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

	1.070.1100 001.1100							
Submi	ssion Identification Number (SID)							
Taxpaye	r's name	Social security number						
DEER	SHITH REDDY KOMMIDI	651-43-6549						
Spouse's	s name	Spouse's social security number						
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	 er year you a	re all	thorizina	1			
	whole dollars only on lines 1 through 5.	er year you a	i e au	unonzing	· <i>)</i>			
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income		1	19	,366.			
2	Total tax		2		643.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	2	2,842.			
4	Amount you want refunded to you		4		,199.			
5	Amount you owe		5		,,_,,			
Part		keep a cop	y of y	our retu	ırn)			
my knoreturn (control to send for any Agent to paymer authorize paymer business taxes to personal	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transing return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay 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 in the form of the financial institution account in the financial 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 resist days prior to the payment (settlement) date. I also authorize the financial institutions involved in the preceive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) I	ove are the amomitter, or electro- ejection of the training of trainin	ounts of conic recansmission of its of ax preparation. The receiff the elastic of the action are receiff.	from the in turn original ssion, (b) the designated paration so to this accor To revoke of ved no late ectronic paraking when	come tax ator (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the			
	nic Funds Withdrawal Consent. yer's PIN: check one box only							
X		a my PIN	6 !	5 4 9	as my			
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	En		digits, but er all zeros	asiny			
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.							
Your s	ignature ▶ Date ▶	01/05/2023	}					
Snous	e's PIN: check one box only							
Ороцо	I authorize to enter or generate	a my PIN			as my			
	ERO firm name		ter five	digits, but	asiny			
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros				
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.							
Spous	e's signature ▶ Date ▶							
	Practitioner PIN Method Returns Only—continue below	N						
Part I	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 Don't ent	6 6 er all ze	1 9 8	9			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of	tax return (origi mitting this retu	nal or urn in a	amended) accordance				
ERO's	signature ▶ Date ▶							
	ERO Must Retain This Form — See Instructions							
	Don't Submit This Form to the IRS Unless Requested To	Do So						

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	\mathbf{X}	Single Married filing jointly	Marri	ed filing separately	(MFS)	Head of	hous	ehold (HOH	l)		ifying survi	ving	
Check only one box.	If vo	u checked the MFS box, enter the	name of	vour spouse. If you	check	ed the HOH o	COS	Shox ente	r the c		ise (QSS) name if the	e qualifying	
one box.		on is a child but not your depender		your opouco. It you	Concort		QO.	o box, onto		/ ma 0	namo n un	y quamymig	
Your first name	and mi	ddle initial	Last na	Last name						Your social security number			
DEEKSHITH REDDY K				MIDI					6	651-43-6549			
				ame								urity number	
Home address	numbe	r and street). If you have a P.O. box, se	e instructi	ions.				Apt. no.	Pı	esider	ntial Electio	n Campaign	
939 S WE	STEF	RN AVE									neck here if you, or your		
City, town, or p	ost offic	ce. If you have a foreign address, also c	complete spaces below. State ZIP				code		spouse if filing jointly, want \$3 to go to this fund. Checking a				
CHICAGO			IL 60			60	612		_	w will not	_		
Foreign country name				Foreign province/state/county			Fore	Foreign postal code y			your tax or refund.		
											You	Spouse	
Digital	At an	y time during 2022, did you: (a) red	ceive (as	a reward, award,	or payn	nent for prope	rty c	r services);	or (b)	sell,			
Assets	exch	ange, gift, or otherwise dispose of	a digital	asset (or a financi	al intere	est in a digital	asse	et)? (See ins	structi	ons.)	Yes	⊠ No	
Standard	Som	eone can claim: 🗌 You as a d	ependen	t 🗌 Your spo	use as	a dependent							
Deduction		Spouse itemizes on a separate retu	ırn or yol	u were a dual-statu	ıs alien								
Age/Blindness	You:	Were born before January 2,	1958 [Are blind S	pouse	. Was box	rn be	fore Janua	rv 2 1	958	ls blir	nd	
					(4) Check th	, ,							
•	•	(1) First name Last name		number		to you		Child tax cred		· 1		•	
If more than four	· /				9.1110 10.11		7			1			
dependents,													
see instructions and check	· ——							 					
here												<u></u>	
Income	1a	Total amount from Form(s) W-2, I	box 1 (se	ee instructions) .						1a	1	9,366.	
IIICOIIIC	b	Household employee wages not	reported	on Form(s) W-2 .						1b			
Attach Form(s)	С									1c			
W-2 here. Also attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d				
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26							1e				
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29						1f					
If you did not	g	Wages from Form 8919, line 6 .	ne 6						1g				
get a Form	h	Other earned income (see instruc	tions)							1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election	pay election (see instructions)										
	Z	Add lines 1a through 1h							1z	1	9,366.		
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	b Taxable interest				2b			
if required.	<u>3a</u>	Qualified dividends	3a		b Ordinary dividends				3b				
	4a	IRA distributions	4a		b Ta	axable amoun	t.			4b			
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun				5b			
Single or	6a	Social security benefits		b Taxable amount						6b	-		
Married filing separately,	С	If you elect to use the lump-sum election method, check here (see instructions)								_			
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								7			
Married filing jointly or	8	Other income from Schedule 1, line 10								8			
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9	$\frac{1}{1}$	9,366.	
\$25,900	10	Adjustments to income from Schedule 1, line 26								10			
 Head of household, 	11	Subtract line 10 from line 9. This is your adjusted gross income								11		9,366.	
\$19,400	12	Standard deduction or itemized deductions (from Schedule A)								12	$+$ $\frac{1}{}$	<u>2,950.</u>	
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A							13	+	0.050		
Standard Deduction,	14									15			
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income									5 6,416.		

Form 1040 (2022	<u>'</u>)										Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌			. 16		643.	
Credits	17	Amount from Schedule 2, lir				_		-				
	18	Add lines 16 and 17						. 18		643.		
	19	Child tax credit or credit for	other dependen	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		643.	
	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		643.	
Payments	25	Federal income tax withheld										
•	а	Form(s) W-2				25a	2	2,84	2.			
	b	Form(s) 1099				25b						
	С	Other forms (see instruction	s)			25c						
	d	Add lines 25a through 25c							. 25d	2	,842.	
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	021 return				. 26			
qualifying child,	27	Earned income credit (EIC)				27						
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	2		28						
	29	American opportunity credit	from Form 8863	3, line 8		29						
	30	Reserved for future use .				30						
	31	Amount from Schedule 3, lin	ne 15			31						
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ındable	credits		. 32			
	33	Add lines 25d, 26, and 32. T	hese are your to	otal payments					. 33	2	,842.	
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amour	nt you o	verpaid		. 34	2	,199.	
riciana	35a						35a	2	,199.			
Direct deposit?	b	Routing number 0 8 1				Checki	ng 🗌	Savin	gs			
See instructions.	d	Account number 2 9 1	0 3 4 6	2 8 5 2	2 6							
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36						
Amount	37	Subtract line 33 from line 24	. This is the am	ount you owe.								
You Owe		For details on how to pay, g	o to <i>www.irs.go</i>	v/Payments or	see instructions .				. 37			
	38	Estimated tax penalty (see in	nstructions) .			38						
Third Party		you want to allow another	person to disc				_					
Designee		tructions							× No			
	De: nar	signee's ne		Phone no.				onal id ber (Pl	lentification N)			
Ciana		der penalties of perjury, I declare t	hat I have evamine		d accompanying sch	adulas ar				et of my know	wledge and	
Sign		ief, they are true, correct, and com										
Here	Your signature		Date Your occupation			1	f the IRS se	nt you an Ide	entity			
	•									IN, enter it h	ere	
Joint return?				SOFTWARE ENGINEER				see inst.)				
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date Spouse's occupation		ation				nt your spou		
your records.									Identity Protection PIN, enter it here (see inst.)			
	Phone no. (312)479-8184		Email address DEEKSHITHDEV07@GMAIL.			MATI CO)M					
				gnature			Date PTIN			Check if:		
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA					P02	082703 Self-employed			
Preparer							one no. (678)965-9522					
Use Only			Y CT E BRU	JNSWICK N	J 08816				Firm's EIN			
Go to www ire a		11040 for instructions and the late			BAA	DE\/ 04/	02/23 PRO			Form 1040 (2022)		
35 to www.iis.gc	OIII	770 70 TOT INSTRUCTIONS AND THE IALE	ot information.		DAA	KEV UI/	02/23 PRU			101111	(2022)	