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 securit | Social security number | | | | |
| VISHAL REDDY RAVULA | 040-57 | 040-57-0728 | | | | |
| Spouse's name | Spouse's soc | ial securit | y number | | | |
| Part I Tax Return Information — Tax Year Ending December 31, 2022 | ? (Enter year you a | re auth | orizing.) | | | |
| Enter whole dollars only on lines 1 through 5. | , , , , , , , , , , , , , , , , , , , | | 3 / | | | |
| Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | | | | |
| 1 Adjusted gross income | | 1 | 82, | 101. | | |
| 2 Total tax | | 2 | 10, | 836. | | |
| 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 | 11, | 281. | | |
| 4 Amount you want refunded to you | | 4 | | 445. | | |
| 5 Amount you owe | | 5 | | | | |
| Part II Taxpayer Declaration and Signature Authorization (Be sure you ge | t and keep a cop | y of yo | ur returr | າ) | | |
| return (original or amended) I am now authorizing. I consent to allow my intermediate service provider to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authoricated to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accompayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellabusiness days prior to the payment (settlement) date. I also authorize the financial institutions involve taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or amer Electronic Eunde Withdrawal Consent. | on for rejection of the triple to the U.S. Treasury a count indicated in the tall institution to debit the terminate the authorization requests must be ded in the processing of to the payment. I further the U.S. Treasure to the payment. I further the U.S. Treasure to the payment. | ansmission of its despite the election and it | on, (b) the signated Firation softwathis accourevoke (can do no later tronic paymowledge to | reason inancial vare for nt. This ancel) a than 2 ment of hat the | | |
| Electronic Funds Withdrawal Consent. | | | | | | |
| Taxpayer's PIN: check one box only X I authorize GLOBAL TAXES LLC to enter or get to enter o | 7 | 0 7 | 2 8 | | | |
| X I authorize GLOBAL TAXES LLC to enter or ge | | er five dig | gits, but | as my | | |
| signature on the income tax return (original or amended) I am now authorizing. | do | n't enter a | III zeros | | | |
| I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner P below. | | | | | | |
| Your signature ▶ D | ate▶ | | | | | |
| Spouse's PIN: check one box only | | | | | | |
| • — | enerate my PIN | | | as my | | |
| ERO firm name | _ | ter five dig | | ao my | | |
| signature on the income tax return (original or amended) I am now authorizing. | do | n't enter a | II zeros | | | |
| I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner P below. | | | | | | |
| Spouse's signature ▶ D | ate ▶ | | | | | |
| Practitioner PIN Method Returns Only—continue | below | | | | | |
| Part III 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 ent | 6 6 1 er all zero | | 9 | | |
| I certify that the above numeric entry is my PIN, which is my signature for the electronic individual is authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I arequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Provi | am submitting this retu | ırn in acc | cordanće v | | | |
| | | | | | | |
| | ate ▶ | | | | | |
| ERO Must Retain This Form — See Instruct Don't Submit This Form to the IRS Unless Requeste | | | | | | |

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 one box. | | Single Married filing jointly [u checked the MFS box, enter the r | | ed filing separatel your spouse. If yo | | _ | | | sp | ous | e (QSS) | • |
|--|---------------|--|---------------|---|------------------|------------------------------|----------------------|---------|-----------------------------|-------------------------------|--------------|--|
| | | on is a child but not your depender | | | | | | | | | | |
| Your first name and middle initial Last name | | | | me | | | | | Your social security number | | | • |
| VISHAL F | | | RAVU | | | | | | | 040-57-0728 | | |
| If joint return, s | pouse's | first name and middle initial | Last nai | me | | | | | Spous | se's s | social secu | urity number |
| Home address | (numbe | r and street). If you have a P.O. box, se | e instruction | ons. | | | Apt. no |). | Presi | denti | ial Electio | n Campaign |
| 2323 N W | MOODI | LAWN BLVD | | | | | 812 | | | | re if you, o | , |
| City, town, or p | ost offic | ce. If you have a foreign address, also c | omplete s | paces below. | Sta | te | ZIP code | | | | | ly, want \$3 Checking a |
| WICHITA | | | | KS 67 | | | 67220 | | - | box below will not change | | |
| Foreign country | y name | | F | Foreign province/state/county For | | | Foreign post | al code | e your | tax or refund. | | |
| | | | | | | | | | | L | You | Spouse |
| Digital Assets | | ny time during 2022, did you: (a) red ange, gift, or otherwise dispose of | • | | | | - | , | | | Yes | ⊠ No |
| Standard | | eone can claim: You as a de | | | | a dependent | , , | | | , - | | |
| Deduction | _ | Spouse itemizes on a separate retu | • | | | | | | | | | |
| Age/Blindness | You: | ☐ Were born before January 2, | 1958 | Are blind | Spouse | : Was bo | n before Ja | ınuary | , 2, 1958 | 3 | ☐ Is blir | nd |
| Dependents | s (see | instructions): | | (2) Social secu | urity | (3) Relationsh | ip (4) Che | ck the | box if qu | alifies | s for (see i | nstructions): |
| If more | (1) Fi | rst name Last name | | number | | to you | to you Child tax cre | | credit | redit Credit for other depend | | er dependents |
| than four | | | | | | | | | | | |] |
| dependents, see instruction: | s —— | | | | | | | | | | |] |
| and check | | | | | | | | | | | | <u>]</u> |
| here L | | | | | | | | | | Ц, | | <u>] </u> |
| Income | 1a | Total amount from Form(s) W-2, b | oox 1 (see | e instructions) | | | | | · [| 1a | 9 | 3,721. |
| | b | Household employee wages not i | | | | | | | · _ | 1b | | |
| Attach Form(s) W-2 here. Also | С | Tip income not reported on line 1a (see instructions) | | | | | | | | 1c | | |
| attach Forms | d | Medicaid waiver payments not reported on Form(s) W-2 (see instructions) | | | | | | | 1d | | | |
| W-2G and 1099-R if tax | е | Taxable dependent care benefits from Form 2441, line 26 | | | | | | | | 1e | | |
| was withheld. | f | Employer-provided adoption ben | | | | | | | | 1f | | |
| If you did not | g | Wages from Form 8919, line 6. | | | | | | | | 1g | | |
| get a Form W-2, see | h | Other earned income (see instruc | , | | | | · · · | | | 1h | | 0. |
| instructions. | i | Nontaxable combat pay election | (see instr | ructions) | | <u>1</u> i | | | | | | 2 701 |
| | | Add lines 1a through 1h | | i | | | | | | 1z | 9 | 3,721. |
| Attach Sch. B if required. | 2a | Tax-exempt interest | 2a | | | axable interes | | | | 2b | | |
| | 3a | Qualified dividends | 3a | | | rdinary divide | | | | 3b | | |
| | 4a | IRA distributions | 4a | | | axable amoun | | | | 4b | | |
| Standard Deduction for— | 5a | Pensions and annuities | 5a 6a | | | axable amoun axable amoun | | | | 5b | | |
| Single or | 6a | Social security benefits Large of the lump-sum of the lu | _ | mathad abaals be | | | | | ⊢ ⊨ | 6b | | |
| Married filing separately, | с 7 | · | | | • | , | | | HF | 7 | ı | |
| \$12,950 | 8 | Capital gain or (loss). Attach Sche Other income from Schedule 1, li | | required. If flot f | | | | | | 8 | 1 | 1 620 |
| Married filing jointly or | | · | | | | | | | | | | 1,620. |
| Qualifying surviving spouse, | 9 10 | Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7 Adjustments to income from Scho | | | | | | | | 9 | 8 | 2,101. |
| \$25,900 | | Subtract line 10 from line 9. This | , | | | | | | | 10 | | 2 101 |
| Head of household, | 11 | | • | | | | | | | 11 12 | | 2,101. |
| \$19,400 | 12 13 | Standard deduction or itemized | | | | 5-Δ | | | | 13 | | 2,950. |
| If you checked any box under | | Qualified business income deduction from Form 8995 or Form 8995-A | | | | | | | | | 1 | 2 050 |
| Standard Deduction, | 14 15 | Subtract line 14 from line 11. If ze | | | | | | | | 14 15 | | 2,950. 9 151 |
| see instructions. | 10 | Castract into 14 HOITI IIIIC 11. II Ze | 710 OI 103 | 5, SINGI '0 IIIIS | io your t | | | | | | 0 | 9,151. |

| 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 | 10,836. | |
| Credits | 17 | Amount from Schedule 2, line | э3 | | | | | . 17 | | |
| | 18 | Add lines 16 and 17 | | | | | | . 18 | 10,836. | |
| | 19 | Child tax credit or credit for o | other dependent | s from Sched | ule 8812 | | | . 19 | | |
| | 20 | Amount from Schedule 3, line | 98 | | | | | . 20 | | |
| | 21 | Add lines 19 and 20 | | | | | | . 21 | | |
| | 22 | Subtract line 21 from line 18. | If zero or less, e | enter -0 | | | | . 22 | 10,836. | |
| | 23 | Other taxes, including self-er | nployment tax, f | from Schedule | 2, line 21 . | | | . 23 | 0. | |
| | 24 | Add lines 22 and 23. This is y | our total tax | | | | | . 24 | 10,836. | |
| Payments | 25 | Federal income tax withheld | | | | | | | | |
| - | а | Form(s) W-2 | | | | 25a | 11,2 | 81. | | |
| | b | Form(s) 1099 | | | | 25b | | | | |
| | С | Other forms (see instructions |) | | | 25c | | | | |
| | d | Add lines 25a through 25c . | | | | | | . 25d | 11,281. | |
| If you have a | 26 | 2022 estimated tax payments | s and amount ar | oplied from 20 | 21 return | | | . 26 | | |
| If you have a qualifying child, | 27 | Earned income credit (EIC) . | | | | 27 | | | | |
| attach Sch. EIC. | 28 | Additional child tax credit from | 1 Schedule 8812 | | | 28 | | | | |
| | 29 | American opportunity credit | from Form 8863 | , line 8 | | 29 | | | | |
| | 30 | Reserved for future use | | | | 30 | | | | |
| | 31 | Amount from Schedule 3, line | e 15 | | | 31 | | | | |
| | 32 | Add lines 27, 28, 29, and 31. | These are your | total other pa | ayments and ref | undable cre | edits . | . 32 | | |
| | 33 | Add lines 25d, 26, and 32. Th | • | | - | | | . 33 | 11,281. | |
| Defund | 34 | If line 33 is more than line 24 | | | | | | | 445. | |
| Refund | 35a | Amount of line 34 you want r | | | | - | | | 445. | |
| Direct deposit? | b | Routing number 0 4 4 | | | c Type: | | | | | |
| See instructions. | d | Account number 5 9 1 | | | | | _ | | | |
| | 36 | Amount of line 34 you want a | | | ed tax | 36 | | | | |
| Amount | 37 | Subtract line 33 from line 24. | • • • • | | | | | | | |
| You Owe | 0. | For details on how to pay, go | to www.irs.gov | //Payments or | see instructions | | | . 37 | | |
| | 38 | Estimated tax penalty (see in | structions) . | | | 38 | | | | |
| Third Party Designee | | you want to allow another structions | • | | | | es. Comp | lete below. | ⊠ No | |
| | | signee's | | Phone | | | | identification | | |
| | | me | | no. | | | number (F | | | |
| Sign | | der penalties of perjury, I declare th lief, they are true, correct, and comp | | | | | | | | |
| Here | Yo | ur signature | | Date | Your occupation | | | | ent you an Identity | |
| | | | | | · | | | | PIN, enter it here | |
| Joint return? | | | | SOFTWARE DEVELOPER | | | ΣR | (see inst.) | | |
| See instructions. Keep a copy for your records. | Sp | Spouse's signature. If a joint return, both must sign. | | Date | Spouse's occupation | | | If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) | | |
| | Ph | one no. (209)276-8550 |) | Email address | RVREDDY99 | 99@GMAII | L.COM | | | |
| Daid | Pre | eparer's name | Preparer's signatu | ure | | Date | PT | IN | Check if: | |
| Paid | SYAN | I PRIYA RAM SAGAR GUPTA TALLAM | SYAM PRIYA | RAM SAGAR | GUPTA TALLAM | 01/24/2 | 023 P0 | 2082703 | Self-employed | |
| Preparer | | m's name GLOBAL TAX | | | | | | | (678)965-9522 | |
| Use Only | | m's address 245 ROONEY | | NSWICK N | J 08816 | | | Firm's EIN | 88-2145487 | |
| Co to sense im o | a//_a | n 10.40 for instructions and the lates | t information | · | | | | | 5 1040 (0000) | |

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Seguence 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.

| Internal Revenue Service | | | Sequence No. U1 |
|--------------------------|-------------------------------|----------|---------------------|
| Name(s) shown on Fo | orm 1040, 1040-SR, or 1040-NR | Your soc | ial security number |
| VISHAL REDDY R | AVULA | 040-57 | -0728 |
| Part I Addition | anal Incomo | | |

| Par | 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 | -11,620. |
| 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 (|) | |
| 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 | or 1040-NR. line 8 | 10 | -11,620. |

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 govern | | | |
| | 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 | 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 | | | 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 . Enter here at Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a | | 26 | |
| | Form 1040 or 1040-36, line 10, or form 1040-196, line 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, Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 040-57-0728 VISHAL REDDY RAVULA 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) 1-470KESAMUDRAM MAHABUBABAD TELANGANA IN 506112 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: 1 Single Family Residence 3 Vacation/Short-Term Rental 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 580. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,480. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 1,300. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,870. 14 14 Repairs . . . 15 Supplies 15 3,100. 16 16 Taxes 17 17 3,450. 18 18 Depreciation expense or depletion 19 19 Other (list) 20 20 12,200. 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 -11,620. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 11,620.) 580. 23a 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 12,200. 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 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 11,620. 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 ...

-11,620.