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

Special security number Special S	Submission Identification Number (SID)			•					
Spouse's social security number	Taxpayer's name	Social security	numbe	r					
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS filter use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1	VENKATA SRI LAKSHMI ANNAPUREDDY		876-71-	6301					
Enter whole dollars only on lines 1 through 5. Note: Form 10:40-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1	Spouse's name Spouse's social se								
Enter whole dollars only on lines 1 through 5. Note: Form 10:40-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1	Part I Tax Return Information — Tax Year Ending December	31. 2022 (Enter	vear vou ar	e auth	orizina.))			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income 2 111, 849.1 2 Total tax		2022 (2000)	, ,		31,				
2 11,848. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 . 3 13,900. 4 Amount you want refunded to you . 4 2,052. 5 Amount you want refunded to you . 4 2,052. 5 Amount you owe . 4 2,052. 5 Amount you want refunded to you . 4 4 2,052. 5 Amount you want refunded to you refund you have the the want you have you are mended) I am now authorizing, and to the based of the sample and you	·								
A Amount you want refunded to you B Amount you owe Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Loder penalities of perjuny, I declare that have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended). I am now authorizing I consent to allow my intermediate service provider, transmitter, or electronic return original from the income tax return (original or amended) is mnow authorizing or any effect in the service of electronic return original or any refund. If applicable, I authorize the U.S. Treasury and its designated friancial Agent to initiate an ACH electronic funds withdrawal (girect debit) entry to the financial institution account indicated in the tax preparation software for yourneer or my debat always and its designated friancial Agent to initiate an ACH electronic funds withdrawal (girect debit) entry to the financial institution account indicated in the tax preparation software for properation and the financial financial properation and the financial financia	1 Adjusted gross income		[1	86,	,715.			
Amount you want refunded to you Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjun; I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of whore you get and belief, it is true, correct, and complete. I that the amounts in Part I above are mounts from the income tax return (original or amended) I am now authorizing, and to the best of the country of the complete of the property of the complete of the compl			-	2	11,	,848.			
Amount you owe Part III Taxpager Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. Checket to allow my intermediate service provider, transmitter, or electronic return originator (REN) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the ICs. Treasury and its designated financial authorization is to remain in full force and effect until I notify the U.S. Treasury. Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the provoke (cancel a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the provoke (cancel a payment, I must contact the U.S. Treasury is ginature and the insorting and resolve issues related to the payment. I turther acknowledge that the personal identification number (Pily) below is my signature for the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below. Spouse's signature Date Pa	()		H						
Date Part III Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of pripril, 1 declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is frue, correct, and complete, I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended). I am now authorizing, and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or return, and (c) the date of any return (if applicable, lauthorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution rejection of the transmission, (b) the reason for any delay in processing the return or return, and (c) the date date, and the financial institution in the preparation software for payment of my federal taxes owned on this return and/or a payment of settimated tax, and the financial institution is account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at also authorizes the financial institutions involved in the processing of the electronic payment of taxes to raceive confidential information necessary to answer inquiries and resolve issues related to the payment aust be received not later than 2 but any any and the electronic payment of the payment (electronic payment) and the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Corseent. Taxpayer's PIN: check one box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complet	, , , , , , , , , ,				2,	,052.			
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I authorize GLOBAL TAXES LLC to enter or generate my PIN ERO firm name signature on the income tax return (original or amended) I am now authorizing. □ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below. Spouse's PIN: check one box only □ I authorize									
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I authorize	Your signature ▶	Date ▶							
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ERO Must Retain This Form — See Instructions	authorized to file for tax year indicated above for the taxpayer(s) indicated above. I	confirm that I am submit	ting this retur	n in ac	cordance	am now with the			
	ERO's signature ▶	Date ▶							
			0.50						

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 Check only	X S	Single Married filing jointly	Marrie	ed filing separately	MFS)	Head of	house	ehold (HOF	l)		ifying survi ise (QSS)	ving	
one box.		u checked the MFS box, enter the ron is a child but not your dependen		our spouse. If you	checke	ed the HOH or	r QSS	box, ente	r the c	hild's	name if the	e qualifying	
Your first name		· · ·	Last na	me					Yo	our so	cial security	number	
						876-71-6301							
						Spouse's social security number							
Home address	(numbe	r and street). If you have a P.O. box, see	 e instruction	ons.				Apt. no.	Pr	esider	ntial Electio	n Campaign	
555 BRII	DLE E	PATH						2105		Check here if you, or your			
City, town, or p	ost offic	ce. If you have a foreign address, also c	omplete s	paces below.	Stat	е	ZIP	code		spouse if filing jointly, want \$3 to go to this fund. Checking a			
GRAND PR	RAIRI	E		TX 75			75	050		•	ow will not o	_	
Foreign country	/ name		F	oreign province/state	/county	/	Fore	ign postal co	de yo	ur tax	or refund.	r refund.	
											You	Spouse	
Digital Assets		y time during 2022, did you: (a) rec ange, gift, or otherwise dispose of									□Yes	⊠ No	
Standard		eone can claim: You as a de						, (,			
Deduction		Spouse itemizes on a separate retu	•										
Age/Blindness	You:	Were born before January 2,	1958	Are blind Sp	ouse:	☐ Was bor	_	fore Janua			Is blir		
Dependents	•	•		(2) Social securit	у	(3) Relationsh	nip (1		nstructions):	
If more	(1) Fi	rst name Last name		number	number to you Child tax		x credit	t	Credit for other dependents				
than four dependents,									<u></u>		L		
see instructions	s ——							L			L	<u></u>	
and check	. —										L		
here	4 -	Tababas and form Face (a) W.O. I	4 /							1 4 -		5 050	
Income	1a	Total amount from Form(s) W-2, k	,	,			•			1a	9	<u>5,950.</u>	
Attach Form(s)	b	Household employee wages not r					•			1b			
W-2 here. Also	C C	Tip income not reported on line 1 Medicaid waiver payments not re	•	•			•			1c			
attach Forms W-2G and	d e	Taxable dependent care benefits	•	` ,	IIISIIU		•			1e			
1099-R if tax	f	Employer-provided adoption benefits		*			•			1f			
was withheld.	g	Wages from Form 8919, line 6.					•		•	1g			
If you did not get a Form	9 h	Other earned income (see instruc					•		•	1h		0.	
W-2, see	i	Nontaxable combat pay election	,							•••			
instructions.	z	Add lines 1a through 1h	(300)	40110110)			'			1z	9	5,950.	
Attach Sch. B		Tax-exempt interest	2a		b Ta	axable interes	t .			2b			
if required.	3a	Qualified dividends	3a			rdinary divide				3b			
	4a	IRA distributions	4a			axable amoun				4b			
Standard	5a	Pensions and annuities	5a			axable amoun				5b			
Deduction for—	6a	Social security benefits	6a		b Ta	axable amoun	ıt .			6b			
Single or Married filing	С	If you elect to use the lump-sum	election r	method, check here	(see i	nstructions)							
separately, \$12,950	7	Capital gain or (loss). Attach Sche	edule D if	required. If not rec	uired,	check here			. 🔲	7			
Married filing	8	Other income from Schedule 1, lin	ne 10 .							8	_	9,235.	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	7, and 8.	This is your total in	come					9	8	6,715.	
surviving spouse, \$25,900	10	Adjustments to income from Sche	edule 1, l	ine 26						10			
Head of	11	Subtract line 10 from line 9. This i	is your ac	djusted gross inco	me					11	8	6,715.	
household, \$19,400	12	Standard deduction or itemized	l deducti	ions (from Schedul	e A)					12	1	2,950.	
If you checked	13	Qualified business income deduc	tion from	Form 8995 or Forr	n 8998	5-A				13			
any box under Standard	14	Add lines 12 and 13								14	1	<u>2,950.</u>	
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ero or less	s, enter -0 This is	your t a	axable incom	ne			15	7	3,765.	

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from Form	(s): 1 881	4 2 4972	3 🗌		16	11,848.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	11,848.
	19	Child tax credit or credit for other dependent	ts from Sched	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	11,848.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your total tax					24	11,848.
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2			25a	13,900		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	13,900.
If you have a	26	2022 estimated tax payments and amount a	pplied from 20	21 return			26	
qualifying child,	27	Earned income credit (EIC)		No .	27			
attach Sch. EIC.	28	Additional child tax credit from 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 15			31			
	32	Add lines 27, 28, 29, and 31. These are your	total other pa	ayments and refu	ndable credit	s	32	
	33	Add lines 25d, 26, and 32. These are your to	tal payments				33	13,900.
Refund	34	If line 33 is more than line 24, subtract line 2	4 from line 33.	This is the amour	nt you overpai	d	34	2,052.
riciana	35a	Amount of line 34 you want refunded to you	ı. If Form 8888	is attached, chec	k here	🗆	35a	2,052.
Direct deposit?	b	Routing number 0 1 1 9 0 0 2			Checking [Savings		
See instructions.	d	Account number 3 8 5 0 2 5 2	3 9 3 1	1 9				
	36	Amount of line 34 you want applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. This is the amo For details on how to pay, go to www.irs.gov	•				37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to disc				Complete	below.	X No
· ·		signee's	Phone			ersonal iden	tification	
	na	me	no.		nı	ımber (PIN)		
Sign Here		der penalties of perjury, I declare that I have examine ief, they are true, correct, and complete. Declaration of						
пеге	Yo	ur signature	Date	Your occupation				nt you an Identity
							tection P e inst.)	IN, enter it here
Joint return? See instructions.		ouse's signature. If a joint return, both must sign.	Date	QUALITY EN		,		nt your spouse an
Keep a copy for your records.	Sμ	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	OII	Ide		ection PIN, enter it here
	Ph	one no. (470)640-1825	Email address	SIRISHAANNAPURI	EDDY999@GMAIL	.COM		
Doid	Pre	eparer's name Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAN	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/09/202	3 P0208	32703	Self-employed
Preparer		m's name GLOBAL TAXES LLC						678)965-9522
Use Only		n's address 245 ROONEY CT E BRU	NSWICK N	J 08816			n's EIN	84-3171965
								1010

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

VENKATA SRI LAKSHMI ANNAPUREDDY

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

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

Sequence No. 01

Your social security number
876-71-6301

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
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. Att		5	-9,235.
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		
	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
•	T to both a first of A billion Coults and C	8z		
9	Total other income. Add lines 8a through 8z		9	0.005
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	i, or 1040-NR, line 8	10	-9,235.

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 governing			
	officials. Attach Form 2106	[12	1
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:			
25			O.F.	
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 here an Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	Form 1040 of 1040-3n, lifte 10, of Form 1040-1nn, lifte 10a		20	

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 Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. 13

Your social security number

OMB No. 1545-0074

VENI	KATA SRI LAKSHMI ANNAPUREDDY					8	376-7	1-6301	
Par									
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use	Schedule	C . See	instru	ctions. If you are	an indiv	/idual, rep	ort farm
Α	Did you make any payments in 2022 that would require you	to file	Form(s)	10992.5	See ins	structions		□ Ye	s X No
1a	Physical address of each property (street, city, state, ZIF								
			<u> </u>						
A	SEETHARAMPUR KARIMNAGAR TELANGANA IN 5	50500) T						
B C									
	Town of Donasto O E				_				
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	erty IISt rental	ea and		Fa	ir Rental I Days	Person Da	al Use	QJV
Α	personal use days. Check the Qu			Α		365		0	
В	if you meet the requirements to f			В		303			
C	qualified joint venture. See instru	uctions		C					
Type	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren	ıtal	5 Lanc	ł	7	Self-Rental			
	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (describ	e)		
	<u> </u>								
lnaar	200			Α		Properties B	5 i		С
Incor 3	Rents received	3			00.	В			<u> </u>
4	Royalties received	4			00.				
	nses:	T							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,0	00.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		8	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13			00.				
14	Repairs	14		1,9	75.				
15	Supplies	15							
16	Taxes	16		2 2	CO				
17	Utilities	17 18		3,3	60.				
18 19	Depreciation expense or depletion	19							
20	Other (list) Total expenses. Add lines 5 through 19	20		9,8	3.5				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	20		٥, ر	٠,٠				
-1	result is a (loss), see instructions to find out if you must								
	file Form 6198	21		-9,2	35.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(9,23	35.)	()	()
23 a	Total of all amounts reported on line 3 for all rental prope	erties			23a	(600.		
b	Total of all amounts reported on line 4 for all royalty prop	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	9,8	835.		
24	Income. Add positive amounts shown on line 21. Do no		-				24		
25	Losses. Add royalty losses from line 21 and rental real estat						25	(9,235.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, IV, and line 40 on page 2 do not Schedule 1 (Form 1040), line 5. Otherwise, include this ar						26		-9,235.