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

	5					
Submis	ssion Identification Number (SID)					
Taxpaye	r's name	Social securi	ty numb	per		
FNU	LALITA PRIYADARSINI	744-94	-311	6		
Spouse's	pouse's name Spouse's social security number					
Dort	Toy Detrive Information Toy Very Ending December 21 0000 (Ente	K 7 10 0 K 7 10 11 0	KO 011	th o rizin a	<u> </u>	
Part	, , ,	r year you a	re au	inorizing.)	
	vhole 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	58	,870.	
	Total tax		2		,721.	
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,113.	
	Amount you want refunded to you		4		,392.	
	Amount you owe		5			
Part		keep a cop	y of y	our retu	rn)	
my kno return (a to send for any Agent to paymen authoriz paymen busines taxes to persona	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 abouriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy 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 Lorinitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income to 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 the Industry of the payment (settlement) date. I also authorize the financial institutions involved in the payment confidential information necessary to answer inquiries and resolve issues related to the payment of the payment (PIN) below is my signature for the income tax return (original or amended) I as a function of the payment withdrawal Consent.	we are the am- nitter, or electro- ection of the to i.S. Treasury a icated in the to on to debit the e the authoriza- uests must be processing of payment. I fur	ounts for the conic reference in the conic reference in the conic received in the conic	from the incurrence of the control o	come tax tor (ERO) ne reason Financial tware for bunt. This cancel) a er than 2 syment of that the	
	nic Funds Withdrawal Consent. yer's PIN: check one box only					
X	•	my DINI 4	3 2	L 1 6	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	as my	
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.					
Your si	gnature ▶ Date ▶					
Spous	e's PIN: check one box only					
Opous	I authorize to enter or generate	my DIN			as my	
	ERO firm name		ter five	digits, but	as my	
	signature on the income tax return (original or amended) I am now authorizing.			r all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.					
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	1				
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 4 9 Don't ent	6 6	1 9 8	9	
		Don t ent	or all Zt			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ted 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 I	nitting this retu	ırn in a	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				

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	s 🔀 S	Single Married filing jointly	Marrie	ed filing separately	y (MFS)	☐ Head of	household (HOH)			g surviv	ing
Check only one box.	•	u checked the MFS box, enter the n	,	our spouse. If you	u check	ed the HOH or	QSS box, enter t		use (C s nam	,	qualifying
· · ·		on is a child but not your dependent						\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
		Last nar					Your social security number			number	
FNU				TA PRIYADA	RSIN:	<u> </u>		744-			
If joint return, s	pouse's	first name and middle initial	Last nar	ne				Spouse	'S SOC	al secui	rity number
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	Preside	ntial E	lection	Campaign
12445 AI	LAMEI	DA TRACE CIRCLE					513			f you, or	•
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete sp	oaces below.	Sta	te	ZIP code				, want \$3
AUSTIN TX 78727 box is		1 0	o go to this fund. Checking a box below will not change								
		your ta	your tax or refund.								
				You [Spouse						
Digital		y time during 2022, did you: (a) rec					, , , , , , , , , , , , , , , , , , , ,	. ,	Π,	Yes	⊠ No
Assets		ange, gift, or otherwise dispose of a		<u>-</u> _			asset)? (See mstr	uctions.)	Ш	165	NO
Standard Deduction	_	eone can claim:	•			a dependent					
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind	Spouse	: Was bor	n before January	2, 1958		Is bline	d
Dependent	s (see	instructions):		(2) Social secu	ıritv	(3) Relationsh	ip (4) Check the	oox if qual	ifies fo	r (see in	structions):
If more		rst name Last name		number	,	to you	Child tax	credit	Credit	for other	r dependents
than four											
dependents,											
see instruction and check	S ——										
here]										
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .				. 1a	1	65	5,521.
	b	Household employee wages not re	•					. 1k)		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions)				. 10	;		
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) W-2 (se	e instru	ıctions)		. 10	1		
W-2G and 1099-R if tax	е	Taxable dependent care benefits	from For	m 2441, line 26				. 16	•		
was withheld.	f	Employer-provided adoption bene	efits from	Form 8839, line	29 .			. 11	:		
If you did not	g	Wages from Form 8919, line 6 .						. 19	1		
get a Form W-2, see	h	Other earned income (see instruct	,					. <u>1</u> 1	1		0.
instructions.	i	Nontaxable combat pay election (see instr	uctions)		<u>1i</u>					
	Z	Add lines 1a through 1h						. 12		65	5,521.
Attach Sch. B	2a	' -	2a			axable interes		. 2k			
if required.	3a		3a			ordinary divide		. 3k			
	4a	_	4a			axable amoun					
Standard Deduction for—	5a	_	5a			axable amoun		. 5k			
Single or	6a	,	6a			axable amoun	t	. 6k)		
Married filing separately,	C 7	If you elect to use the lump-sum e		•	`	,					
\$12,950	7	Capital gain or (loss). Attach Sche						□ 7 • •			
 Married filing jointly or 	8	Other income from Schedule 1, lin						. 8	_		6,651.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-				. 9			8,870.
\$25,900	\$25,900 Adjustments to income from Schedule 1, line 20				. 10			070			
 Head of household, 	11 12	Standard deduction or itemized	-					. 11			8,870.
\$19,400 If you checked	13	Qualified business income deduct		,	,	 5-Δ		. 13			2,950.
any box under	14								_	1 0	2,950.
Standard Deduction,	15	Subtract line 14 from line 11. If zer									5,930.
see instructions.	.5	Castast mio 14 nom mio 11. Il 26		, onto 0 . 11115 1	o your	andolo illooli				40	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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	5,721.
Credits	17	Amount from Schedule 2, lin	e3				[17	
	18	Add lines 16 and 17					[18	5,721.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e 8				[20	
	21	Add lines 19 and 20					[21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[22	5,721.
	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	5,721.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 9,	,113.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c	•				2	25d	9,113.
.,	26	2022 estimated tax payment					–	26	
If you have a qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	e 15			31			
	32	Add lines 27, 28, 29, and 31				undable credits		32	
	33	Add lines 25d, 26, and 32. T					🗀	33	9,113.
Refund	34	If line 33 is more than line 24						34	3,392.
neiulia	35a	Amount of line 34 you want				•	. 🗆 🖫	35a	3,392.
Direct deposit?	b	Routing number 1 1 1							
See instructions.	d	Account number 4 8 8 1 0 8 9 0 0 6 2 4							
	36	Amount of line 34 you want a	applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24							
rou Owe	38	For details on how to pay, go Estimated tax penalty (see in	_	-		38		37	
Third Party		you want to allow another							
Designee		structions	•				mplete bel	ow.	X No
Ü	De	signee's		Phone			nal identifica	tion	
	naı	me		no.		numb	er (PIN)		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com							
Here									ou an Identity enter it here
Joint return?					SOFTWARE 1	DEVELOPER	(see ins		
See instructions. Keep a copy for	Spouse's signature. If a joint return, both must sign.			Date	Spouse's occupat	ion			our spouse an ion PIN, enter it here
your records.							(see ins		
	Ph	one no. (512) 954-407	1	Email address	LALITA.PRIYADA	RSINI17@GMAIL.CO	M		
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN	C	heck if:
Paid Proparer	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/24/2023	P020827	03 [Self-employed
Preparer Use Only	Fir	m's name GLOBAL TAX	XES LLC				Phone r	10. (67	78)965-9522
	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's E	IN	88-2145487
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/14/23 PRO			Form 1040 (2022)

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

FNU LALITA PRIYADARSINI

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.

Your social security number 744-94-3116

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2 a	
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. Atta		5	-6,651.
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		
ı	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 (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or	04		
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	0-		
•	Total ather income Add lines On through On	8z		
9	Total other income. Add lines 8a through 8z		9	C (F1
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, OF 1040-INK, IINE 8	10	-6,651.

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 government		
	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	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	, , , , ,	24a		
b	Deductible expenses related to income reported on line 8l from the			
		24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	· · · · · · · · · · · · · · · · · · ·	24c		
d	' '	24d	_	
е	Repayment of supplemental unemployment benefits under the Trade			
	F	24e	_	
f		24f	-	
g	• • • • • • • • • • • • • • • • • • • •	24g	-	
h	Attorney fees and court costs for actions involving certain unlawful			
	`	24h	-	
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			
		24i	-	
j		24j	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
		24k	-	
Z	Other adjustments. List type and amount:	0.4		
0-		24z	0.5	
25	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 and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

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,

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

2022
Attachment Sequence No. 13

Your social security number

744-94-3116 FNU LALITA PRIYADARSINI Part I **Income or Loss From Rental Real Estate and Royalties** 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 . 1a Physical address of each property (street, city, state, ZIP code) BIDANASI CUTTACK ORISSA IN 753014 Α 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 Davs** 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: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 450. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,043. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 648. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,318. 14 14 Repairs . . . 15 Supplies 15 1,743. 16 16 Taxes 17 17 1,349. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 7,101. 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 file Form 6198 21 -6,651. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 6,651.) 450. Total of all amounts reported on line 3 for all rental properties 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 23d Total of all amounts reported on line 18 for all properties 7,101. Total of all amounts reported on line 20 for all properties 23e 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 6,651. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

26

-6,651.