## 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 Revenue Service Go to www.irs.gov/Form8879 for	the latest information.
Submission Identification Number (SID)	
Taxpayer's name	Social security number
BALAJI ELLUR	766-71-2280
Spouse's name	Spouse's social security number
Part I Tax Return Information — Tax Year Ending Decemb	per 31, 2022 (Enter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	zer 31, 2022 (Enter year you are authorizing.)
<b>Note:</b> Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank	,
1 Adjusted gross income	
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 .	
* * * * * * * * * * * * * * * * * * * *	<b>4</b> 1,729.
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization (I	
Under penalties of perjury, I declare that I have examined a copy of the income tax	
to send my return to the IRS and to receive from the IRS (a) an acknowledgement for any delay in processing the return or refund, and (c) the date of any refund. If a Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the final payment of my federal taxes owed on this return and/or a payment of estimated ta authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent at 1-888-353-4537. business days prior to the payment (settlement) date. I also authorize the financial taxes to receive confidential information necessary to answer inquiries and rescipersonal identification number (PIN) below is my signature for the income tax retu Electronic Funds Withdrawal Consent.	applicable, I authorize the U.S. Treasury and its designated Financial institution account indicated in the tax preparation software for ax, and the financial institution to debit the entry to this account. This Financial Agent to terminate the authorization. To revoke (cancel) a. Payment cancellation requests must be received no later than 2 all institutions involved in the processing of the electronic payment of olve issues related to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	1 2 2 8 0
X I authorize GLOBAL TAXES LLC  ERO firm name	to enter or generate my PIN Enter five digits, but
signature on the income tax return (original or amended) I am nov	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original form) if you are entering your own PIN and your return is filed using the below.	ginal or amended) I am now authorizing. Check this box only
Your signature ▶	Date ▶
Spouse's PIN: check one box only	
I authorize	to enter or generate my PIN as my
signature on the income tax return (original or amended) I am nov	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or afficiency) rain not if you are entering your own PIN and your return is filed using the below.	ginal or amended) I am now authorizing. Check this box only
Spouse's signature ▶	Date <b>▶</b>
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 6 1 9 8 9 Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the ele authorized to file for tax year indicated above for the taxpayer(s) indicated above requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized	e. I confirm that I am submitting this return in accordance with the
ERO's signature ▶	Date <b>▶</b>
ERO Must Retain This Form -	

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. 1545-007

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

Filing Status Check only one box.	If yo	u checked the MFS box, enter the n	ame of y	ed filing separately your spouse. If you		_			S	oouse	ing survi (QSS) Ime if the	Ü		
Vour first name		on is a child but not your dependen		ma					Varie		Localmitu			
	our first name and middle initial Last name									Your social security number				
BALAJI		first reason and reliable initial	ELLU						766-71-2280  Spouse's social security n					
ii joint return, s	pouse s	first name and middle initial	Last nai	me					Spou	ise s si	ociai secu	irity number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt.	no.	Pres	identia	al Election	n Campaign		
5349 LAS	COI	LINAS BLVD						13/11			Check here if you, or your			
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete s <sub>l</sub>	paces below.	Sta	te	ZIP code					ly, want \$3		
IRVING				TX 7:			75039			to go to this fund. Checking a box below will not change				
Foreign country name			Foreign province/state/county For			Foreign po	reign postal code your			our tax or refund.				
									You Spo					
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a	•				-	,	٠,,	_	Yes	⊠ No		
Standard	Som	eone can claim:	ependent	Your spot	ıse as	a dependent								
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-statu	s alien									
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind <b>S</b>	pouse	: Was bor	rn before	January	2, 195	8 [	] Is blin	nd		
Dependents	s (see	instructions):		(2) Social secur	ity	(3) Relationsh	nip (4) CI	neck the	box if qu	ualifies	for (see in	nstructions):		
If more		rst name Last name		number		to you		Child tax cre		Cre	Credit for other dependents			
than four												]		
dependents, see instructions														
and check	S											]		
here $\square$												]		
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .						1a	7	9,683.		
	b	Household employee wages not reported on Form(s) W-2								1b				
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)												
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)												
W-2G and	е	, , , ,								1e				
1099-R if tax was withheld.	f	Employer-provided adoption bene	efits from	Form 8839, line 2	. 9					1f				
If you did not	g									1g				
get a Form	h	Other earned income (see instructions)								1h		0.		
W-2, see instructions.	i	Nontaxable combat pay election (see instructions)												
	Z	Add lines 1a through 1h								1z	7	9,683.		
Attach Sch. B	<b>2</b> a	Tax-exempt interest	2a		b T	axable interes	t			2b				
if required.	3a	Qualified dividends	3a			rdinary divide				3b				
	4a	IRA distributions	4a		b T	axable amoun	t			4b				
Standard Deduction for— Single or	5a	Pensions and annuities	5a		b T	axable amoun	t			5b				
	6a	Social security benefits	<b>b</b> Taxable amount						<u>.</u> L	6b				
Married filing	С	If you elect to use the lump-sum election method, check here (see instructions)												
separately, \$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here												
Married filing	8	Other income from Schedule 1, line 10								8		8,266.		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								9		1,417.		
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26								10		1,528.		
Head of	11	Subtract line 10 from line 9. This is your <b>adjusted gross income</b>								11	6	9,889.		
household, \$19,400	12	Standard deduction or itemized deductions (from Schedule A)								12	1	2,950.		
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A								13				
Standard	14	Add lines 12 and 13								14		2 <b>,</b> 950.		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>									5	6 <b>,</b> 939.		

17	rm 1040 (2022)
18       Add lines 16 and 17       18       8, 14         19       Child tax credit or credit for other dependents from Schedule 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, 14         23       Other taxes, including self-employment tax, from Schedule 2, line 21       23         24       Add lines 22 and 23. This is your total tax       24       8, 14         ments         Federal income tax withheld from:         a Form(s) W-2       25a       9, 870         b Form(s) W-2       25b       9, 870         b Form(s) W-2       25b       25b         c Other forms (see instructions)       25c       25d         d Add lines 25a through 25c       25d       9, 87         d Add lines 25a through 25c       25d       9, 87         26       2022 estimated tax payments and amount applied from 2021 return       26         specifical Schieler       27       27         Same discipline 3 d Additional child tax credit from Schedule 8812       28         <	ax and
19	redits
20 Amount from Schedule 3, line 8	
21 Add lines 19 and 20	
22   Subtract line 21 from line 18. If zero or less, enter -0-   22   8, 14	
23 Other taxes, including self-employment tax, from Schedule 2, line 21	
24 Add lines 22 and 23. This is your total tax       24 8,14         ments       25 Federal income tax withheld from:         a       Form(s) W-2       25a       9,870 </td <td></td>	
Federal income tax withheld from:   a   Form(s) W-2	
a Form(s) W-2	
b Form(s) 1099	ayments
c Other forms (see instructions) d Add lines 25a through 25c	
Add lines 25a through 25c   25d   9,87	
26 2022 estimated tax payments and amount applied from 2021 return	
Earned income credit (EIC)	
Earned income credit (EIC)	ou have a
28 29 American opportunity credit from Form 8863, line 8	alifying child,
30 Reserved for future use	ach Sch. EIC.
31       Amount from Schedule 3, line 15       31         32       Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits       32         33       Add lines 25d, 26, and 32. These are your total payments       33       9, 87         34       If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid       34       1,72         35a       Amount of line 34 you want refunded to you. If Form 8888 is attached, check here       35a       1,72	
Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits  32 Add lines 25d, 26, and 32. These are your total payments  33 9, 87  34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid  35 Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	
Add lines 25d, 26, and 32. These are your total payments	
34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	
35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	
35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	efund
deposit? <b>b</b> Routing number 0 4 4 0 0 0 0 3 7 <b>c</b> Type: X Checking Savings	
	ect deposit?
structions. <b>d</b> Account number 5 9 1 0 0 5 8 3 7	e instructions.
36 Amount of line 34 you want applied to your 2023 estimated tax 36	
Cabalact into Continuo En Trico Cano anto anto anto anto anto anto anto a	mount ou Owe
38 Estimated tax penalty (see instructions)	
	nird Party esignee
Designee's Phone Personal identification name no. number (PIN)	

11010	Your signature			Date	Your occupation			If the IRS ser Protection P	,		/	
Joint return? See instructions. Keep a copy for your records.					FULL STACK	JAVA DEVELOPE	ER	(see inst.)				
	Spouse's signa	ature. If a joint return, I	<b>both</b> must sign.	Date	Spouse's occupati	on	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)				ĺ	
	Phone no. (480) 399-8206			Email address	ELLUR.BALAJI@GMAIL.COM						_	
Deid	Preparer's nam	ne	Preparer's signat	ture	Date			ΊΝ	Check if:			
Paid Properer	SYAM PRIYA RAM	SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/14/2023	Р0	2082703	Self-employed			
Preparer Use Only	Firm's name	GLOBAL TA	XES LLC					Phone no. (	(678) 96	5-9	522	
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816						Firm's EIN	84-3	171	965		

# SCHEDULE 1 (Form 1040)

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

OMB No. 1545-0074

2022
Attachment Sequence No. 01

Your social security number

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.

BALAJI ELLUR 766-71-2280 Part Additional Income 1 1 2a Date of original divorce or separation agreement (see instructions): 3 3 4 4 5 -8,266. Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E... 5 6 6 7 7 8 Other income: 8a d8 8c Foreign earned income exclusion from Form 2555 . . . . . . . 8d 8e 8f Alaska Permanent Fund dividends . . . . . . . . . . . . . . . . . . 8i 8i 8k 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

. . . . . . . . . . . . . .

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

8m

8n

80

8p

8q

8r

8s

8t

8u

For Paperwork Reduction Act Notice, see your tax return instructions.

**z** Other income. List type and amount:

**u** Wages earned while incarcerated

9

Section 951A(a) inclusion (see instructions) . . . . . . . . . . . .

Section 461(I) excess business loss adjustment . . . . . . . . . . .

Scholarship and fellowship grants not reported on Form W-2 . . .

**q** Taxable distributions from an ABLE account (see instructions) . . .

Schedule 1 (Form 1040) 2022

-8,266.

9

10

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	1,528.
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 8I from the			
	rental of personal property engaged in for profit	-		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
اء	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)			
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:			
	24z			
25	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 are			1 500
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	1,528.

#### **SCHEDULE E** (Form 1040)

Supplemental Income and Loss

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Sequence No. 13

Go to www.irs.gov/ScheduleE for instructions and the latest information. Name(s) shown on return Your social security number BALAJI ELLUR 766-71-2280 **Income or Loss From Rental Real Estate and Royalties** Part I 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 1a Physical address of each property (street, city, state, ZIP code) 7-5-127SVS NEST APARTMENTS SAROORNAGAR HYDERABAD, TELANGANA IN 500035 A 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 **Davs Days** 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. C C Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 480. 3 Rents received . 4 Royalties received **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 840. 7 7 Cleaning and maintenance. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . . 11 1,154. 12 12 Mortgage interest paid to banks, etc. (see instructions) 13 13 2,449. 14 14 Repairs . . . . 15 15 2,741. Supplies 16 16 Taxes 17 17 1,562. 18 18 Depreciation expense or depletion . . . . . . . . . Other (list) 19 19 20 20 8,746. Total expenses. Add lines 5 through 19 . . . . . . 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 -8,266. file Form 6198 . . . . . . . . . . . . . . . . . . 21 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . 8,266.) 480. 23a Total of all amounts reported on line 3 for all rental properties 23a 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 Total of all amounts reported on line 18 for all properties 23d e Total of all amounts reported on line 20 for all properties . 23e 8,746. 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 8,266.

26

-8,266.

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on