## 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.

Submission Identification Number (SID)

Taxpayer	's name	Social securit	y numb	er
ANUP	RIYA BODDULURI	353-27-	-3210	õ
Spouse's	name	Spouse's soc	ial secu	rity number
Part	Tax Return Information – Tax Year Ending December 31,         2022 (Enter	year you a	re aut	horizing.)
Enter w	hole dollars only on lines 1 through 5.			
Note: F	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1.	Adjusted gross income		1	118,476.
2	Total tax		2	19,162.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	21,679.
4	Amount you want refunded to you		4	2,517.
5	Amount you owe		5	
Part I			y of y	our return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

## Taxpayer's PIN: check one box only

X	Lauthorize	GLOBAL TAXES	LLC	to enter or generate my PIN

Ent	er fiv n't er	/e di	_⊥ gits,	but	as my
7	3	2	1	6	

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature 
\_\_\_\_\_B.Anupriya\_\_\_\_

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	mv	PIN	
.0	ontor	01	gonorato	· · · y		l

2/26/23

Date

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature >	Date				 	 	
Practitioner PIN Method Returns Only—contin	ie bel	ow					
Part III Certification and Authentication – Practitioner PIN Method Only	,						
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2	 _	 6 all zero	8	9

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >	Date 🕨								
Dor	See Instructions ss Requested To Do So								
For Deperture Reduction Act Nation	a and your toy return instructions		REV 02/10/22 RBO	Earm 8879 (Pay 01 2021)					

<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	20 <b>22</b>	OMB No. 1545	5-0074	IRS Use Only	∕—Do not w	rite or staple in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly uchecked the MFS box, enter the nation is a child but not your dependent	ame of y		oarately (MFS) e. If you check			ehold (HOH) S box, enter th	spou	lifying surviving use (QSS) name if the qualifying
Your first name	and mi	iddle initial	Last na	me					Your so	cial security number
ANUPRIYA			ворр	ULURI					353-	27-3216
		s first name and middle initial	Last na							s social security number
Homo oddrooo	numbe	er and street). If you have a P.O. box, see	ipotruoti	222				Apt. no.	Durida	
			Instructio	5115.					•	ntial Election Campaigr nere if you, or your
<u>5200 GOR</u>		DRIVE ce. If you have a foreign address, also co	molata s	naces below	v. Sta	to	710	2306 code	1	if filing jointly, want \$3
IRVING	001 0110		mpiete 5					039		this fund. Checking a
Foreign country	namo				ince/state/count			ign postal code	1	ow will not change or refund.
r oreign country	name		'	oreign prov	ince/state/court	, y		ign postal code	, your tus	You Spouse
Digital		ny time during 2022, did you: (a) rece					-			
Assets		ange, gift, or otherwise dispose of a	-			-	asse	u)? (See Instru	actions.)	Yes X No
Standard Deduction		eone can claim:			our spouse as al-status alien					
Age/Blindness	You:	Were born before January 2, 1	958	Are blind	d Spouse	: 🗌 Was bo	rn be	fore January	2, 1958	Is blind
Dependents	(see	instructions):		(2) Soc	ial security	(3) Relationsh	air	(4) Check the b	ox if quali	fies for (see instructions):
If more		irst name Last name			umber	to you		Child tax c	redit	Credit for other dependents
than four										
dependents,										
see instructions and check	,									
here 🗌										
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instructio	ons)				. 1a	128,853.
meome	b	Household employee wages not re	eported	on Form(s)	W-2				. 1b	1
Attach Form(s)	с	Tip income not reported on line 1a	(see ins	structions)					. 1c	
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) V	V-2 (see instru	ictions)			. 1d	
W-2G and	е	Taxable dependent care benefits f	rom For	m 2441, lir	ne 26				. 1e	
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	n Form 883	9, line 29 .				. 1f	
If you did not	g	Wages from Form 8919, line 6 .							. 1g	
get a Form	h	Other earned income (see instructi	ons) .				•		. 1h	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	uctions) .		<b>1</b> i	i			
	z	Add lines 1a through 1h	• • •						. 1z	128,853.
Attach Sch. B	<b>2</b> a	'	2a		b T	axable interes	t		. 2b	·
if required.	3a		3a		<b>b</b> C	ordinary divide	nds		. 3b	
	4a		4a			axable amoun			. 4b	
Standard	5a	Pensions and annuities	5a		b T	axable amoun	nt.		. 5b	
• Single or	6a		6a			axable amoun	ıt.		. 6b	
Married filing separately,	С	If you elect to use the lump-sum el			,	,		[	_	
\$12,950	7	Capital gain or (loss). Attach Schee		required.	If not required	, check here	•	l	7	
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, line							. 8	-10,377.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,			r total incom	ə			. 9	118,476.
surviving spouse, \$25,900	10	Adjustments to income from Sche					•		. 10	
Head of household,	11	Subtract line 10 from line 9. This is	-				·		. 11	
\$19,400 r	12	Standard deduction or itemized					•		. 12	,
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deducti					•		. 13	
Standard Deduction,	14	Add lines 12 and 13					•		. 14	
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0-	. This is your f	taxable incom	ne		. 15	105,526.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)							Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Fo	rm(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	19,162.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	19,162.
	19	Child tax credit or credit for other dependent	ents from Sched	lule 8812			19	
	20	Amount from Schedule 3, line 8					20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero or les	s, enter -0				22	19,162.
	23	Other taxes, including self-employment ta	x, from Schedul	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your total tax					24	19,162.
Payments	25	Federal income tax withheld from:						
	а	Form(s) W-2			<b>25a</b> 21	,679.		
	b	Form(s) 1099			25b		1	
	с	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	21,679.
If	26	2022 estimated tax payments and amount	t applied from 20	021 return			26	
If you have a <sup>I</sup> qualifying child,	27	Earned income credit (EIC)		No	27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 88			28			
	29	American opportunity credit from Form 88	63, line 8		29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15 .			31			
	32	Add lines 27, 28, 29, and 31. These are yo	our total other p	ayments and refu	undable credits		32	
	33	Add lines 25d, 26, and 32. These are your	total payments	•			33	21,679.
Refund	34	If line 33 is more than line 24, subtract line					34	2,517.
neiuliu	35a	Amount of line 34 you want refunded to y	ou. If Form 888	B is attached, cheo	ck here		35a	2,517.
Direct deposit?	b	Routing number 0 2 1 0 0 0	3 2 2	c Type: 🛛 🗙	Checking	Savings		
See instructions.	d	Account number 4 8 3 0 8 2	0 6 2 8	9 0 0		•		
	36	Amount of line 34 you want applied to you	ur 2023 estimat	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the a	mount vou owe					
You Owe		For details on how to pay, go to www.irs.g	gov/Payments or	see instructions.			37	
	38	Estimated tax penalty (see instructions)			38			
Third Party	Do	you want to allow another person to d	iscuss this retu	rn with the IRS?	See			
Designee	ins	tructions			. 🗌 Yes. Co	omplete b	elow.	X No
		signee's	Phone			onal identif	cation	
	na		no.			er (PIN)		
Sign		der penalties of perjury, I declare that I have exam ief, they are true, correct, and complete. Declaratic						
Here		ur signature	Date	Your occupation		1		nt you an Identity
	10		Buio					N, enter it here
Joint return?				SOFTWARE E	ENGINEER	(see i	nst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupati	on			it your spouse an
your records.						(see i	-	ection PIN, enter it here
	Dh	one no. (812)236-2255	Email addraga			`	,	
		pne no. (812)236-2255 parer's name Preparer's sign	Email address	ABODDOLORI	09@GMAIL.CO			Check if:
Paid				GUPTA TALLAM		P02082	702	Self-employed
Preparer		n's name GLOBAL TAXES LLC	I IVILI DAGAK	OULTA TALLAM	02/27/2023			678) 965-9522
Use Only		n's address 245 ROONEY CT E BI	RINSWICK N	J 08816		Firm'		84-3171965
		a1040 for instructions and the latest information	CONCRETENCIÓN IN	0 00010		1,1,111		Earm <b>1040</b> (2022)

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

BAA REV 02/10/23 PRO

Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

## Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074 2

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. <b>01</b>
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
ANUPRIYA BODDU	353-27	-3216	

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. Att	ach Schedule E .	5	-10,377.
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		
I	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		
Ο	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 (		
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	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF	R, or 1040-NR, line 8	10	-10,377.

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

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	e-basi	s gov	ernment		
	officials. Attach Form 2106				12	1
13	Health savings account deduction. Attach Form 8889				13	1
14	Moving expenses for members of the Armed Forces. Attach Form 3903				14	1
15	Deductible part of self-employment tax. Attach Schedule SE				15	1
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)	24a				
b	Deductible expenses related to income reported on line 8I from the					
	rental of personal property engaged in for profit	24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					
	and USOC prize money reported on line 8m	24c				
d	Reforestation amortization and expenses	24d				
е	Repayment of supplemental unemployment benefits under the Trade					
	Act of 1974	24e			_	
f	Contributions to section 501(c)(18)(D) pension plans	24f				
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)	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					
	tax law violations	24i			_	
j	Housing deduction from Form 2555	24j			_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
	1041)	24k				
Z	Other adjustments. List type and amount:					
		24z				
25	Total other adjustments. Add lines 24a through 24z				25	
26	Add lines 11 through 23 and 25. These are your adjustments to income	e. Ente	er here	e and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA	REV	02/10/23 F	RO	Schedu	ile 1 (Form 1040) 2022

SCHEDULE E (Form 1040)		Supplemental Income and Loss (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)									OMB No. 1545-0074	
Departm	nent of the Treasury Revenue Service									20 <b>22</b> Attachment Sequence No. <b>13</b>		
Name(s) shown on return									Your soci	ial security		
ANUPRIYA BODDULURI									353-2	7-3216		
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												
	Note: If yo	ou are in th	he business of rent	ing personal proper	ty, use	Schedule	<b>c</b> . See	instru	ctions. If you a	re an indi	vidual, rep	ort farm
<b>A</b> [				on page 2, line 40.	to filo	Form(o) 1	0002 0	Soo inc				
	Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions											is ∧ No is ∏ No
											. 🗆 16	
1a	Physical address of each property (street, city, state, ZIP code)											
Α	19-10 -7 SHIVALAYAM STREET PONNUR, GUNTUR ANDHRA PRADESH IN 522124											
B												
С												
1b	Type of Property 2 For each rental real estate property list						Fair Rental			Personal Use		QJV
	(from list below) above, report the number of fair renta personal use days. Check the QJV be						Days			Days		
	3 personal use days. Check the QJV if you meet the requirements to file						<b>N</b> 505				0	
B C		ctions		B								
	of Property:						C					
•••	Single Family R	locidonoo	2 Vacation	n/Short-Term Ren	tal	5 Land	I	7	Self-Rental			
	Multi-Family Re		4 Comme		lai	6 Roya	-	-	Other (descr	ihe)		
		Slucifico				U HOye		0				
							Properties:			es:		
Incom							A		В			С
3					3		6	79.				
4		ivea			4							
Exper					-							
5	•				5							
6 7					6 7		2 0	54.				
8	Cleaning and maintenance						2,0	54.				
9					8							
10	Insurance         9           Legal and other professional fees											
11	Management fees						2.3	36.				
12	-		to banks, etc. (s		11							
13	Other interest	•			13							
14	Repairs				14		2,5	65.				
15	Supplies .				15			94.				
16	Taxes				16							
17	Utilities				17		2,2	07.				
18	Depreciation e	expense o	or depletion		18							
19	Other (list)				19							
20	Total expense	s. Add lin	es 5 through 19		20		11,0	56.				
21				or 4 (royalties). If								
				d out if you must			10 0					
	file Form 6198				21	-	-10,3	//.				
22				limitation, if any,		,	10 25	\	1	```	1	`
00-	on Form 8582 (see instructions)			22		10,37		679		(	)	
23a		nounts reported on line 3 for all rental properties nounts reported on line 4 for all royalty properties						23a		679.	-	
b		-						23b 23c				
c d		It of all amounts reported on line 12 for all properties It of all amounts reported on line 18 for all properties						23C				
u e		I amounts reported on line 20 for all properties						23u 23e	11	,056.		
24	<b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include							200				
2 <del>4</del> 25		-				-		nter to			(	10,377.)
26	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here <b>25</b> ( 10, 377. <b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result											_ , , , , , , ,
20	here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on											
				ise, include this ar						. 26		-10,377.
For Pa				arate instructions.		NE			-10,377	-		orm 1040) 2022

Schedule E (Form 1040) 2022