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

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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. 1545-0074

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

Filing Status Check only	S 🗌 S	Single X Married filing jointly	Marrie	ed filing separate	ly (MFS)	☐ Head of	household (H0	OH)		ifying su se (QSS		g
one box.	If yo	u checked the MFS box, enter the r	name of y	our spouse. If yo	u check	ed the HOH or	QSS box, en	ter the		,	,	ualifying
	pers	on is a child but not your dependen	t:									
Your first name and middle initial Last name You								Your so	cial secu	rity nu	mber	
							676-74-9678					
If joint return, spouse's first name and middle initial Last name Sp								Spouse's social security number				
PRATHYUS	SHA		NAID	U					665-68-8351			
Home address (number and street). If you have a P.O. box, see instructions. Apt. no.								Presidential Election Campaign				
4400 BEI	LL ST	TREET					202C		Check here if you, or your			
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete s _l	paces below.	Sta	te	ZIP code		spouse if filing jointly, want \$3 to go to this fund. Checking a			
AMARILLO)				TX		79109	20.		w will no	ot char	
Foreign country	/ name		F	Foreign province/st	ate/count	У	Foreign postal	code	your tax	or refund		1 -
										You		Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of					-			Yes	X	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, 1	1958	Are blind	Spouse	: Was bo	n before Janı	uary 2	, 1958	☐ Is b	olind	
Dependents	s (see	instructions):		(2) Social sec	urity	(3) Relationsh	nip (4) Check	the bo	x if qualif	ies for (se	e instr	uctions):
If more	(1) Fi	rst name Last name		number		to you	Child	tax cr	edit	Credit for other dependents		
than four												
dependents, see instruction:	s ——											
and check	,										$oxedsymbol{oxedsymbol{oxedsymbol{\bot}}}$	
here								Ш		_	Ш	
Income	1a	Total amount from Form(s) W-2, b	`	,					1a	1 1	<u>.22,</u>	696.
Attack Farms(a)	b	Household employee wages not r	•						1b			
Attach Form(s) W-2 here. Also	C	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	9	•							1g 1h	-		
get a Form W-2, see	h			ons)						-		0.
instructions.	i	Nontaxable combat pay election (see instr	uctions)		<u>1</u> i				1	2.2	C O C
		Add lines 1a through 1h			 I . .				1z	1	.22,	696.
Attach Sch. B if required.	2a	Tax-exempt interest	2a		-	axable interes		٠.	2b	+		
	3a	Qualified dividends	3a			rdinary divide		٠.	3b	+		
	4a	IRA distributions	4a			axable amoun			4b			
Standard Deduction for—	5a	Pensions and annuities Social security benefits	5a 6a			axable amoun axable amoun			5b			
Single or	6a	If you elect to use the lump-sum		mathad abaak b				. г	6b			
Married filing separately,	с 7	Capital gain or (loss). Attach Sche		·	`	,		. –	7	1		
\$12,950		, ,		•				. L			1 2	100
Married filing jointly or	8	Other income from Schedule 1, line 10							8			109.
Qualifying surviving spouse,	9 10	Add lines 12, 25, 35, 45, 55, 65, 7 Adjustments to income from Sche							9	1 1	.∪ઝ ,	587.
\$25,900		•	-						10	1	0.0	507
Head of household,	11	Subtract line 10 from line 9. This i Standard deduction or itemized	•	-					11	1 1		587.
\$19,400	12 13	Qualified business income deduction		,	,	 5-Δ			13		<u> </u>	900.
If you checked any box under	13								13		25	000
Standard Deduction,	15	Add lines 12 and 13								+		900. 687.
see instructions.		Captract into 14 HOITI III 6 11. II 26	10 01 168	5, GIRGI -0 IIIIS	is your t				15		00,	00/.

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	9,643.
Credits	17	Amount from Schedule 2, lir					[17	
	18	Add lines 16 and 17					[18	9,643.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812		[19	
	20	Amount from Schedule 3, lir	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[22	9,643.
	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	9,643.
Payments	25	Federal income tax withheld							·
	а	Form(s) W-2				25a 8	,640.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c	,					25d	8,640.
.,	26	2022 estimated tax paymen						26	
If you have a 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	ne 15			31			
	32	Add lines 27, 28, 29, and 31				ndable credits		32	
	33	Add lines 25d, 26, and 32. T						33	8,640.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	
neiulia	35a	Amount of line 34 you want				•	. 🗆 [35a	
Direct deposit?	b	Routing number X X X				_	Savings		
See instructions.	d	Account number X X X	X X X X	XXXX		X X			
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount vou owe					
You Owe		For details on how to pay, g						37	1,003.
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party		you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			_
Designee	ins	structions				. Yes. Co	mplete be	low.	X No
		signee's me		Phone no.			nal identific er (PIN)	ation	
0:		der penalties of perjury, I declare	hat I have everning		d accompanying ach		, ,	ho bos	t of my knowledge and
Sign		lief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the I	RS ser	nt you an Identity
							Protec	tion P	IN, enter it here
Joint return?					ETL DEVELO	PER	(see in	st.)	
See instructions. Keep a copy for	Sp	Spouse's signature. If a joint return, both must sign.		Date Spouse's occupation					nt your spouse an
your records.					STUDENT		(see in	•	ection PIN, enter it here
		one no. (571) 425-011	1	Email address		@GMAIL.COM	,		
		eparer's name	Preparer's signat		THANT.DOLC	Date	PTIN		Check if:
Paid		1 PRIYA RAM SAGAR GUPTA TALLAM			מווסים יים דו. ד.מאו		P02082	703	Self-employed
Preparer		m's name GLOBAL TA		IVIII DUQUI	COLITY TABLAM	02/23/2023			678) 965-9522
Use Only			Y CT E BRU	INSWICK N	J 08816		Firm's		84-3171965
Go to warm im ~				TANATON IN		DEV 00/40/20 DDC	1 111111 5	-114	Form 1040 (2022)
GO TO WWW.IIS.go	UVITOIT	n1040 for instructions and the late	at illioillidiloll.		BAA	REV 02/10/23 PRO			rom 1040 (2022)

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR SHANSANKA P AREPALLY & PRATHYUSHA NAIDU

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

	Sequence No. 01
Your soc	ial security number
676-71	-9678

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	-13,109.
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	-	
!	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	01		
	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 8n	-	
n o	Section 951A(a) inclusion (see instructions)	80	-	
g	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8g	-	
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	, , , , , , , , , , , , , , , , , , ,		
•	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.		10	-13,109.

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-basin		
	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 8I 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		
	En En		
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		25	
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 . Ent	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.

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

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

Attachment Sequence No. 13

Your social security number

OMB No. 1545-0074

SHAN	ISANKA P AREPA	ALLY & PRATHYUSHA NAIDU						676-7	74-9678	ı
Part	Note: If you a	Loss From Rental Real Estate and ure in the business of renting personal propertion loss from Form 4835 on page 2, line 40.			c . See	instruc	ctions. If you a	ire an ind	lividual, rep	ort farm
Α [payments in 2022 that would require you	to file	Form(s) 1	1099? S	See ins	tructions .		. \(\text{Y}\epsilon	es X No
		will you file required Form(s) 1099? .								
1a		s of each property (street, city, state, ZIF								
Α		RAMALYAM STREET GUNADALA VI		-	ANDHRA	A PR	ADESH IN	52000	4	
В								0200		
С										
1b	Type of Property (from list below)	For each rental real estate prope above, report the number of fair r	rental	and	Fair Rental Days			Perso D	QJV	
Α	3	personal use days. Check the QJ			Α		365		0	
В		if you meet the requirements to find the qualified joint venture. See instru			В					
С		qualified joint venture. See instru	iotioi is		С					
	of Property:									
	Single Family Resident Multi-Family Resident		tal	5 Land 6 Roya			Self-Rental Other (desci	ribe)		
							Properti			
Incon	ne:				Α		В			С
3			3			37.				
4		d	4			-				
Exper		-								
5			5							
6		ee instructions)	6							
7		ntenance	7		2,9	63.				
8			8							
9			9							
10		rofessional fees	10							
11		8	11		2,7	71.				
12		t paid to banks, etc. (see instructions)	12							
13	Other interest .		13							
14	Repairs		14		2,6	36.				
15			15		2,4	78.				
16	Taxes		16							
17			17		2,8	98.				
18		ense or depletion	18							
19	Other (list)		19							
20	Total expenses. A	Add lines 5 through 19	20		13,7	46.				
21	result is a (loss), s	rom line 3 (rents) and/or 4 (royalties). If see instructions to find out if you must	21	-	-13 , 1	09.				
22		real estate loss after limitation, if any, ee instructions)	22		13,10		()(,
23a		nts reported on line 3 for all rental prope				23a	\	637.		
b		nts reported on line 4 for all royalty proper				23b				
C		nts reported on line 12 for all properties				23c				
d		nts reported on line 18 for all properties				23d				
e		nts reported on line 20 for all properties				23e	13	,746.		
24		sitive amounts shown on line 21. Do no						. 24		
25	-	Ity losses from line 21 and rental real estat		-		inter to	tal losses he	_	(13,109.
26	•	estate and royalty income or (loss).							Ì	
_•	here. If Parts II, I	III, IV, and line 40 on page 2 do not a 1040), line 5. Otherwise, include this ar	apply	to you,	also er	nter th	is amount c			-13,109.