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					
Submi	ssion Identification Number (SID)					
Taxpaye	or's name	Social securi	ty numl	per		
IND	RANEEL GAJAVALLI	856-48	-518	1		
Spouse'	s name	Spouse's social security number				
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	r vear vou a	re au	thorizina)	
	whole dollars only on lines 1 through 5.	i your you c		anonzing	•/	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	132	2,896.	
2	Total tax		2		2,623.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	25	5,219.	
4	Amount you want refunded to you		4		2,596.	
5	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our retu	ırn)	
return (to send for any Agent t paymen authori paymen busines taxes t person	oviledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I about original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income for my federal 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 U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recessed as a prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the label dentification number (PIN) below is my signature for the income tax return (original or amended) I a label support to the Mithdray of Consolated the II and Europe the Mithdray of Consolated the II and Europe the Mithdray of Consolated the II and Europe the III and II	nitter, or electronic ection of the to a licated in the to on to debit the ethe ethe authorizates must be processing opayment. I fur	onic reransmismod its of ax prepartion. The receiff the elanger according to the receiff the receiff the according to the according to the receiff the according to the according to the receiff the according to th	turn origina ssion, (b) the designated paration so to this acce To revoke ved no lat ectronic pa eknowledge	ator (ERO) he 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		my PINI 8	5 3	1 8 1	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	asiny	
	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 s	ignature ▶ Date ▶					
Spous	se's PIN: check one box only					
	I authorize to enter or generate	my PIN			as my	
	ERO firm name	-	ter five	digits, but	aomy	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er 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 meth below.					
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	1				
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 4 9 Don't ent	6 6 er all ze	1 9 8	3 9	
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the 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	ax return (orig nitting this ret	inal 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

OMB No. 1545-0074

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

Filing Status Check only one box.		Single Married filing jointly uchecked the MFS box, enter the n	_	ed filing separately your spouse. If you	, ,		household (,	_	spou	fying survi se (QSS) name if the	Ü
	pers	on is a child but not your dependen	t:									
Your first name	and mi	ddle initial	Last nar	me					Yo	ur soc	ial security	/ number
INDRANEE	CL		GAJA	VALLI					85	6-4	8-5181	-
If joint return, s	pouse's	first name and middle initial	Last nar	me					Sp	ouse's	social secu	urity number
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no		Pre	esiden	tial Electio	n Campaign
6255 FRI	SCO	SQUARE, BLVD					2404				ere if you, o	
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete sp	paces below.	Sta	te	ZIP code				t tiling joint this fund. C	ly, want \$3 Checking a
FRISCO					TΣ	Σ	75034			_	w will not o	•
Foreign country	/ name		F	oreign province/stat	e/count	ty	Foreign post	al coc	е уо	ur tax	or refund.	Spouse
 Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward, award,	or payr	nent for prope	rty or servi	es);	or (b)	sell,		
Assets	exch	ange, gift, or otherwise dispose of	a digital a	asset (or a financia	al inter	est in a digital	asset)? (Se	e ins	tructio	ns.)	∐ Yes	⊠ No
Standard Deduction	_	eone can claim:	•			a dependent						
Age/Blindness	You:	Were born before January 2, 1	958	Are blind S	pouse	: Was boi	n before Ja	nuar	y 2, 19	958	☐ Is blir	n d
Dependents	s (see	instructions):		(2) Social secu	rity	(3) Relationsh	ip (4) Che	k the	box if	qualifi	es for (see in	nstructions):
If more	(1) First name Last name			number		to you	Chi	ld tax	credit		Credit for other dependents	
than four]			
dependents, see instructions]			
and check]]
here]]
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .						1a	14	6,578.
	b	Household employee wages not re		()						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							1c	<u> </u>		
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 instruct	,							1h		0.
instructions.	i	Nontaxable combat pay election (see instructions)								4		
	Z	Add lines 1a through 1h								1z	14	6,578.
Attach Sch. B	2 a	'	2a			axable interes				2b		
if required.	<u>3a</u>		3a			ordinary divide				3b		
	4a	_	4a			axable amoun				4b		
Standard Deduction for—	5a	_	5a			axable amoun			٠	5b		
Single or	6a	,	6a			axable amoun	t		Ė	6b	_	
Married filing separately,	_C	If you elect to use the lump-sum e		,	`	,			\vdash	_	4	
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						Ш	7	 	2 600	
Married filing jointly or	8	·	r income from Schedule 1, line 10					٠	8		3,682.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	,	,						9	+ 13	2,896.
\$25,900	10	Adjustments to income from Sche								10	+	0.005
Head of household,	11	Subtract line 10 from line 9. This is	-	-						11		2,896.
\$19,400	12	Standard deduction or itemized								12	$+\frac{1}{}$	2,950.
If you checked any box under	13	Qualified business income deduct							•	13	+	0.050
Standard Deduction,	14	Add lines 12 and 13								14		2,950.
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income							15	1 11	9,946.	

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌		16	22,623.
Credits	17	Amount from Schedule 2, lin	e3				·	17	
	18	Add lines 16 and 17						18	22,623.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	22,623.
	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	22,623.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a	25,219.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	25,219.
If you have a	26	2022 estimated tax payment	s 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	e 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and re	fundable credi	ts	32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	25,219.
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amou	unt you overpa	id	34	2,596.
neiuliu	35a	Amount of line 34 you want	refunded to you	u. If Form 8888	s is attached, che	eck here	🗆	35a	2,596.
Direct deposit?	b	Routing number 0 2 2			c Type:	Checking [Savings		
See instructions.	d	Account number 5 9 5	8 0 0 5	8 9					
	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 For details on how to pay, go						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party Designee		you want to allow another tructions	person to disc	cuss this retu	n with the IRS	? See	. Complete	below.	X No
		signee's		Phone			ersonal iden	tification	
	naı			no.			umber (PIN)		
Sign Here		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							, ,
TICIC	Yo	Prote						tection P	nt you an Identity IN, enter it here
Joint return?		SOFTWARE DEVELOPER .				. '	e inst.)		
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.		ooth must sign.	Ide				nt your spouse an ection PIN, enter it here	
	——Ph	one no. (510)422-718	 6	Email address	TNDRANEFT	369@GMAIL.	COM		
		parer's name	Preparer's signat		-1101CAMUUUL	Date	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM			מווסדם דמו.ו.מו			32703	Self-employed
Preparer		n's name GLOBAL TA		TUIL DAGAIC	COLITY TABLIA	1 02/01/202			678)965-9522
Use Only			Y CT E BRU	INSWICK M.	J 08816			n's EIN	88-2145487
Co to warm inc =				71,D111 CIC IN		DEV 0.12.12.		II O LIIN	Form 1040 (2022)
GO TO WWW.Irs.go	virom	11040 for instructions and the late	st information.		BAA	REV 01/24/23 PF	(U		Form 1040 (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

				<u> </u>
ame	(s) shown on Form 1040, 1040-SR, or 1040-NR	Your so	ocial s	ecurity number
NDF	ANEEL GAJAVALLI	18-51	L81	
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. Attach Schedul		5	-13,682.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss			
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555 8d ()		
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
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)			
n	Section 951(a) inclusion (see instructions)			
0	Section 951A(a) inclusion (see instructions)			
р	Section 461(I) excess business loss adjustment			

8q

8r

8s

8t

8u

8z

For Paperwork Reduction Act Notice, see your tax return instructions.

u Wages earned while incarcerated

9

Other income. List type and amount:

Taxable distributions from an ABLE account (see instructions) . . .

Nontaxable amount of Medicaid waiver payments included on Form

Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

Scholarship and fellowship grants not reported on Form W-2

Total other income. Add lines 8a through 8z

Schedule 1 (Form 1040) 2022

-13,682.

9

10

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.

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.

cs, etc.)	2022							
	Attachment Sequence No. 13							
Your social security number								

IND	RANEEL GAJAVALLI					856-4	8-5181		
Par	Income or Loss From Rental Real Estate ar Note: If you are in the business of renting personal prope rental income or loss from Form 4835 on page 2, line 40.	erty, use Sche		e instru	ctions. If you ar	re an indi	vidual, rep	oort farm	
	Did you make any payments in 2022 that would require you							es 🛛 No	
В	If "Yes," did you or will you file required Form(s) 1099?								
1a	Physical address of each property (street, city, state, ZI	IP code)							
A	VVS NAGAR 1ST LINE, DORNALA PRAKASAM A		VDEGR T	N 52	3331				
B	VVS NAGAR ISI DINE, DORNADA FRARASAN A	NDIIKA FIL	ADESII I	11 72	3331				
1b	Type of Property 2 For each rental real estate property	orty lietod		Ea	ir Rental	Porcor	nal Use	T	
15	(from list below) above, report the number of fair			'	Days		iai ose iys	QJV	
A	personal use days. Check the Q	JV box only	Α		365		0		
В	if you meet the requirements to		В						
С	qualified joint venture. See instri	uctions.	С						
Type	of Property:				1				
1	Single Family Residence 3 Vacation/Short-Term Rer	ntal 5 L	and	7	Self-Rental				
2	Multi-Family Residence 4 Commercial	6 F	Royalties	8	Other (descri	ibe)			
	-				Propertie				
Incor	mo.		Α		В	<i>-</i> 55.		С	
3	Rents received	3		500.	В				
4	Royalties received			,00.					
	nses:	-							
5	Advertising	5							
6	Auto and travel (see instructions)								
7	Cleaning and maintenance		2,2	286.					
8	Commissions		•						
9	Insurance	9							
10	Legal and other professional fees								
11	Management fees	11	1,9	18.					
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		26.					
15	Supplies	15	3,9	52.					
16	Taxes	16							
17	Utilities	17	2,6	500.					
18	Depreciation expense or depletion	18							
19	Other (list)	19	14.6						
20	Total expenses. Add lines 5 through 19	20	14,2	282.					
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	I I	-13,6	82					
22	Deductible rental real estate loss after limitation, if any,								
22	on Form 8582 (see instructions)		13,68	32)	()	()	
23a	Total of all amounts reported on line 3 for all rental proper	,		23a	1	600.	\		
b	Total of all amounts reported on line 4 for all royalty prop			23b					
c	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	14	,282.			
24	Income. Add positive amounts shown on line 21. Do no					. 24			
25	Losses. Add royalty losses from line 21 and rental real esta	ate losses fro	m line 22. I	Enter to	otal losses her	e 25	(13,682.)	
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, IV, and line 40 on page 2 do not					n			
	Schedule 1 (Form 1040), line 5. Otherwise, include this a	amount in the	e total on I	ine 41	on page 2	. 26	1	-13.682	