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 n	leveriue Service										
Submis	ssion Identification Number (SID)										
Taxpayer	r's name	Social se	Social security number								
SHRA	AVYA R THATIPARTHI	321-	321-65-5621								
Spouse's	Spouse's	Spouse's social security number									
Part	Tax Return Information — Tax Year Ending December 31, 202	2 (Enter	. voar vo	ou are	auth	Orizi	na)				
	whole dollars only on lines 1 through 5.	Z (EIILEI	year yo	Ju are	autii	OHZII	iig.)				
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.										
	Adjusted gross income			.	1		32,	501.			
	Total tax				2			144.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			. [3		4,	511.			
4	Amount you want refunded to you			. [4		2,	367.			
	Amount you owe				5						
Part I	Taxpayer Declaration and Signature Authorization (Be sure you go	et and l	ceep a	сору	of yo	ur re	eturr	1)			
return (o to send for any o Agent to payment authorize payment business taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in P original or amended) I am now authorizing. I consent to allow my intermediate service provide my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reas delay in processing the return or refund, and (c) the date of any refund. If applicable, I author initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution act of my federal taxes owed on this return and/or a payment of estimated tax, and the financial action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the treatment of the payment (settlement) date. I also authorize the financial institutions involved receive confidential information necessary to answer inquiries and resolve issues related ali identification number (PIN) below is my signature for the income tax return (original or amenic Funds Withdrawal Consent.	er, transmon for rejective the Ucount indication in the terminate ation request to the properties of t	itter, or election of to a cated in to debit the authors must be the authors must be the authors must be the authors must be ayment.	ectron the tran the tax the tax the enorization of the tay for the tay	ic returnsmissing its de preparentry to on. To receive he elecer ackr	n origion, (b) signal ration this a revolution the revolution of t	ginato b) the ted Fi softv accou ke (ca later c payr dge t	r (ERO) reason nancial vare for nt. This uncel) a than 2 ment of hat the			
	yer's PIN: check one box only						\neg				
X	-	enerate	mv PIN	5	5 6	2	1	as my			
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	0.10.010	,		five di enter a		ut	,			
	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner F below.										
Your si	ignature ▶ [Date ► _									
Snouse	e's PIN: check one box only						_				
	I authorize to enter or g	enerate	my PIN					as my			
ERO firm name Enter five digits, but								ao my			
	signature on the income tax return (original or amended) I am now authorizing.			don't	enter a	all zero	os				
	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner Fibelow.										
Spouse	e's signature ▶ □	Date ►									
	Practitioner PIN Method Returns Only—continue	e below									
Part II	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 zero	s					
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual red to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Prov	am subm	itting this	returr	in ac	corda	nće v				
ERO's	signature ► [Oate ▶									
	ERO Must Retain This Form — See Instruction	tions									
	Don't Submit This Form to the IRS Unless Request		o So								

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 one box.	If yo	Single Married filing jointly ou checked the MFS box, enter the	e name of y	ed filing separately your spouse. If you						spou	lifying sun use (QSS) name if th	Ü	
	pers	son is a child but not your dependent	ent:										
Your first name	and m	iddle initial	Last nar	me						Your social security number			
SHRAVYA R			THAT	IPARTHI							55-562		
If joint return, s	pouse's	s first name and middle initial	Last nar	me						Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, s	see instruction	ons.			1	Apt. no.		Preside	ntial Election	on Campaigr	
5303 N I	MCAR'	THUR BLVD									Check here if you, or your		
City, town, or p	ost offi	ce. If you have a foreign address, also	complete spaces below. State ZI				ZIP d	code		spouse if filing jointly, want \$3 to go to this fund. Checking a			
IRVING			TX			ζ	75038 b			_	ow will not	•	
Foreign country name			F	Foreign province/state/county			Forei	oreign postal code your		your tax	your tax or refund.		
											You	Spouse	
Digital Assets		ny time during 2022, did you: (a) r nange, gift, or otherwise dispose o									Yes	⊠ No	
Standard		neone can claim: You as a		<u>_</u>				, ,					
Deduction	_	Spouse itemizes on a separate re	•	•									
Age/Blindnes	s You	: Were born before January 2	., 1958	Are blind S	oouse	: Was bor	rn bef	ore Janua	ary 2	, 1958	☐ Is bl	ind	
	_	(see instructions):		(2) Social security		/ (3) Relationship		(4) Check the box		x if qualit	ies for (see	instructions):	
If more		(1) First name Last name		number		to you		Child tax cre		edit	Credit for ot	her dependents	
than four													
dependents, see instruction								[
and check	5										[
here								[
Income	1a	Total amount from Form(s) W-2	, box 1 (see	e instructions) .						1a		32,501.	
	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)							1c				
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d				
W-2G and 1099-R if tax	е	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.	i	Nontaxable combat pay election	n (see instr	uctions)		<u>1i</u>							
	Z	Add lines 1a through 1h .								1z		32,501.	
Attach Sch. B	2a	Tax-exempt interest	2a			axable interest				2b			
if required.	<u>3a</u>	Qualified dividends	3a			ordinary divide				3b			
	4a	IRA distributions	4a			axable amoun				4b			
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun				5b			
Single or	6a	Social security benefits	6a			axable amoun	t			6b			
Married filing separately,	_ c	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	<u> </u>	20 501		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								9	+ -	32,501.	
\$25,900	10	Adjustments to income from Schedule 1, line 26								10	+ .	20 501	
 Head of household, 	11	Subtract line 10 from line 9. This is your adjusted gross income							11		32,501.		
\$19,400	12	Qualified business income dedu		•	,	 5_Δ				12		12,950.	
If you checked any box under	14	Add lines 12 and 13								14		12 050	
Standard Deduction,	15									15		<u>12,950.</u> 19,551.	
see instructions.	13	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15		17,001.	

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	2,144.		
Credits	17	Amount from Schedule 2, lin	17								
	18	Add lines 16 and 17	18	2,144.							
	19	Child tax credit or credit for	19								
	20	Amount from Schedule 3, lin	20								
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	2,144.		
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .			23	0.		
	24	Add lines 22 and 23. This is	your total tax					24	2,144.		
Payments	25	Federal income tax withheld									
-	а	Form(s) W-2									
	b	Form(s) 1099									
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c						25d	4,511.		
If you have a	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return			26			
qualifying child,	27	Earned income credit (EIC)				27					
attach Sch. EIC.	28	Additional child tax credit from	n 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	ie 15			31					
	32	Add lines 27, 28, 29, and 31	32								
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	4,511.		
Refund	34	If line 33 is more than line 24							2,367.		
neiuliu	35a	Amount of line 34 you want	refunded to you	یا. If Form 8888	is attached, che	eck here	🗆	35a	2,367.		
Direct deposit?	b	Routing number 1 1 1				_	X Saving				
See instructions.	d	Account number 4 8 8					_				
	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 For details on how to pay, g						37			
	38	Estimated tax penalty (see in	nstructions) .			38					
Third Party Designee		you want to allow another	person to disc	cuss this retur	n with the IRS	? See	. Complet	e below.	⊠ No		
		esignee's Phone Personal identific									
	naı	ne		no.		n	umber (PIN)			
Sign Here		der penalties of perjury, I declare t ief, they are true, correct, and com									
TICIC	Yo	ur signature	Date	P				nt you an Identity IN, enter it here			
Joint return?			SOFTWARE ENGINEER				ee inst.)				
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.			lde					the IRS sent your spouse an entity Protection PIN, enter it here se inst.)		
	——Ph	one no. (425)436-178	7	Email address		OYT81@GMAIL	COM				
		eparer's name	Preparer's signat		SIIKA (IAKEDI	Date	PTIN		Check if:		
Paid		ATA SAI PAVAN KUMAR DUDIPALLI	1	-		01/24/202		70833	Self-employed		
Preparer		m's name GLOBAL TA	L XFC T.T.C			01/21/202			(678)965-9522		
Use Only		Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's							88-2145487		
Co to ware to				TIONITCH IN				III S LIIN	Form 1040 (2022)		
GO TO WWW.Irs.go	virom	n1040 for instructions and the late	st information.		BAA	REV 01/14/23 PF	(U		Form 1040 (2022)		