Form 8879
(Rev. January 2021)
Depertment of the Treesury

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpay	er's name	Social secu	rity numb	ber
PRA	THYUSHA KANUKUNTLA	662-75	7-664	5
Spouse	o's name	Spouse's social security number		
Par	t I Tax Return Information — Tax Year Ending December 31, 2022 (Enter	r year you	are au	thorizing.)
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	Adjusted gross income		1	66,561.
2	Total tax		2	7,415.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12,020.
4	Amount you want refunded to you		4	4,605.
5			5	

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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

GLOBAL TAXES	LLC	to enter or generate my PIN

7	6	6	4	5	
Ent don	as my				

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

Date 🕨

Spouse's PIN: check one box only

I authorize

X I authorize

to enter or generate my PIN	to	enter	or	generate	my	PIN
-----------------------------	----	-------	----	----------	----	-----

Enter five digits, but don't enter all zeros

as mv

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—continue below				
Part III Certification and Authentication – Prac	titioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by you	r five-digit self-selected PIN. 2 2 2 4 9 6 3 1 9 8 9 Don't enter all zeros			

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 🕨	
Don't S			
For Denomical's Deduction Act Nation on	a vary tay values instructions		Earm 8879 (Boy, 01 2021)

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

1040		artment of the Treasury–Internal Revenue Servi S. Individual Income Tax		urn 20	22	OMB No. 1545	-0074	IRS Use Only	—Do not w	vrite or staple	in this space.
Filing Status Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Question Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child person is a child but not your dependent: HARISH REDDY KANDALA								spo	use (QSS)	•	
Your first name	•	, ,	Last nar		ANDAD	7			Your so	cial securi	tv number
PRATHYUS				KUNTLA						77-664	-
		s first name and middle initial	Last nar								curity number
n jonn rotann, op			Laot na							41-908	-
Home address (numbe	er and street). If you have a P.O. box, see	instructio	ns			4	Apt. no.			2 on Campaigr
			inoti dotic	5110.				.pt. 110.		here if you,	
<u>3879</u> SUN		ce. If you have a foreign address, also co	molete si	naces below	Sta	ate	ZIP c	ode			ntly, want \$3
WESTFIEL			inpiete of	Saces below.	II		460				Checking a
Foreign country			F	Foreign province/st				gn postal code		low will not x or refund.	·
										You	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a								Yes	X No
Standard	Som	eone can claim: 🗌 You as a de	pendent	: 🗌 Your sp	ouse as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-sta	tus alier	1					
Age/Blindness	You:	Were born before January 2, 1	958 🗌	Are blind	Spouse	: 🗌 Was bor	n befo	ore January 2	2, 1958	🗌 ls bl	ind
Dependents	s (see	instructions):		(2) Social sec	urity	(3) Relationsh	ip (4	 Check the b 	ox if quali	fies for (see	instructions):
If more	(1) F	irst name Last name		number		to you		Child tax c	redit	Credit for ot	her 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	ı '	75,510.
	b	Household employee wages not re	•	.,					. 1b)	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions) .					. 10	;	
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) W-2 (s	ee instru	uctions)			. 1d	1	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom For	m 2441, line 26					. 1e	•	
was withheld.	f	Employer-provided adoption bene	fits from	ı Form 8839, line	29 .				. 1f		
lf you did not	g	Wages from Form 8919, line 6 .							. 1g	1	
get a Form W-2, see	h	Other earned income (see instruct	ions) .				· ·		. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		<u>1</u> i					
	<u>z</u>	-	·						. 1z	:	75,510.
Attach Sch. B	2a		2a			axable interest					351.
if required.	3a		3a			Ordinary divide				_	
	4a		4a			axable amoun				_	
Standard Deduction for—	5a		5a			axable amoun			. 5b	_	
Single or	6a		6a			axable amoun	t	· · ·	. 6b	•	
Married filing separately,	c	If you elect to use the lump-sum e					• •	L			
\$12,950	7	Capital gain or (loss). Attach Sche		•			• •	L			
 Married filing jointly or 	8	Other income from Schedule 1, lin							. 8		<u>-9,300.</u>
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-					. 9		66,561.
\$25,900	10	Adjustments to income from Sche					• •		. 10		
Head of household,	11	Subtract line 10 from line 9. This is	•				• •		. 11		<u>56,561.</u>
\$19,400 r	12	Standard deduction or itemized					• •		. 12		12,950.
 If you checked any box under 	13	Qualified business income deduct					• •		. 13		10 050
Standard Deduction,	14	Add lines 12 and 13							. 14		<u>12,950.</u>
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -U I NIS	is your	laxable incom	е.		. 15		53,611.

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

Form 1040 (2022)

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	7,	,415.
Credits	17	Amount from Schedule 2, lin	ie3					17		
	18	Add lines 16 and 17						18	7,	,415.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	ie8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	7	,415.
	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	7	,415.
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				25a 12	2,020.			
	b	Form(s) 1099				25b		1		
	с	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	12	,020.
15	26	2022 estimated tax payment	ts and amount a	pplied from 20	021 return .			26		
If you have a l qualifying child,	27	Earned income credit (EIC)				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		1		
	32	Add lines 27, 28, 29, and 31				undable credits		32		
	33	Add lines 25d, 26, and 32. T	,					33	12	,020.
Defund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amou	int you overpaid		34		,605.
Refund	35a	Amount of line 34 you want	,			, .		35a	4	,605.
Direct deposit?	b	Routing number 1 1 1	0 0 0 6	1 4			Savings			
See instructions.	d	Account number 7 9 3					0			
	36	Amount of line 34 you want a			ed tax	36				
Amount	37	Subtract line 33 from line 24								
You Owe	07	For details on how to pay, g						37		
	38	Estimated tax penalty (see in	-			38		•.		
Third Party		you want to allow another								
Designee		tructions	•				omplete l	selow.	X No	
J	De	signee's		Phone			onal identi	fication		
	nai	ne		no.		num	ber (PIN)			
Sign		der penalties of perjury, I declare t			1 2 0		,			0
Here		ief, they are true, correct, and com	plete. Declaration of			ased on all informati	1			
	Yo	ur signature		Date	Your occupation				nt you an Ide IN, enter it he	
Joint return?					SOFTWARE	DEVELOPER		inst.)		
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat		If the	e IRS ser	nt your spous	e an
Keep a copy for	- 1-	, , , , , , , , , , , , , , , , , , ,	5				Iden	tity Prote	ection PIN, er	
your records.							(see	inst.)		
		one no. (903)423-861		Email address	PRATHYUSHARE	DDY104@GMAIL.C				
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	1 04/11/2023	P0208	2703	Self-en	nployed
Use Only	Fir	m's name GLOBAL TA	XES LLC				Pho	ne no. (678)965	-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm	's EIN	84-31	71965
Go to www.irs.ge	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/22/23 PRO			Form 1 (040 (2022)

SCHE	DULE	1
(Form	1040)	

Department of the Treasury

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Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

04

Attachment

Internal Revenue Service	-		Sequence No. UI
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soci	ial security number
PRATHYUSHA KAN	UKUNTLA	662-77	-6645
I IUIIIII ODIIII IUII	01001011111	002 //	0019

1	Taxable refunds, credits, or offsets of state and local income taxes			
0			1	
2a	Alimony received		2 a	
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	-9,300.
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		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-SR		10	-9,300.

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-basis government		
	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	Jury duty pay (see instructions)		
b			
	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)	_	
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	_	
j	Housing deduction from Form 2555 . . . 24j	_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)	_	
Z	Other adjustments. List type and amount:		
05	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 . Enter here and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	
	BAA REV 03/22/23 PRO	Schedule 1 (Form 1040)	2022

(Form 1040)		(Fr	om r	ental real es	tate, royalties	, partnersł	nips, S	corporat	ions, es	states,	trusts, REMI	Cs, e	etc.)	90		2	
Departm											Attachment						
Internal Revenue Service Go to www.irs.gov/ScheduleE for						rinstru	uctions an	d the la	atest ir	formation.		!	Sequen				
Name(s) shown on return												ial security number					
PRATHYUSHA KANUKUNTLA 662-77-6645																	
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.																
			y payments in 2022 that would require you to file Form(s) 1099? See instructions														
		Yes," did you or will you file required Form(s) 1099?															
1a	Physical address of each property (street, city, state, ZIP code) MANASA NAGAR SURYAPET TELANGANA IN 508213																
 	MANASA NA	GAR	. 50	RIAPEI I	LIANGANA	IN 300	0413										
<u>с</u>																	
 1b	Type of Prope	rtu	2	Ear agab r	ental real est	ata propo	ret v licet	tod		Ea	ir Dontol	De	roop				
10	(from list below		2		ort the numb					Fair Rental Days			Personal Use Days		QJV		
Α	3	<i>.</i>		personal use days. Check the Quif you meet the requirements to find qualified joint venture. See instru		JV box only		Α	365				0				
В									В						[
С				quaimed jo	bint venture.	See instru	CLIONS	5.	С								
Туре	of Property:																
	Single Family R			e 3 Vac	ation/Short-	Term Ren	tal	5 Land	1		Self-Rental						
2	Multi-Family Re	side	ence	4 Cor	nmercial			6 Roya	alties	8	Other (desc	ribe)					
											Propert	ies:					
Incom	ne:								Α		В				С		
3	Rents received	. k					3		7	00.							
4	Royalties rece						4										
Exper																	
5	Advertising						5										
6	Auto and trave	el (se	e ins	structions)			6										
7	Cleaning and r	maintenance							1,2	00.							
8	Commissions	ons															
9	Insurance .						9										
10	-	gal and other professional fees															
11	-	Management fees							1,000.								
12	Mortgage inter		•			,	12 13										
13		ner interest							0 1	0.0							
14							14 15	2,120. 2,660.									
15 16	Supplies								2,0	60.							
17									3 0	20.							
18		n expense or depletion							5,0	20.							
19	Other (list)	•		·			18 19										
20	Total expenses				h 19		20		10,0	00.							
21	Subtract line 2								2070								
	result is a (loss																
	file Form 6198						21		-9,3	00.							
22	Deductible rental real estate loss after limitation, if any,																
		e (see instructions)					22)	()	
23a	Total of all am								• •	23a		./(0.				
b		nounts reported on line 4 for all royalty prope nounts reported on line 12 for all properties					erties										
C d	Total of all am						• •	• • •	• •	23c							
d	Total of all am						• •		• •	23d 23e	1 (),00					
е 24	Income. Add					•		 Ide anv lo		238	T(, 00	24				
24 25	Losses. Add r	-						-		 Enter tr	tal losses he	• ere	24 25	(9,3	00)	
		اسرد												`	-,5	1	

Supplemental Income and Loss

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

26

SCHEDULE E

(Form 1040)

26

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-9,300.

OMB No. 1545-0074