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

Submis	ssion Identification Number (SID)		-			
Taxpaye	r's name	Social securit	ocial security number			
SREE	KAVYA VATTIKUTI	709-96-	709-96-4420			
Spouse's name Spouse's				urity numb	er	
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you a	re au	thorizing	g.)	
Enter v	whole dollars only on lines 1 through 5.	, ,				
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			ı		
	Adjusted gross income		1		2,311.	
	Total tax		2		8,680.	
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		3,640.	
	Amount you want refunded to you		5		4 , 960.	
Part		eep a cop	_	our ret	urn)	
return (or to send for any Agent to payment authorize payment business taxes to personal	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming 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 indicated in the function of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate att, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised adays prior to the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (PIN) below is my signature for the income tax return (original or amended) I are finite funds Withdrawal Consent.	tter, or electroction of the transcript of transcript of the transcript of transcript of the transcript of the transcript of transcript of transcript of the transcript of transcript	onic refansmished its of ax prepentry attion. The receive the element of the elem	turn origin ssion, (b) designated paration so this according to this according to the control of	ator (ERO) the reason d Financial oftware for count. This (cancel) a ter than 2 payment of ge that the	
					1	
Тахра	yer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate it	my DINI 6	4 4	4 2 0	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent		digits, but er all zeros	asiny	
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN methology.					
Your si	ignature ▶ Date ▶					
Snous	e's PIN: check one box only				_	
	I authorize to enter or generate	my PIN			as my	
ERO firm name				inter five digits, but		
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN and your return is filed using the Practitioner PIN methology.					
Spouse	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part I	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	2 4 9 Don't ente	6 6	-	8 9	
		Don't ente	ar dii Ze	103		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ted 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 e-file Providers of Incompany to the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Incompany to the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Incompany to the Practition Publication Publi	itting this retu	rn in a	accordand		
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To D	o So				

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-007

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

Filing Status	X S	Single Married filing jointly	Marrie	ed filing separatel	y (MFS)	☐ Head of	household (HOH)		lifying s		ng
Check only one box.	-	u checked the MFS box, enter the n	-	our spouse. If yo	u check	ed the HOH or	QSS box, enter t		use (QS name if	,	_l ualifying
		on is a child but not your dependen	1					1,,			
Your first name		ddle initial	Last na						Your social security number		
				IKUTI				709-96-4420			
If joint return, s	pouse's	first name and middle initial	Last nai	ne				Spouse's social security number			y number
Home address	(numbe	er and street). If you have a P.O. box, see	e instruction	ons.			Apt. no.	Preside	ntial Elec	ction (Campaign
8625 HI	CKORY	/ ST					1317	1	nere if yo		•
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete s _l	oaces below.	Sta	ite	ZIP code		0,		want \$3
FRISCO				TX			75034		o go to this fund. Checking a box below will not change		
Foreign country	y name		F	oreign province/sta	Foreign postal code	your tax	ax or refund.				
District	Λ+ o.r	ovitimo durina 2000 did vovi (a) raa	voivo (oo	a roward award	0 11 10 01 11	mant for nron					Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a	•				,.	. ,	☐ Ye	s 🔀	S No
Standard		eone can claim:		<u>-</u> _		a dependent	, ,	,			
Deduction		Spouse itemizes on a separate retu	•	•		•					
Age/Blindness	You:	☐ Were born before January 2, 1	1958	Are blind	Spouse	: Was bor	n before January	2, 1958	☐ Is	blind	
Dependent	s (see	instructions):		(2) Social secu	ırity	(3) Relationsh	ip (4) Check the b	oox if quali	fies for (s	ee inst	ructions):
If more	(1) First name Last name					to you	Child tax of	credit	Credit for	other o	dependents
than four											
dependents, see instruction	<u> </u>										
and check	5 —										
here]										
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .				. 1a		81,	,923.
	b	Household employee wages not r	•	. ,				. 1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)									
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26									
was withheld.	f	Employer-provided adoption bene	ployer-provided adoption benefits from Form 8839, line 29								
If you did not	g	Wages from Form 8919, line 6 .						. 1g			
get a Form W-2, see	h	Other earned income (see instruct	tions) .					. 1h			0.
instructions.	i	Iontaxable combat pay election (see instructions)									
	Z	Add lines 1a through 1h	·					. 1z		<u>81,</u>	, 923.
Attach Sch. B	2a	Tax-exempt interest	2a			axable interes		. 2b			
if required.	3a	Qualified dividends	3a		b C	Ordinary divide	nds	. 3b	1		
	4a	IRA distributions	4a			axable amoun					
Standard Deduction for—	5a		5a			axable amoun		. 5b			
Single or	6a	,	6a			axable amoun	t	. 6b			
Married filing separately,	С	If you elect to use the lump-sum election method, check here (see instructions)									
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here									
 Married filing jointly or 	8	Other income from Schedule 1, lir									<u>,612.</u>
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								_'/2,	<u>,311.</u>
\$25,900	10	Adjustments to income from Schedule 1, line 26									
Head of household,	11	Subtract line 10 from line 9. This is your adjusted gross income									,311.
\$19,400	12	Standard deduction or itemized		•	,			. 12		_12,	<u>,950.</u>
If you checked any box under	13	Qualified business income deduct						. 13			
Standard Deduction,	14										<u>,950.</u>
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								59,	,361.

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	8,680.
Credits	17	Amount from Schedule 2, lin	ne 3					. 17	
	18	Add lines 16 and 17						. 18	8,680.
	19	Child tax credit or credit for	other dependent	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	8,680.
	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	8,680.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a	13,64	0.	
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						. 25d	13,640.
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	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	. 32						
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				. 33	13,640.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amoun	nt you overpa	id .	. 34	4,960.
Horana	35a	Amount of line 34 you want			is attached, chec	ck here	[35a	4,960.
Direct deposit?	b	Routing number 0 7 4			c Type:	Checking	Saving	gs	
See instructions.	d	Account number 3 6 5	9 2 3 5	1 2					
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						. 37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party Designee		you want to allow another	person to disc	cuss this retu	rn with the IRS?		Comple	te below	X No
Designee		nstructions							Z NO
		name no. reisonal identification number (PIN)							
Sign		der penalties of perjury, I declare tief, they are true, correct, and com							
Here	Yo	Your signature		Date					nt you an Identity PIN, enter it here
Joint return?				SOFTWARE ENGINEER				see inst.)	
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.		Date	ld ld				nt your spouse an ection PIN, enter it here	
	Phone no. (317) 699-3338 Email address SREEKAVYA.VATTIKUTI@GMAIL.COM								
Daid	Pre	eparer's name	Preparer's signat	ure	·	Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/13/202	23 P02	082703	Self-employed
Preparer							(678) 965-9522		
Use Only							irm'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

Your social security number

Department of the Treasury Internal Revenue Service

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.

SREE	KAVYA VATTIKUTI		709-96-44	20
Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	Alimony received			
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C			
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule	E . 5	-9,612.
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			
	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		
	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 (
+	Pension or annuity from a nonqualifed deferred compensation plan or	03 (
	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	

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

-9,612.

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

Par	II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b			
	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		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	, ,, ,, , , , , , , , , , , , , , , ,	4a		
b	Deductible expenses related to income reported on line 8l from the			
		4b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	·	4c		
d		4d		
е	Repayment of supplemental unemployment benefits under the Trade			
		4e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	4g		
h	Attorney fees and court costs for actions involving certain unlawful			
	,	4h		
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			
		24i	_	
J		24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	41-		
_	,	4k	_	
Z	Other adjustments. List type and amount:	4z		
25			05	
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 . E		26	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u> </u>		

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

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

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

Sequence No. 13

Your social security number

OMB No. 1545-0074

SREE KAVYA VATTIKUTI 709-96-4420 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 1a Physical address of each property (street, city, state, ZIP code) AR INFRA GREEN VALLEY KONDAPUR, HYDERABAD TELANGANA IN 500084 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 Davs** 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: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 632. 4 Royalties received . 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 2,625. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 1,589. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 1,718. 14 14 Repairs 2,478. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,834. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 10,244. Total expenses. Add lines 5 through 19 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 -9,612. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 9,612.) 632. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 10,244. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 9,612. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 . -9,612.