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

Submiss	sion Identification Number (SID)						
Taxpayer's	s name	Social security number					
VISH	NU KALYAN MYLAVARAPU	105-85-2935					
Spouse's I	name	Spouse's social security number					
Part I	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	vear vou a	are au	thorizina.	.)		
	nole dollars only on lines 1 through 5.	<i>y</i> • • • • • • • • • • • • • • • • • • •	0 0.0.		·/		
	orm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1 A	Adjusted gross income		1	155	,014.		
2 T	otal tax		2	27	,931.		
3 F	ederal income tax withheld from Form(s) W-2 and Form(s) 1099		3	32	,698.		
4 A	Amount you want refunded to you		4	4	,767.		
5 A	Amount you owe		5				
Part II	Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a cop	y of y	our retu	rn)		
to send r for any d Agent to payment authoriza payment, business taxes to personal	iginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit ny return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectles in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indiction 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. I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requive 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 payment of the income tax return (original or amended) I and Europe Withdray I Consent.	ction of the the stated in the authorizests must be processing cayment. I full	ransminand its cax preper entry ation. The receipt of the electron at the raceipt of the electron at the raceipt of the electron at the electr	ssion, (b) the designated coaration soft to this according to revoke (ved no late lectronic packnowledge	ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of that the		
	c Funds Withdrawal Consent.						
	er's PIN: check one box only	DIN 5	2	9 3 5			
×	l authorize GLOBAL TAXES LLC to enter or generate n	ř Er		digits, but	as my		
	signature on the income tax return (original or amended) I am now authorizing.	ac	n't ente	er all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.						
Your sig	nature ▶ Date ▶						
Spouse	's PIN: check one box only						
	I authorize to enter or generate n	nv PIN			as my		
	ERO firm name		iter five	digits, but	a.c,		
	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 no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.						
Spouse'	s signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part III	Certification and Authentication — Practitioner PIN Method Only						
ERO's E	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't en	6 6 ter all z	1 9 8 eros	9		
authorize	hat the above numeric entry is my PIN, which is my signature for the electronic individual income tad to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit ents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Inc.	tting this ret	urn in a	accordance			
ERO's s	ignature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To D	o 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	s 🗙 S	Single Married filing jointly	Marrie	ed filing separately	(MFS)	☐ Head of	household (H	OH)		ifying sun	viving		
one box.	•	u checked the MFS box, enter the notion is a child but not your dependent	•	our spouse. If you	check	ed the HOH or	r QSS box, e	nter the	child's	name if th	ne qualifying		
Your first name and middle initial Last name								Υ	Your social security number				
VISHNU B	KALYA	AN	MYLA	VARAPU				1	105-85-2935				
If joint return, s	pouse's	first name and middle initial	Last nar	me				s	Spouse's social security number				
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.			Apt. no.	P	resider	ntial Election	on Campaign		
14400 42	ND E	PL NE					9207			ere if you,	or your itly, want \$3		
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	te	ZIP code				Checking a		
BELLEVUI					WA		98007			w will not	0		
Foreign country	y name		F	Foreign province/state	e/count	У	Foreign postal	code y	our tax	or refund.	Spouse		
Digital		ny time during 2022, did you: (a) reco	,				•	,	,				
Assets		ange, gift, or otherwise dispose of a		<u>-</u>			asset)? (See	instruct	ions.)	∐ Yes	⊠ No		
Standard Deduction	_	eone can claim:		•		a dependent							
Age/Blindness	You:	Were born before January 2, 1	958	Are blind S	oouse	: Was bo	rn before Jan			☐ Is bl			
Dependents	s (see	instructions):		(2) Social securi	ty	(3) Relationsh	nip (4) Check	the box	if qualif	ies for (see	instructions):		
If more	(1) Fi	rst name Last name		number		to you	Child	tax crec	lit	Credit for other dependent			
than four dependents,								<u>Ш</u>			╛		
see instruction	s ——							<u> </u>			ᆗ		
and check	, —							<u> </u>					
here													
Income	1a	Total amount from Form(s) W-2, b	,	•					1a	16	55,014.		
Attach Form(s)	b						1b						
W-2 here. Also	С.	, , , , , , , , , , , , , , , , , , , ,							1c				
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d				
W-2G and 1099-R if tax	e	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 :	`						1h		0.			
instructions.	i -		see msu	uctions)		<u>1i</u>			- 4-	1 4	55,014.		
Attach Cab D	z 2a	Add lines 1a through 1h Tax-exempt interest	2a		 Ь Т	axable interes			1z 2b	1	JJ, UI I .		
Attach Sch. B if required.	2a 3a	· -	3a			rdinary divide			3b				
	4a		4a			axable amoun			4b				
Standard	5a		5a			axable amoun			5b				
Deduction for—	6a		6a			axable amoun			6b				
Single or Married filing	С	If you elect to use the lump-sum e		method, check her				. 🗆	0.5				
separately,	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here											
\$12,950 Married filing	8	Other income from Schedule 1, lin			•				8	-1	10,000.		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							9		55,014.		
surviving spouse,	10	Adjustments to income from Sche		,					10	1			
\$25,900 • Head of	11	Subtract line 10 from line 9. This is							11	1:	55,014.		
household, \$19,400	12	Standard deduction or itemized	•						12		12,950.		
If you checked	13	Qualified business income deduct	on from	Form 8995 or For	m 899	5-A			13				
any box under Standard	14	Add lines 12 and 13							14		12,950.		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer							15		12,064.		

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	27,931.
Credits	17	Amount from Schedule 2, lir	ne 3						17	
	18	Add lines 16 and 17							18	27,931.
	19	Child tax credit or credit for	other dependent	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	27,931.
	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	27,931.
Payments	25	Federal income tax withheld								
•	а	Form(s) W-2				25a	32,	698.		
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c							25d	32,698.
If you have a	26	2022 estimated tax paymen	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	m Schedule 8812			28				
	29	American opportunity credit	from Form 8863	8, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir	ne 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ındable c	redits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	32,698.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you ove	rpaid		34	4,767.
neruna	35a	Amount of line 34 you want			is attached, che	ck here			35a	4,767.
Direct deposit?	b	Routing number 0 7 3	0 0 0 5	4 5	c Type: 🛛	Checking	g 🗌 Sa	vings		
See instructions.	d	Account number 1 9 6	4 7 6 4	8 2 0 3	3 5					
	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 amo	ount you owe	1					
You Owe		For details on how to pay, g	o to www.irs.gov	//Payments or	see instructions .				37	
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See				_
Designee [*]	ins	structions				🗆	Yes. Con	nplete b	elow.	X No
	De nai	signee's		Phone no.			Person numbe	al identif	cation	
<u> </u>								, ,	4l l	
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com			, , ,			*		, ,
Here		Your signature Date Your occupation								nt you an Identity
	10	ar orginaturo		Buto	Tour occupation					IN, enter it here
Joint return?					DATA ENGI	NEER		(see i	nst.)	
See instructions. Keep a copy for	Sp	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupat	ion				nt your spouse an
your records.								(see i		ection PIN, enter it here
•										
		one no. (515)203-930 eparer's name	Preparer's signat	Email address	VISHNUKALYA	N95@GMA Date		PTIN		Check if:
Paid		•			מווטיים תיחוד איי				702	Self-employed
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPIA TALLAM	02/16/	∠∪∠3 F	02082		
Use Only		m's name GLOBAL TA		NICITAL NO.	T 00016					678)965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816						Firm'	s EIN	84-3171965	

Go to www.irs.gov/Form1040 for instructions and the latest information.

REV 02/05/23 PRO

BAA

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

VISHNU KALYAN MYLAVARAPU

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 105-85-2935

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	ach Schedule E .	5	-10,000.
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		
- 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)	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 (<u>)</u>	
t	Pension or annuity from a nonqualifed deferred compensation plan or	_		
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	10 000
10	Compline lines I through / and 9 Enter here and on Form 1040 1040-SR	or 1040-NB line 8	10	-10.000

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 governing			
	officials. Attach Form 2106	[12	1
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	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			O.F.	
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	
	Form 1040 of 1040-3n, lifte 10, of Form 1040-1nn, lifte 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.

Your social security number

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

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

Attachment Sequence No. **13**

OMB No. 1545-0074

VISH	INU KALYAN MYLAVARAPU						105-85	5-2935	Ď	
Part	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	nd Roya rty, use \$	alties Schedule	C. See	instru	ctions. If you are	e an indiv	vidual, rep	oort farm	
	Did you make any payments in 2022 that would require you f "Yes," did you or will you file required Form(s) 1099?				es ⊠ No es □ No					
1a	Physical address of each property (street, city, state, ZIF			• •					es <u> 140</u>	_
	Trydical address of each property (street, city, state, 211									
A										
В										
C 1b	Type of Property (from list below) 2 For each rental real estate prope above, report the number of fair			Fair Rental Days			Person Da	QJV		
Α	personal use days. Check the Q	JV box	only	Α	365			0		_
В	if you meet the requirements to f		·	В		303				_
С	qualified joint venture. See instru	uctions.		C						_
	of Property:		-			I				_
1	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	ıtal	5 Land 6 Roya	Ities		Self-Rental Other (describ	oe)			
						Propertie				_
ncon	10'			Α		В	3.		С	_
3	Rents received	3			00.					
4	Royalties received	4								_
Exper		1 1								_
5	Advertising	5								
6	Auto and travel (see instructions)	6								_
7	Cleaning and maintenance	7		1,0	00.					_
8	Commissions	8								_
9	Insurance	9								_
10	Legal and other professional fees	10								
11	Management fees	11		8	00.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14		2,8	00.					
15	Supplies	15		2,5	00.					
16	Taxes	16								
17	Utilities	17		3,5	00.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		10,6	00.					
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	_	-10,0	00.					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (-	10,00	0.)	()((
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		600.			
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b					
С	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	10,	600.			
24	Income. Add positive amounts shown on line 21. Do no		-				24			
25	Losses. Add royalty losses from line 21 and rental real estate	te losse	s from lin	ie 22. E	nter to	otal losses here	25	(10,000.	.]
26	Total rental real estate and royalty income or (loss). here. If Parts II, III, IV, and line 40 on page 2 do not Schedule 1 (Form 1040), line 5. Otherwise, include this ar	apply t	o you, a	also en	iter th	is amount on			-10,000) _