8879 Form

(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 F	Revenue Service Go to www.irs.gov/Form8879 for the la	itest information.				
Submis	ssion Identification Number (SID)					
Taxpaye	er's name		Social securi	ty numbe	r	
SHAR	RATH CHANDRA GUDUMASU		705-87	-4735		
Spouse's	ial securi	ity number				
Dout	Toy Detrive Information Toy Veer Ending December 2	1 0000 /Ento		wa auth	ori=ina \	
Part	· · · · · · · · · · · · · · · · · · ·	1, 2022 (Enter	year you a	re auth	iorizing.)	
	whole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
	Adjusted gross income			1	119	,584.
	Total tax			2		,428.
_	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3		,187.
	Amount you want refunded to you			4		,107.
	Amount you owe			5		241.
Part				-	ur retur	
my kno return (of to send for any Agent to paymen authoriz paymen busines taxes to persona Electror	penalties of perjury, I declare that I have examined a copy of the income tax return oveledge and belief, it is true, correct, and complete. I further declare that the a original or amended) I am now authorizing. I consent to allow my intermediate set my return to the IRS and to receive from the IRS (a) an acknowledgement of redelay in processing the return or refund, and (c) the date of any refund. If application initiate an ACH electronic funds withdrawal (direct debit) entry to the financial into of my federal taxes owed on this return and/or a payment of estimated tax, and exation is to remain in full force and effect until I notify the U.S. Treasury Financial, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payres days prior to the payment (settlement) date. I also authorize the financial institor or receive confidential information necessary to answer inquiries and resolve is all identification number (PIN) below is my signature for the income tax return (or nic Funds Withdrawal Consent. I authorize GLOBAL TAXES LLC to ERO firm name signature on the income tax return (original or amended) I am now autify our are entering your own PIN and your return is filed using the Prebelow.	mounts in Part I abovervice provider, transmodeipt or reason for rejeable, I authorize the U authorize the U the financial institution account independent to terminate anent cancellation requestions involved in the insues related to the paginal or amended) I amount of enter or generate thorizing.	re are the amitter, or electroction of the test. Treasury a cated in the test the authorizates must be processing of ayment. I furn now author	ounts from cretural control of the c	om the incrn origination, (b) the signated for this according to revoke (condition of the condition of the c	come tax cor (ERO) e reason Financial tware for unt. This cancel) a r than 2 yment of that the able, my as my
Your si	ignature ▶	Date ▶ _				
Snous	se's PIN: check one box only					
		o enter or generate	mv PIN			as my
	ERO firm name	o ontor or gonorate	_	ter five di	gits, but	ao my
	signature on the income tax return (original or amended) I am now aut	horizing.	do	n't enter	all zeros	
	I will enter my PIN as my signature on the income tax return (original if you are entering your own PIN and your return is filed using the Pr below.					
Spouse	e's signature ►	Date ►				
	Practitioner PIN Method Returns Only	—continue below				
Part I	III Certification and Authentication — Practitioner PIN Met	hod Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selection	cted PIN. 2 2	2 4 9 Don't ent	6 3 : er all zero	1 9 8 os	9
authoriz	that the above numeric entry is my PIN, which is my signature for the electron zed to file for tax year indicated above for the taxpayer(s) indicated above. I comments of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IF	onfirm that I am subm	itting this reti	ırn in ac	cordance	
ERO's	signature ▶	Date ►				
	ERO Must Retain This Form — Se					
	Don't Submit This Form to the IRS Unless		Oo So			

E 1040 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.

Filing Status Check only one box.	_	Single Married filing jointly uchecked the MFS box, enter the name	_	ed filing separately (N		_				spou	ifying su ise (QSS	S)			
ONC DOX.	-	on is a child but not your dependent	-	our opoude. If you o	ricord		i QOO DOX,	OTILOT	1110 01	ilia o	name ii	1110 9	laam yinig		
Your first name and middle initial				me					Your social security number						
SHARATH CHANDRA				MASU					70	705-87-4735					
If joint return, s	pouse's	s first name and middle initial	Last na						-	Spouse's social security number					
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. n	0.	Pre	sider	ntial Elec	tion C	Campaign		
2051 WIT	TINO	GTON PL									ere if you				
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	Stat	te	ZIP code	ALCOUR I			if filing jo this func				
DALLAS			TX								w will no				
Foreign country	y name		F	Foreign province/state/	count	у	Foreign pos	Foreign postal code yo			your tax or refund.				
											You		Spouse		
Digital Assets		ny time during 2022, did you: (a) reco ange, gift, or otherwise dispose of a					-				Yes	; <u>×</u>	No		
Standard	Som	eone can claim:	pendent	Your spous	e as a	a dependent									
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien										
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	ouse:	Was bo	rn before J	anuar	y 2, 19	58	☐ Is I	blind			
Dependent	s (see	instructions):		(2) Social security	,	(3) Relationsh	nip (4) Che	ck the	box if	qualif	ies for (se	e inst	ructions):		
If more	(1) Fi	irst name Last name	number			to you	Cł	Child tax cr			Credit for other dependent				
than four															
dependents, see instruction	s ——														
and check												Ш			
here											<u>Ц</u>				
Income	1a	Total amount from Form(s) W-2, b	•	,						1a	1	<u>.20,</u>	160.		
Attach Form(s)	b	(4)							1b						
W-2 here. Also	C	,							1c						
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d					
W-2G and 1099-R if tax	e	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.								1g					
get a Form W-2, see	h :	Other earned income (see instructions)							1h		—	0.			
instructions.	'	Add lines 1a through 1h		uctions)			ı			1z	-	120	160.		
Attach Cab D	z 2a		2a	· · · · · · · · · · · · · · · · · · ·	 h T	 axable interes	+		•	2b	-		, 100.		
Attach Sch. B if required.	2a 3a		3a			rdinary divide			•	3b					
	4a		4a			axable amoun			•	4b					
Standard	5a		5a			axable amoun			•	5b					
Deduction for—	6a		6a			axable amoun			•	6b					
Single or Married filing	С	-	election method, check here (see instructions)					$\dot{\Box}$							
separately, \$12,950	7	·	gain or (loss). Attach Schedule D if required. If not required, check here							7		_	-576.		
Married filing	8	Other income from Schedule 1, lin								8					
jointly or Qualifying	9		dd lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9		119,	584.		
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26													
Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								11		119,	584.		
household, \$19,400	12	Standard deduction or itemized	deducti	ons (from Schedule	A)					12			950.		
If you checked	13	Qualified business income deduct	ion from	Form 8995 or Form	899	5-A				13					
any box under Standard	14	Add lines 12 and 13	es 12 and 13							14		12,	,950.		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income									1	<u>.06,</u>	634.		

Form 1040 (202	2)		, ,			Page		
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🗌 4972 3 🗌	16		19,4	28.		
Credits	17	Amount from Schedule 2, line 3	17					
	18	Add lines 16 and 17	18		19,4	28.		
	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		19,4	28.		
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23			0.		
	24	Add lines 22 and 23. This is your total tax	24		19,4	28.		
ayments	25	Federal income tax withheld from:						
•	а	Form(s) W-2						
	b	Form(s) 1099						
	С	Other forms (see instructions)						
	d	Add lines 25a through 25c	25d		19,1	87.		
	26	2022 estimated tax payments and amount applied from 2021 return	26					
you have a ualifying child,	27	Earned income credit (EIC)						
tach Sch. EIC.	28	Additional child tax credit from Schedule 8812 28						
	29	American opportunity credit from Form 8863, line 8						
	30	Reserved for future use						
	31	Amount from Schedule 3, line 15						
	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		19,1	87.		
efund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34					
erunu	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a					
irect deposit?	b	Routing number X X X X X X X X X X X X X X X X X X X						
ee instructions.	d	Account number X X X X X X X X X X X X X X X X X X X						
	36	Amount of line 34 you want applied to your 2023 estimated tax 36						
Amount	37	Subtract line 33 from line 24. This is the amount you owe .						
ou Owe	•	For details on how to pay, go to www.irs.gov/Payments or see instructions	37		2	41.		
	38	Estimated tax penalty (see instructions)						
hird Party Designee		· · ·						
		Designee's Phone Personal identifit name no. number (PIN)						

	name				no.			num	ber (PIN)	Ш		\perp		┙
Sign		of perjury, I declare true, correct, and com													
Here	Your signature					Your occupation SOFTWARE DEVELOPER			If the IRS ser Protection P (see inst.)	,			У	٦	
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.			Date		Spouse's occupation				If the IRS sent your spouse an Identity Protection PIN, enter it h (see inst.)				re	
	Phone no. (989) 817-8700			Email	address	s GSHARATH44@GMAIL.COM								_	
Daid	Preparer's name)	Preparer's signa	ture				Date	PT	TN .	Check if: Self-employe				_
Paid	SYAM PRIYA RAM S	SAGAR GUPTA TALLAM	SYAM PRIYA	RAM	SAGAR	GUPTA	TALLAM	04/13/2023	P0	2082703				oyed	
Preparer	Firm's name	KES LLC					Phone no. (678	96	5-9	522	-			
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816					Firm's EIN	8	4-3	171	.965)				

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Name(s) shown on return Your social security number 705-87-4735 SHARATH CHANDRA GUDUMASU Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2. column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . 1b Totals for all transactions reported on Form(s) 8949 with Box A checked Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 576.) 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -576. Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (g) (h) Gain or (loss) Adjustments Subtract column (e) (d) (e) lines below to gain or loss from from column (d) and Proceeds Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2, column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . . 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

15

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

Part III Summary

16	Combine lines 7 and 15 and enter the result	16	-5	576.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.			
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.			
17	Are lines 15 and 16 both gains? Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.			
	No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:			
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21	(5 ⁻	76.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.			
	■ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			