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

	1.01.01.00		_				
Submi	ssion Identification Number (SID)						
Taxpaye	r's name	Social securi	ty numl	per			
SRAV	/ANI BATTULA	032-95	-007	1			
Spouse'	s name	Spouse's social security number					
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ent	er year you a	re au	thorizin	a.)		
	whole dollars only on lines 1 through 5.	o. you. you o	0 0.0.		9-/		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1	7	4,4	99.	
2	Total tax		2		9,1	53.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1	1,1	82.	
4	Amount you want refunded to you		4		2,0	29.	
_ 5	Amount you owe		5				
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	l keep a cop	y of y	our ret	urn)		
return (to send for any Agent t paymer authoriz paymer busines taxes to persona	wiledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I ab original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans I my 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 oinitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the formal for formal fo	mitter, or electricejection of the true. U.S. Treasury andicated in the training to debit the authorized each the authorized each the processing oppayment. I fur	onic reransmised ax prepartion. The receiff the eland and the receifther acceiments.	turn origingsion, (b) designate paration so this acrossor of the control of the c	nator the red Final oftwater count (can ater the paymage that	(ERO) eason ancial are for t. This ecel) a han 2 ent of at the	
	nic Funds Withdrawal Consent. yer's PIN: check one box only				٦		
X		e my PINI 5	0 (7 1		s my	
	Signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	t	S IIIy	
	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 me below.						
Your s	ignature ▶ Date ▶						
Spous	e's PIN: check one box only				_		
	I authorize to enter or generat	e my PIN			a	s my	
	ERO firm name		ter five	digits, but	_	oy	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r 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 me below.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue belo	w					
Part	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 er all ze		8 9	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 <i>e-file</i> Providers of	tax return (orig	inal or urn in a	amended accordance	će wi		
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
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OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space.

Filing Status	SX	Single Married filing jointly	Marr	ied filing separately	(MFS))	house	hold (HOH	l) 📙		ifying survi	ving	
Check only one box.	If vo	u checked the MFS box, enter the r	name of	vour spouse. If you	check	ced the HOH o	r OSS	hox ente	r the c	•	ise (QSS) name if the	a gualifying	
0.10 00%	-	on is a child but not your dependen		your opouco. If you	011001		. 400	DOX, OITE		11110	TIGITIO II LII	quamymg	
Your first name	and mi	ddle initial	Last na	ame					Yo	our so	cial security	number	
SRAVANI BA			BATT	rula						032-95-0071			
	pouse's	first name and middle initial	Last na						_			urity number	
,									'			•	
Home address	(numbe	er and street). If you have a P.O. box, see	e instruct	ions.				Apt. no.	Pr	esider	ntial Election	n Campaign	
						Check here if you, or your							
		ce. If you have a foreign address, also co	omplete :	spaces below.	Sta	ate	ZIP c			spouse if filing jointly, want \$3			
IRVING		,	·		T	X	750	to go to this fun				•	
Foreign country	y name			Foreign province/stat	te/coun	ty	-	n postal co		box below will not change your tax or refund.			
				3 1				' '			You	Spouse	
Digital	At ar	ny time during 2022, did you: (a) red	ceive (as	a reward, award, o	or pavi	ment for prope	ertv or	services):	or (b)	sell.			
Assets		ange, gift, or otherwise dispose of	,				•	, .	` '		Yes	X No	
Standard		eone can claim: You as a de				a dependent							
Deduction	_	Spouse itemizes on a separate retu	•										
		Were born before January 2,			pouse		rn hofe	ore Janua	n/2 1	058	☐ Is blir		
Dependent			1930	(2) Social secur		(3) Relationsh			, ,			nstructions):	
_		rst name Last name		number	ity	to you	"P (Child ta		1			
If more than four	(1)							Г	7		<u>Г</u>	7	
dependents,									_				
see instruction and check	s ——												
here	1								_			<u></u>	
	1a	Total amount from Form(s) W-2, b	00x 1 (se	ee instructions)						1a		3,719.	
Income	b	Household employee wages not r	,	,						1b		3 / 1 2 2 .	
Attach Form(s)	c	Tip income not reported on line 1	•	• •						1c			
W-2 here. Also attach Forms	d		,	,						1d			
W-2G and	e	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1e					
1099-R if tax	f							1f					
was withheld.	g	Wages from Form 8919, line 6.		•						1g			
If you did not get a Form	h	Other earned income (see instruction								1h		0.	
W-2, see	i	Nontaxable combat pay election	,			1	ı Ì						
instructions.	z	Add lines 1a through 1h								1z	8	3,719.	
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	t .			2b		<u> </u>	
if required.	3a	Qualified dividends	3a			Ordinary divide				3b			
	4a	IRA distributions	4a		b T	axable amoun	nt			4b			
Standard	5a	Pensions and annuities	5a		b T	axable amoun	nt			5b			
Deduction for-	6a	Social security benefits	6a		b T	axable amoun	nt			6b			
Single or Married filing	С	If you elect to use the lump-sum	election	method, check her					. 🗆				
separately, \$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						. 🗆	7				
Married filing	8	Other income from Schedule 1, lir	ne 10		·					8	_	9,220.	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								9		4,499.	
surviving spouse,	10	Adjustments to income from Sche		•						10		<u> </u>	
\$25,900 • Head of	11	Subtract line 10 from line 9. This i								11	7	4,499.	
household, \$19,400	12	Standard deduction or itemized								12		2,950.	
If you checked	13	Qualified business income deduc-				95-A				13	_		
any box under Standard	14									14	1	2,950.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ro or les	ss, enter -0 This is	s your	taxable incom	ne .			15		1,549.	
200 11011 40110113.													

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 3 4972	3 🗌		16	9,153.
Credits	17	Amount from Schedule 2, lin	ne 3				[17	
	18	Add lines 16 and 17					[18	9,153.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		[19	
	20	Amount from Schedule 3, lin	ne 8				[20	
	21	Add lines 19 and 20					[21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[22	9,153.
	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	9,153.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				25a 11	,182.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	,					25d	11,182.
	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	ne 15			31			
	32	Add lines 27, 28, 29, and 31				indable credits	[32	
	33	Add lines 25d, 26, and 32. T	•	-	-		<u> </u>	33	11,182.
Defined	34	If line 33 is more than line 24						34	2,029.
Refund	35a	Amount of line 34 you want	-				. 🗆 🗄	35a	2,029.
Direct deposit?	b	Routing number 0 4 4				_	Savings		
See instructions.		Account number 8 7 0					J. J.		
	36	Amount of line 34 you want			ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						07	
rou owe	20					1 1		37	
This Death	38	Estimated tax penalty (see in				38			
Third Party Designee		you want to allow another	•		rn with the IRS?		mplete bel	OW/	X No
Designee		signee's		Phone			nal identifica		
		me		no.			er (PIN)		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the IF	≀S ser	nt you an Identity
				I		N, enter it here			
Joint return?					SOFTWARE E		(see ins		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupati	on			nt your spouse an ection PIN, enter it here
your records.						(see ins		Solidit int, citter it here	
	———Ph	one no. (469)315-961	0	Email address	SRAVANT CHOIDH	MARY110@GMAIL.CO	 M		
		eparer's name	Preparer's signat		STUTYTHAT , CHOUDII	Date	PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM	, ,		GUPTA TALLAM		P020827	03	Self-employed
Preparer		m's name GLOBAL TA			COLILI TIMENI	02/03/2023			678)965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816		Firm's E		88-2145487
Go to www.irs.a		n1040 for instructions and the late		2011 111	BAA	REV 01/28/23 PRO	1 3 .		Form 1040 (2022)
						v 0 1/20/20 1 110			(= 0 = 1)

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

SRAVANI BATTULA

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 032-95-0071

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. Atta	ich Schedule E .	5	-9,220.
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			
	, , , , , , , , , , , , , , , , , , ,	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 (2	
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_		
9	Total other income. Add lines 8a through 8z	8z	9	
9 10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR		_	-9 220

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 governr			
	officials. Attach Form 2106	L	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	L	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			25	
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	
	roini 1040 oi 1040-on, iiile 10, oi roini 1040-inn, iiile 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

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

2022
Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 032-95-0071 SRAVANI BATTULA 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 . В If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No 1a Physical address of each property (street, city, state, ZIP code) 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 Days** 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. С C Type of Property:

Income:		Α	В	С
			Properties:	
2 Multi-Family Residence	4 Commercial	6 Royalties	8 Other (describe)	
1 Single Family Residence	3 Vacation/Short-Term Rental	5 Land	7 Self-Rental	

Incom	ne:		Α	В		С
3	Rents received	3	600.			
4	Royalties received	4				
Exper	nses:					
5	Advertising	5				
6	Auto and travel (see instructions)	6				
7	Cleaning and maintenance	7	900.			
8	Commissions	8				
9	Insurance	9				
10	Legal and other professional fees	10				
11	Management fees	11	450.			
12	Mortgage interest paid to banks, etc. (see instructions)	12				
13	Other interest	13				
14	Repairs	14	2,640.			
15	Supplies	15	2,290.			
16	Taxes	16				
17	Utilities	17	3,540.			
18	Depreciation expense or depletion	18				
19	Other (list)	19				
20	Total expenses. Add lines 5 through 19	20	9,820.			
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	-9,220.			
22	Deductible rental real estate loss after limitation, if any,					
	on Form 8582 (see instructions)		, , ,	<u>'</u>)	()
23a	Total of all amounts reported on line 3 for all rental proper			6	00.	
b	Total of all amounts reported on line 4 for all royalty prope					
С	Total of all amounts reported on line 12 for all properties					
d	Total of all amounts reported on line 18 for all properties					
е	Total of all amounts reported on line 20 for all properties					
24	Income. Add positive amounts shown on line 21. Do not		•		24	
25	Losses. Add royalty losses from line 21 and rental real estat				25	(9,220.)
26	Total rental real estate and royalty income or (loss).	Comb	ine lines 24 and 25. E	Enter the result		