## 8879 Form

(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

Internal Revenue Service Control of the latest morniation						
Submission Identification Number (SID)						
Taxpayer's name	Social security	y number				
CHANNA SHRAVAN DAMMUR	722-92-	·3665				
Spouse's name		cial security number				
Part I Tax Return Information — Tax Year Ending December 31, 2022 (E	nter year you ar	e authorizing.)				
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 81,832.				
2 Total tax	1	2 10,770.				
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		<b>3</b> 12,887.				
4 Amount you want refunded to you		<b>4</b> 2,117.				
5 Amount you owe		5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a	ind keep a copy	of your return)				
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 authorize to Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accour payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent.	the U.S. Treasury and indicated in the taxititution to debit the chinate the authorization requests must be in the processing of the payment. I furth	d its designated Financia x preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment or ner acknowledge that the				
Taxpayer's PIN: check one box only						
<u> </u>	rata mu DINI	3 6 6 5				
X I authorize GLOBAL TAXES LLC to enter or gene	Ente	er five digits, but				
signature on the income tax return (original or amended) I am now authorizing.	don	't enter all zeros				
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN r below.						
Your signature ► Date	<b>.</b>					
Consider DINIs about one has such						
Spouse's PIN: check one box only	, DIN					
I authorize to enter or gene	-	as my				
signature on the income tax return (original or amended) I am now authorizing.		er five digits, but 't enter all zeros				
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN rebelow.						
Chausa's signature N	_					
Spouse's signature ► Date  Practitioner PIN Method Returns Only—continue be						
Part III Certification and Authentication — Practitioner PIN Method Only	510 W					
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5   1   8   9   5   2 Don't ente					
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual inco authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am requirements of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers	submitting this retur	rn in accordance with the				
ERO's signature ▶ Date	•					
ERO Must Retain This Form — See Instruction	·					

Don't Submit This Form to the IRS Unless Requested To Do 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.

Check only		Single Married filing jointly	_	ed filing separately (N		_				spou	lifying su use (QSS	5)		
one box.	-	u checked the MFS box, enter the nation is a child but not your dependent	-	our spouse. If you c	hecke	ed the HOH or	r QSS bo	ox, ente	r the	child's	name if	the qu	alifying	
Your first name	and mi	ddle initial	Last na	me					Y	our so	cial secu	rity nur	mber	
CHANNA S	SHRAV	/AN	DAMM	IUR					7	722-92-3665				
		first name and middle initial	Last nai	me					-	Spouse's social security number				
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt	t. no.	P	reside	ntial Elec	tion Ca	ampaign	
2850 FAI	NIN	ST									Check here if you, or your spouse if filing jointly, want \$3			
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete spaces below. State ZIP								this fund			
HOUSTON			TX 77								ow will no			
Foreign country name			F	Foreign province/state/	county	y	Foreign	postal co	de y	our tax	or refund		Spouse	
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward, award, or	pavm	nent for prope	rtv or se	rvices):	or (b	) sell.			Ороизе	
Assets		ange, gift, or otherwise dispose of a					-				☐ Yes	X	No	
Standard		eone can claim: You as a de				a dependent		•		,				
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien	·								
Age/Blindnes	s You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	rn before	Janua	ry 2, <sup>-</sup>	1958	☐ Is b	olind		
Dependent	s (see	instructions):		(2) Social security		(3) Relationsh	nip (4) (	Check th	e box	if qualit	fies for (se	e instru	uctions):	
If more	(1) Fi	rst name Last name		number		to you		Child ta	x crec	lit	Credit for o	other de	pendents	
than four														
dependents, see instruction	s —													
and check	,													
here L	]													
Income	1a	Total amount from Form(s) W-2, b	•	*						1a		91,	<u>452.</u>	
	b	Household employee wages not re								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 benefits from Form 8839, line 29								1f				
If you did not	g	Wages from Form 8919, line 6 .								1g				
get a Form W-2, see	h	Other earned income (see instruction	, i i i i i i i i i i i i i i i i i i i							1h	-		0.	
instructions.	i	Nontaxable combat pay election (see instructions)										0.1	450	
	<u>z</u>	Add lines 1a through 1h								1z		91,	<u>452.</u>	
Attach Sch. B if required.	2a	' <u>-</u>	2a			axable interes			•	2b				
ii required.	3a	<u>⊢</u>	3a			rdinary divide				3b	_			
	4a		4a			axable amoun axable amoun				4b				
Standard Deduction for—	5a		5a			axable amoun axable amoun				5b 6b				
Single or	6a	,	6a	mothed shook hare					_	OD				
Married filing separately,	С 7	•	m election method, check here (see instructions) L							7				
\$12,950 Married filing	8	, , ,	apital gain or (loss). Attach Schedule D if required. If not required, check here							8			620.	
jointly or	9								•	9	+		832.	
Qualifying surviving spouse,	10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							•	10		<u> </u>	J J L •	
\$25,900 Head of	11	Subtract line 10 from line 9. This is							•	11		81	832.	
household,	12	Standard deduction or itemized	-						•	12			950.	
\$19,400 If you checked	13	Qualified business income deducti				5-A				13		<u> </u>		
any box under Standard	14									14		12.	950.	
Deduction,	15	Subtract line 14 from line 11. If zer								15			882.	
see instructions.				-										

	46	Tay (assignment one) Check if any from Famo(s), 4 0014 0 0 4070 0	46	10,770
ax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	10,770
Credits	17	Amount from Schedule 2, line 3	17	10 770
	18	Add lines 16 and 17	18	10,770
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20 21	Amount from Schedule 3, line 8	21	
	22	Add lines 19 and 20	22	10,770
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	10,770
ovmonto	25	Federal income tax withheld from:	24	10,770
Payments	a	Form(s) W-2		
	b	Form(s) 1099	-	
	c	Other forms (see instructions)	-	
	d	Add lines 25a through 25c	25d	12,887
	26	2022 estimated tax payments and amount applied from 2021 return	26	
f you have a qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)		
	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	12,887
efund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	2,117
Ciuiiu	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	2 <b>,</b> 117
rect deposit?	b	Routing number 1 2 1 0 0 0 3 5 8 c Type: X Checking Savings		
e instructions.	d	Account number 3 2 5 0 3 3 7 3 6 9 9 0		
	36	Amount of line 34 you want applied to your 2023 estimated tax		
mount ou Owe	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .  For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37	
	38	Estimated tax penalty (see instructions)		
hird Party esignee	Do ins	you want to allow another person to discuss this return with the IRS? See tructions	below.	X No
	Des	signee's Phone Personal ident ne no. number (PIN)	fication _	

Шана	belief, they are	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.										
Here	Your signature			Date	Your occ	Your occupation			If the IRS sent you an Identity Protection PIN, enter it here			
Joint return?				SOFT	WARE E	NGINEER	(see inst.)				$\Box$	
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, <b>both</b> must sign.			Date	Spouse's	s occupation		If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)				
	Phone no.	(510)648-070	Email address	SHRAVAN.DAMMUR@GMAIL.COM								
	Preparer's name Preparer's signa			ture			Date	PTIN		Check if:		
Paid	SYAM PRIYA RAN	M SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA	TALLAM	03/28/2023	P02082703		] Self-	employe	ed
Preparer	Finds and CLODAL MAYDOLLIC						Discussion	Discuss (C70) 0CE 0E00				

GLOBAL TAXES LLC

245 ROONEY CT E BRUNSWICK NJ 08816

Firm's name

Firm's address

**Use Only** 

Phone no. (678) 965-9522

Firm's EIN

### **SCHEDULE 1** (Form 1040)

**Additional Income and Adjustments to Income** 

OMB No. 1545-0074 Attachment Sequence No. **01** 

Department of the Treasury Internal Revenue Service

CHANNA SHRAVAN DAMMUR

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 number 722-92-3665

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		5	-9,620.
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		
į	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	0		
	instructions)	8m	-	
n	Section 951(a) inclusion (see instructions)	8n 8o		
0	Section 461(I) excess business loss adjustment	8p		
p	Taxable distributions from an ABLE account (see instructions)	8g		
q r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form	OI		
3	1040, line 1a or 1d	8s ( )		
t	Pension or annuity from a nonqualifed deferred compensation plan or	,	1	
٠	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	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.			-9,620.

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-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		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			
		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			
	·	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	- 41		
	F	24i		
j	<u> </u>	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	S.4.		
		24k		
Z	Other adjustments. List type and amount:	<b></b>		
05		24z	05	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .		00	
	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.

OMB No. 1545-0074

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

Go to www.irs.gov/ScheduleE for instructions and the latest information. Your social security number

Attachment Sequence No. 13

CHAN	NA SHRAVAN DAMMUR						722-9	2-3665	
Par						•			
	Note: If you are in the business of renting personal proper	ty, use	Schedul	e C. See	instru	ctions. If you ar	e an indiv	idual, repo	ort farm
	rental income or loss from <b>Form 4835</b> on page 2, line 40.	1 - CI -	<b>F</b> (-)	10000 0					- <b>V</b> N -
	Did you make any payments in 2022 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .							. 🗆 Үе	s U No
1a	Physical address of each property (street, city, state, ZIF	ode	e)						
Α	FLAT-201 BRAHMANIVAS APT VENKATADRINAGAR	COLC	NY, ASI	MANGAD	н, м	ALAKPET, HY	/DERABA	D, TELA	ANGANA IN
В									
С									
1b	Type of Property (from list below)  2 For each rental real estate proper above, report the number of fair reports the number of f							al Use ys	QJV
Α	personal use days. Check the QJ			Α		250		0	
В	if you meet the requirements to fi qualified joint venture. See instru			В					
С	qualified joint venture. See institu	CHOIR	э.	С					
Туре	of Property:					·			
1	Single Family Residence 3 Vacation/Short-Term Rent	tal	5 Land	d	7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roy	alties	8	Other (descri	be)		
						Propertie			
Incon	201			Α		В	;s.		С
3	Rents received	3			10.	В			<u> </u>
4	Royalties received	4			10.				
Expe		7							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		9	80.				
8	Commissions	8			00.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1 2	50.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		1,2	50.				
13	Other interest	13							
14	Repairs	14		2 6	50.				
15	Supplies	15			80.				
16	Taxes	16		<u> </u>	•				
17	Utilities	17		1,7	70				
18	Depreciation expense or depletion	18		± <b>,</b> ,	70.				
19	OH (P-4)	19							
20	Total expenses. Add lines 5 through 19	20		10,1	30.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If			10,1	<u> </u>				
21	result is a (loss), see instructions to find out if you must								
	file <b>Form 6198</b>	21		-9,6	20.				
22	Deductible rental real estate loss after limitation, if any,			•					
	on Form 8582 (see instructions)	22	(	9,62	20.)	(	)	(	)
23a	Total of all amounts reported on line 3 for all rental proper				23a	•	510.	`	,
b	Total of all amounts reported on line 4 for all royalty prope				23b				
C	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	10.	130.		
24	<b>Income.</b> Add positive amounts shown on line 21. <b>Do no</b>						24		
25	Losses. Add royalty losses from line 21 and rental real estat		-					(	9,620.)
26	Total rental real estate and royalty income or (loss).							-	. ,
	here. If Parts II, III, IV, and line 40 on page 2 do not a								
	Schedule 1 (Form 1040) line 5 Otherwise include this ar						06		-0 620