH MUNIGANTI 026-53					
Par	t I Additional Income					
1	Taxable refunds, credits, or offsets of state and local income taxes			1	0.	
2 a	Alimony received	2	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	-8,813.		
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 <u> </u>				
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				
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:					
•	Total office of the second Add Process Could be a first Country of the second of the s	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,	, iine 8 📗	10	-8,813.	

Schedule 1 (Form 1040) 2022 Page **2**

Par	II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b			
	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	, ,, ,, , , , , , , , , , , , , , , ,	4a		
b	Deductible expenses related to income reported on line 8l from the			
		4b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	·	4c		
d		4d		
е	Repayment of supplemental unemployment benefits under the Trade			
		4e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	4g		
h	Attorney fees and court costs for actions involving certain unlawful			
	,	4h		
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			
		24i	_	
J		24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	41-		
_	,	4k	_	
Z	Other adjustments. List type and amount:	4z		
25			05	
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 . E		26	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u> </u>		

SCHEDULE E (Form 1040)

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 RAKESH MUNIGANTI 026-53-3556 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 1a Physical address of each property (street, city, state, ZIP code) H NO 3-2-128 & 129/1 RAIPURA HANAMKONDA, TELANGANA IN 506001 Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 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 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 540. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 957. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 1,022. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 3,250. 14 14 Repairs 15 Supplies 15 2,365. 16 16 Taxes 17 Utilities 17 1,759. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 9,353. 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 -8,813. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 8,813.) 540. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 9,353. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 8,813. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .

-8,813.