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

Submission Identification Number (SID)						
Taxpayer's name	Social secu	ocial security number				
SAI KIRAN BOJEDLA	746-27-2977					
Spouse's name	Spouse's se		-			
LAKSHMI SRUTHI CHAVA		6-4503				
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Enter	r year you	are aut	norizing.))		
Enter whole dollars only on lines 1 through 5.						
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1 . 1	150	400		
1 Adjusted gross income		1		408.		
 Total tax		3		,686.		
4 Amount you want refunded to you		4		,021.		
5 Amount you owe		5		,335.		
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a co		our retui	m)		
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended						
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Lagent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account incompayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institut authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recompanies business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I applied to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I applied to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I applied to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I applied to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I applied to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I applied to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I applied to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I applied to the personal identification number (PIN) applied to the personal identification number (PIN) applied to the personal identification number (PIN) applied to the persona	J.S. Treasury dicated in the ion to debit the the authoriquests must be processing payment. I full the design of the control o	and its de tax prepare entry to ization. To be received of the electrical and the receiver ther acknowledges and its description.	esignated la ration soft of this accoording the coordinate of the	Financial tware for unt. This cancel) a r than 2 yment of that the		
Electronic Funds Withdrawal Consent.	Г					
Taxpayer's PIN: check one box only		7 2 9	7 7			
X I authorize GLOBAL TAXES LLC to enter or generate	· E	Inter five o		as my		
signature on the income tax return (original or amended) I am now authorizing.	C	don't enter	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 methodow.						
Your signature ► B A Date ►	03-09	9-202	3			
Spouse's PIN: check one box only	Г					
X I authorize GLOBAL TAXES LLC to enter or generate		6 4 5 Enter five o		as my		
signature on the income tax return (original or amended) I am now authorizing.		don't enter				
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 metibelow. Spouse's signature ▶ Date ▶						
Spouse's signature ▶ Date ▶	00	2 00 2	ഹാ			
Practitioner PIN Method Returns Only—continue below		<u>3-09-2</u>	023			
Part III Certification and Authentication — Practitioner PIN Method Only						
	T_{-}					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2		6 6	1 9 8	9		
	Don't e	nter all zer	os			
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subrrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of	mitting this re	eturn in a	ccordance			
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

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	(MFS)	Head of	hous	ehold (HOH	l)		ifying survi	ving	
Check only	lf vo	u checked the MFS box, enter the r	omo of	vour angues If you	ah a ak	ad tha HOH as	- OC	Chay anto	r tha a		ise (QSS)	a audifiina	
one box.		on is a child but not your dependen		your spouse. If you	SHECK	ed the HOH of	I QS	5 DOX, ente	. trie C	Tillu S	name ii iiie	qualifying	
Your first name		· · · · · · · · · · · · · · · · · · ·	Last na	ime					Yo	ur soc	cial security	number	
SAI KIRAN BOJED										746-27-2977			
		first name and middle initial	Last na						-	Spouse's social security numbe			
LAKSHMI			CHAV							,			
		r and street). If you have a P.O. box, see						Apt. no.	_		3-06-4503 sidential Election Campaign		
	,		5 IIISII UCII	0113.				Apt. 110.	- 1		ere if you, o		
		CREST DRIV ce. If you have a foreign address, also co	omploto c	racos holow	Stat	÷0	710	code		spouse if filing jointly, v			
-		ce. If you have a foreight address, also of	ompiete s	spaces below.	NJ			tog		o go to this fund. Checking a			
PLAINSBO Foreign country				Foreign province/state			+	20.		oox below will not change our tax or refund.		change	
Foreign country	riame			Foreign province/state	Count	у	FOIE	oreign postal code yo		ui tax	You	Spouse	
Distribut	۸+ on	w time during 2022, did your (a) res	noivo (oo	a roward award a	r nov (n	ant for prope	urtu o	r con (icco):					
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of									Yes	X No	
		eone can claim: You as a de		<u></u>			4330	i): (OCC III)	HIGGE	7113.)			
Standard Deduction		Spouse itemizes on a separate retu	•			а перепаетт							
Age/Blindness	You:	☐ Were born before January 2, 1	1958 [Are blind Sp	ouse:	☐ Was bo	rn be	fore Janua	ry 2, 19	958	☐ Is blir	nd	
Dependents	s (see	instructions):		(2) Social securit	y	(3) Relationsh	nip	(4) Check the	e box if	qualifi	es for (see in	nstructions):	
If more	•	rst name Last name		number	, I	to you	·	Child ta	x credit	t (Credit for othe	er dependents	
than four]]	
dependents,													
see instructions and check	s ——]				
here]				
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions) .						1a	18	6,754.	
Income	b	Household employee wages not r	eported	on Form(s) W-2 .						1b			
Attach Form(s)	С	Tip income not reported on line 1	•	. ,						1c			
W-2 here. Also attach Forms	d	Medicaid waiver payments not re	nts not reported on Form(s) W-2 (see instructions)						1d				
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26							1e				
1099-R if tax was withheld.	f	Employer-provided adoption bene	efits fron	n Form 8839, line 29	9.					1f			
If you did not	g	Wages from Form 8919, line 6.								1g			
get a Form	h	Other earned income (see instruct	tions)							1h		0.	
W-2, see	i	Nontaxable combat pay election (election (see instructions)										
instructions.	z	Add lines 1a through 1h								1z	18	6,754.	
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interes	t			2b	1		
if required.	За	Qualified dividends	За			rdinary divide				3b			
	4a	IRA distributions	4a			axable amoun				4b			
Standard	5a	Pensions and annuities	5a			axable amoun				5b			
Deduction for—	6a	Social security benefits	6a			axable amoun				6b	1		
Single or Married filing	С	If you elect to use the lump-sum e		method, check here									
separately,	7	Capital gain or (loss). Attach Sche		· ·	•	,			\Box	7	1		
\$12,950 Married filing	8	Other income from Schedule 1, lir							_	8	_1	3,346.	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								9		3,408.	
surviving spouse,	10	Adjustments to income from Sche					Ċ		·	10	1 7	<u> </u>	
\$25,900 • Head of	11	Subtract line 10 from line 9. This i	-							11	17	3,408.	
household,	12	Standard deduction or itemized	•							12		5,400. 5,900.	
\$19,400 If you checked	13	Qualified business income deduction		•	,	 5-А	•			13	+	<u> </u>	
any box under	14	Add lines 12 and 13								14	2	5,900.	
Standard Deduction,	15	Subtract line 14 from line 11. If ze					ne		•	15		7,508.	
see instructions.	.0	Sasace into 14 nom into 11. Il 26		o, o.n.o. o . 11110 15	, our t				•	-13	14	,,,,,,,,,	

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	ı(s): 1 881	4 2 🗌 4972	3 🗌		16	23,686.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	23,686.
	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	23,686.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is						24	23,686.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				25a 26	5,021		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c	,					25d	26,021.
16	26	2022 estimated tax paymen	ts and amount a	pplied from 20	021 return			26	,
If you have a qualifying child,	27	Earned income credit (EIC)			No .	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, lir				31			
	32	Add lines 27, 28, 29, and 31						32	
	33	Add lines 25d, 26, and 32. T	•	-	-			33	26,021.
Defend	34	If line 33 is more than line 24						34	2,335.
Refund	35a	Amount of line 34 you want	•				\square	35a	2,335.
Direct deposit?	b	Routing number 0 8 1					Savings		
See instructions.		Account number 3 5 5 0 0 6 7 1 8 3 9 7							
	36	Amount of line 34 you want				36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g	. This is the amo	ount you owe.				37	
	38	Estimated tax penalty (see in	_			38		37	
Third Party		you want to allow another							
Designee		structions					omplete	below.	X No
· ·		signee's me		Phone no.			onal iden ber (PIN)	tification	
Cian		der penalties of perjury, I declare	hat I have examine		d accompanying sche		. ,	to the hes	st of my knowledge an
Sign		lief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the	ne IRS se	nt you an Identity
								IN, enter it here	
Joint return?					SOFTWARE E		`	e inst.)	
See instructions. Keep a copy for	Sp	Spouse's signature. If a joint return, both must signature.		Date Spouse's occupation					nt your spouse an ection PIN, enter it her
your records.					SOFTWARE	I	e inst.)		
	——Ph	one no. (816)682-134	5	Email address	BSK.BOJEDL	A @ GMATT CO)M		
		eparer's name	Preparer's signat			Date	PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/09/2023	P020	32703	Self-employed
Preparer		m's name GLOBAL TA				1			678)965-9522
Use Only							Firm's FIN 84_3171965		

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

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

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security numbe
SAI KIRAN BOJEDLA & LAKSHMI SRUTHI CHAVA	746-27-2977
B LL MILES III	

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	ch Schedule E .	5	-13,346.
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			
	, , , , , , , , , , , , , , , , , , ,	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 (
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u		8u		
Z				
_		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-SR,	or 1040-NR, line 8	10	-13,346.

Schedule 1 (Form 1040) 2022 Page **2**

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-	-basis governmen	t 🗆	
	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			
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			
		24e	_	
f		24f	_	
g	• • • • • • • • • • • • • • • • • • • •	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
	` <i>'</i>	2411		
٠	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		
		24j		
, k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	2-1)		
		24k		
z	Other adjustments. List type and amount:	2110		
_	2	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 .			
	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.

Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name(s)	shown on return					,	Your socia	al security	number
SAI	KIRAN BOJEDLA & LAKSHMI SRUTHI CHAVA						746-2	7-2977	
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.			C . See	instru	ctions. If you are	e an indiv	vidual, rep	ort farm
Α	Did you make any payments in 2022 that would require you	to file	Form(s) 1	1099? S	See ins	structions		. Y e	s 🛛 No
	"Yes," did you or will you file required Form(s) 1099? .								
1a	Physical address of each property (street, city, state, ZIF								
								F0720	
_ <u>A</u>	G-06 SAI SRINIVASAM APTS SUNDARAIAH NA	AGAR	MADHIF	KA, KHZ	AMMA	M, TELANGAI	NA IN	50/20.	3
B_									
	Type of Property 2 For each rental real estate prope				Fa	ir Rental	Person		QJV
	(from list below) above, report the number of fair personal use days. Check the Qu			_		Days	Da		
A	if you meet the requirements to f			Α		365		0	
B	qualified joint venture. See instru			В					
C				С					
	of Property:				_				
	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya		-	Self-Rental Other (descri	be)		
						Propertie	s:		
Incom	e:			Α		В			С
3	Rents received	3		7	11.				
4	Royalties received	4							
Exper	ses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		2,9	97.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		2,8	01.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		2,7	79.				
15	Supplies	15		2,6	39.				
16	Taxes	16							
17	Utilities	17		2,8	41.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		14,0	57.				
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	-	-13 , 3	46.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(13,34	6.)	()	()
23a	Total of all amounts reported on line 3 for all rental prope				23a		711.		
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	14,	057.		
24	Income. Add positive amounts shown on line 21. Do no		-				24		
25	Losses. Add royalty losses from line 21 and rental real estat							(13,346.)
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								-13,346.