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.

Submission Identification Number (SID)

Taxpay	er's name		Social securit	y numbe	er
GUR	IVIREDDY YETTAPU		319-97-	-5818	
Spouse	's name	Spouse's social security number			
Part	I Tax Return Information – Tax Year Ending December 31, 2	022 (Enter	year you a	re autł	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	Adjusted gross income			1	33,835.
2	Total tax			2	2,300.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	3,196.
4	Amount you want refunded to you			4	896.
5	Amount you owe			5	

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

Under penalties of perjury, 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

Х	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	
				ERO firm name		

Enter five digits, but don't enter all zeros										
7	5	8	1	8						

my

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

to enter or generate my PIN

as my Enter five digits, but don't enter all zeros

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 ► C	ate 🕨							
Practitioner PIN Method Returns Only—continue	bel	ow						
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.	5	1			3 all zer	9	89	

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 >			
	etain This Form — Se orm to the IRS Unless	e Instructions Requested To Do So	
For Paparwork Paduation Act Nation and your tax rature	instructions	DEV 02/22/22 DDO	Earm 8879 (Pov. 01 2021)

E1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		202	2	OMB No. 1545-	0074	IRS Use C)nly—[Do not w	rite or staple	in this space.
Filing Status Check only one box.	lf yo	Single D Married filing jointly understand the MFS box, enter the national statement on is a child but not your dependent	ame of your sp	separately (M ouse. If you ch	,					spou	lifying surv use (QSS) name if th	0
Vour first name												h. number
Your first name		ddie initiai	Last name								cial securit	
GURIVIRE		first name and middle initial	YETTAPU Last name								97-581	o curity number
n joint leturn, sp	Jouse a		Last hame							pouse	5 500101 500	Junty number
Home address	numbe	r and street). If you have a P.O. box, see	instructions				4	Apt. no.		Prosido	ntial Flectio	on Campaigr
1101 S D								203			nere if you,	
		ce. If you have a foreign address, also co	mplete spaces b	elow.	Sta	te	ZIP c					tly, want \$3
BOISE		,			II)	837				this fund. ow will not	Checking a
Foreign country	name		Foreign	province/state/c				in postal co			or refund.	0
0 ,											You	Spouse
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a			-		-				Ves	X No
Standard	Som	eone can claim: 🗌 You as a de	pendent] Your spouse	e as	a dependent						
Deduction	<u> </u>	Spouse itemizes on a separate return	n or you were a	a dual-status a	alien							
Age/Blindness	You:	Were born before January 2, 1	958 🗌 Are b	olind Spo	use	: 🗌 Was bor	n befo	ore Janua	v 2.	1958	🗌 ls bl	ind
Dependents				Social security		(3) Relationsh	11		-			instructions):
If more		rst name Last name	(-/	number		to you		Child ta	x crea	lit	Credit for ot	her dependents
than four											[
dependents,											[
see instructions and check												
here 🗌												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see instru	ictions)						1a		38,802.
	b	Household employee wages not re	ported on For	m(s) W-2						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	(see instructio	ns)						1c		
attach Forms	d	Medicaid waiver payments not rep	orted on Form	(s) W-2 (see in	nstru	ictions)				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 bene	fits from Form	8839, line 29			• •			1f		
lf you did not	g	-			•		• •			1g		
get a Form W-2, see	h	Other earned income (see instructi	/		•		· ·		•	1h	_	0.
instructions.	i	Nontaxable combat pay election (s	see instructions	s)	•	1 i						
		Add lines 1a through 1h	 . I	· · · ·	· -		• •		•	1z		38,802.
Attach Sch. B	2a	· ·	2a			axable interest			•	2b		
if required.	<u>3a</u>		3a			ordinary divider			·	3b		
• • • •	4a 5-		4a			axable amount			•	4b		
Standard Deduction for –	5a		5a 6a			axable amount axable amount			•	5b 6b		
Single or	6а с	Social security benefits							· □	00		
Married filing separately,	7	Capital gain or (loss). Attach Scher				,	• •			7		
\$12,950Married filing	8	Other income from Schedule 1, line					• •			8		-4,967.
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							•	9		33,835.
Qualifying spouse,	10	Adjustments to income from Sche								10		,
\$25,900 • Head of	11	Subtract line 10 from line 9. This is							•	11	_	33,835.
household,	12	Standard deduction or itemized	-	-						12		12,950.
\$19,400 • If you checked	13	Qualified business income deducti				5-A				13		
any box under Standard	14									14	-	12,950.
Deduction,	15	Subtract line 14 from line 11. If zer	o or less, enter	-0 This is yo	our 1	axable incom	е.			15		20,885.
see instructions.			-	,								

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 For	m(s): 1 🗌 881	4 2 4972	3		16	2,300.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	2,300.
	19	Child tax credit or credit for other depende	ents from Sched	ule 8812			19	
	20	Amount from Schedule 3, line 8					20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero or less	s, enter -0				22	2,300.
	23	Other taxes, including self-employment tax	k, from Schedul	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is your total tax					24	2,300.
Payments	25	Federal income tax withheld from:						
5	а	Form(s) W-2			25a 3	,196.		
	b	Form(s) 1099			25b			
	с	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	3,196.
Here have a	26	2022 estimated tax payments and amount	applied from 20)21 return .			26	
If you have a L qualifying child,	27	Earned income credit (EIC)		No	27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 88			28			
	29	American opportunity credit from Form 88	63, line 8		29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15			31		-	
	32	Add lines 27, 28, 29, and 31. These are yo					32	
	33	Add lines 25d, 26, and 32. These are your					33	3,196.
Defend	34	If line 33 is more than line 24, subtract line					34	896.
Refund	35a	Amount of line 34 you want refunded to y					35a	896.
Direct deposit?	b	Routing number 1 1 1 9 0 0 6				Savings		
See instructions.	d	Account number 5 8 9 7 3 4 2						
	36	Amount of line 34 you want applied to you	_ · _ · _ · _ ·	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the ar						
You Owe	57	For details on how to pay, go to <i>www.irs.g</i>					37	
	38	Estimated tax penalty (see instructions)	-		38			
Third Party		you want to allow another person to di						
Designee		structions				omplete k	below.	X No
_ • • • • <u>9</u> ••	De	signee's	Phone		Pers	onal identif	fication	
	nar	nē	no.		numl	oer (PIN)		
Sign		der penalties of perjury, I declare that I have exam						
Here		ief, they are true, correct, and complete. Declaratio		1	ased on all information			, ,
	Yo	ur signature	Date	Your occupation				nt you an Identity IN, enter it here
Joint return?				POSTDOCTORA	L RESEARCH SO			
See instructions.	Sp	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupat			IRS se	nt your spouse an
Keep a copy for	οp		Duto			Ident	tity Prot	ection PIN, enter it here
your records.						(see	inst.)	
	Ph	one no. (254) 633-1040	Email address	GURIVIREDDY	HCU@GMAIL.CO	M		1
Paid	Pre	eparer's name Preparer's sigr	ature		Date	PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	A RAM SAGAR	GUPTA TALLAM	03/30/2023	P02082	2703	Self-employed
Use Only	Firi	m's name GLOBAL TAXES LLC				Phor	ne no.	(678)965-9522
	Firi	n's address 245 ROONEY CT E BF	UNSWICK N	J 08816		Firm	's EIN	84-3171965
Go to www.irs.go	ov/Forn	1040 for instructions and the latest information.		BAA	REV 03/22/23 PRO			Form 1040 (2022

BAA

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

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 2 22

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

	Attachment Sequence No. 01								
Your social security number									
319-97	-5818								

GURIVIREDDY YETTAPU + Additional Income

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. Att	ach Schedule E .	5	-4,967.
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	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				
	a nongovernmental section 457 plan	8t	_	
u	0	8u	_	
Ζ	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-SF	l, or 1040-NR, line 8	10	-4,967.

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-b	asis gove	rnment		
	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)	1a			
b	Deductible expenses related to income reported on line 8I from the				
		4b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
		1c			
d		4d			
е	Repayment of supplemental unemployment benefits under the Trade				
		1e		_	
f		4f			
g	, , , , , , , , , , , , , , , , , , , ,	1g			
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				
		4i		-	
, i	•	4j		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		1k		-	
Z	Other adjustments. List type and amount:				
05		4z		05	
25	Total other adjustments. Add lines 24a through 24z		 	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . E			06	
				26	
	BAA	REV 03/22/23 PR	0	Schedul	e 1 (Form 1040) 2022

	EDULE E			Supplementa	l Inc	ome ar	nd Los	SS			OMB No	o. 1545-0074
(Form	1040)	(From	rental real	estate, royalties, partnersl	hips, S	6 corporat	ions, es	states,	trusts, REMI	Cs, etc.)	90	199
Departn	nent of the Treasury			Attach to Form 1040,							Attachn	nent
	Revenue Service		Go to w	ww.irs.gov/ScheduleE for	r instru	uctions an	d the la	atest in	formation.		Sequen	ce No. 13
) shown on return										al security	
	VIREDDY YE	-								319-9	7-5818	
Part	Note: If yo	ou are in t	the business	Rental Real Estate an s of renting personal proper m 4835 on page 2, line 40.			e C . See	e instru	ctions. If you a	are an indi	vidual, rep	ort farm
A [2 that would require you	to file	Form(s) 1	1099? 8	See ins	structions .		. 🗌 Ye	es 🛛 No
				uired Form(s) 1099?								
1 a				rty (street, city, state, ZIF								
Α	-			:2 IISER - PUNE E		•	C.MAH	ARAS	HTRA TN 4	111008		
B		/				,	-,					
С												
1b	Type of Prope (from list below			n rental real estate prope eport the number of fair				Fa	ir Rental Days	Persor Da		QJV
Α	3	/	persona	use days. Check the Q	JV bo	x only	Α		295		0	
В				eet the requirements to f joint venture. See instru			В					
С			quaimeu	joint venture. See instru	CUOIR	5.	С					
	of Property:											
	Single Family R			acation/Short-Term Ren	tal	5 Lanc	•		Self-Rental			
2	Multi-Family Re	sidence	e 4 C	ommercial		6 Roya	alties	8	Other (desc	ribe)		
-									Properti	es:		
Incon	ne:						Α		В			С
3					3		3	40.				
4		ived.			4							
Exper												
5	-				5							
6			,		6			2.2				
7	-				7		4	22.				
8 9					0 9							
10					10							
11	•	•			11		7	48.				
12				etc. (see instructions)	12							
13		•			13							
14	Repairs				14		1,8	26.				
15					15		1,4	27.				
16					16							
17					17		8	84.				
18 19	A 1		•	on	18 19							
20	· · · ·	s Add li	nes 5 thro	ugh 19	20		5.3	07.				
21				s) and/or 4 (royalties). If								
21				to find out if you must								
					21		-4,9	67.				
22				s after limitation, if any,								
					22			57.)	()	()
23a				line 3 for all rental prope				23a		340.		
b			•	line 4 for all royalty prop				23b				
c c			•	line 12 for all properties				23c				
d			•	line 18 for all properties line 20 for all properties				23d 23e	F	,307.		
е 24			•	shown on line 21. Do no						. 24		
25				ne 21 and rental real estat		-					(4,967.)
26				alty income or (loss).							<u> </u>	, ,
					-							

Schedule 1 (Form 1040), line 5. Otherwise, include this amo	ount in the total on line 41	on page 2 .
For Paperwork Reduction Act Notice, see the separate instructions.	NPA	-4,967.

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on