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

	5.00.100				
Submis	sion Identification Number (SID)				
Taxpayer	's name	Social securit	y numl	per	
BHAR	ATHI DEVI MALEMPATI	492-91-	-169	3	
Spouse's	name	Spouse's soc	ial seci	urity numbe	r
Doub	Tou Debugg Information Tou Very Ending Decomber 24 0000 (Enter				
Part	·	year you a	re au	tnorizing	.)
	hole dollars only on lines 1 through 5.				
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. Adjusted gross income		1	70	3,633.
	Total tax		2		0,055.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		1,292.
	Amount you want refunded to you		4		1,292.
	Amount you owe		5	-	1,220.
Part I		eep a cop		our retu	ırn)
Under p my knov return (o to send for any o Agent to paymen authoriz paymen business taxes to persona Electron Taxpay	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above viriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmirmly return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. Initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indiction is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the transmirm in the processing the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the prior terminate (PIN) below is my signature for the income tax return (original or amended) I are its Funds Withdrawal Consent. **Rer's PIN: check one box only** I authorize GLOBAL TAXES LLC to enter or generate resignature 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 if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow. **Granture** **M.B.M.B.M.B.M.B.M.B.M.B.M.B.M.B.M.B.M.	I am now aut e are the amo tter, or electro ction of the tr S. Treasury ar cated in the ta n to debit the the authoriza ests must be processing of ayment. I furt n now authori my PIN I Ent do Dow authorizing	norizing and its of an	g, and to to the from the inturn original sistence, (b) to designated or to this according to the certonic packnowledge and, if appliance, but all zeros meck this	he best of icome tax ator (ERO) he reason I Financial fftware for ount. This (cancel) a er than 2 ayment of e that the cable, my as my box only
Spouse	e's PIN: check one box only				
	I authorize to enter or generate r	ny PIN			as my
	ERO firm name			digits, but	_
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.				
Spouse	s's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part I	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	6 6	1 9 8	3 9
		Don't ent	er all ze	eros	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subminents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this retu	rn in a	accordance	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To D	o So			

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022	
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OMB No. 1545-0074

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

Filing Status	s 🗌 🤄	Single Married filing jointly	X Marrie	ed filing separately	(MFS)	Head of	hous	ehold (HOH)		lifying survuse (QSS)	/iving	
Check only one box.	If yo	u checked the MFS box, enter the r	name of y	our spouse. If you	check	ed the HOH o	r QSS	S box, ente	r the o			ne qua	alifying
		on is a child but not your depender		I CHARAN VEMULA								•	, ,
Your first name	and m	iddle initial	Last na	me					Y	our so	cial securit	y num	ıber
BHARATH:	I DEV	VI	MALE	MPATI					492-91-1693				
If joint return, s	pouse's	s first name and middle initial	Last na	me					Sı	pouse'	's social sec	curity r	number
									8	79-2	20-1493	1	
Home address	(numbe	er and street). If you have a P.O. box, se	e instruction	ons.				Apt. no.	P	reside	ntial Election	on Car	mpaign
12050 RI	ESEAI	RCH ROAD						8311			nere if you,	,	
City, town, or p	ost offi	ce. If you have a foreign address, also c	omplete s	paces below.	Sta	te	ZIP	code			if filing join this fund.		
FRISCO					TX	2	75	033		0	ow will not		0
Foreign country name			F	oreign province/state	e/count	У	Fore	ign postal co			or refund.		,-
											You		Spouse
Digital	At ar	ny time during 2022, did you: (a) red	ceive (as	a reward, award, o	r payr	nent for prope	erty o	r services);	or (b)	sell,			
Assets		ange, gift, or otherwise dispose of									☐ Yes	\times	No
Standard		eone can claim: You as a de		<u></u>				, ,					
Deduction	_	Spouse itemizes on a separate retu											
A /DI: I		·					1	C		1050			
		Were born before January 2,	1958 _		oouse			fore Janua	, ,		ls bl		
Dependent				(2) Social securi number	ty	(3) Relationsh to you	nip	(4) Check th		· .	,		,
If more	<u>(1)</u> F	irst name Last name		number		to you		Child ta	x cred	it	Credit for other dependent		endents
than four dependents,								L		\longrightarrow		┽	
see instruction	s —							L		\longrightarrow		┽	
and check	, —							L		\longrightarrow		┽	
here											<u>l</u>		
Income	1a	Total amount from Form(s) W-2, k	,	,						1a		37,0)83.
Attach Form(s)	b	Household employee wages not i					٠		•	1b			
W-2 here. Also		c Tip income not reported on line 1a (see instructions)							1c				
attach Forms	d	Medicaid waiver payments not re	•	` ,	ınstru	ictions)	٠		•	1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits		· ·			٠		•	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 .					٠		•	1g			
get a Form W-2, see	h	Other earned income (see instruc	,				. i		•	1h			0.
instructions.	i	Nontaxable combat pay election	(see instr	ructions)		<u>1</u> i				-	٠,		
	<u>z</u>	Add lines 1a through 1h								1z		3 / , U	83.
Attach Sch. B if required.	2a	Tax-exempt interest	2a			axable interes				2b			
ii required.	3a	Qualified dividends	3a			rdinary divide				3b	_		
	4a	IRA distributions	4a			axable amoun				4b			
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun				5b			
Single or	6a	Social security benefits	6a			axable amoun	it.		Ė	6b	_		
Married filing separately,	c	If you elect to use the lump-sum		•	•	,	•			-	4		
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						7	+				
 Married filing jointly or 	8	Other income from Schedule 1, line 10						8			<u> 150.</u>		
Qualifying surviving spouse,	9						٠			9		18,6	533.
\$25,900	10	Adjustments to income from Scho	•							10		70 1	
 Head of household, 	11	Subtract line 10 from line 9. This i	•				٠			11			33.
\$19,400	12	Standard deduction or itemized		•	,	 E A	٠			12		LZ,9	950.
If you checked any box under	13	Qualified business income deduc								13	_		
Standard Deduction,	14	Add lines 12 and 13								14			950.
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income							15	(55,6	183.	

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	10,066.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	10,066.
	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	10,066.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	10,066.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25 a 1	4,292.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	14,292.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return			26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, 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	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	14,292.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	4,226.
riciana	35a	Amount of line 34 you want			is attached, che	ck here	🗌	35a	4,226.
Direct deposit?	b	Routing number 0 5 1				Checking	Savings		
See instructions.	d	Account number 4 3 5	0 3 4 2	2 1 8 8	3 6				
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party Designee		you want to allow another	•		n with the IRS?		Complete b	olow	X No
Designee		signee's		Phone			sonal identi		NO NO
		me		no.			ber (PIN)	ilcation	
Sign Here		der penalties of perjury, I declare tilef, they are true, correct, and com							
пеге	Yo	Your signature		Date				nt you an Identity	
							ection P inst.)	IN, enter it here	
Joint return? See instructions.		ougo's signature. If a joint return	hath must sign	Date	SOFTWARE I			at vour apouse an	
Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupat	ion	Iden:	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Ph	one no. (848)213-520	7	Email address	BHARATHI.MALI	EMPATI@GMAIL.C	OM		
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/02/2023	P0208	2703	Self-employed
Preparer	Fir	m's name GLOBAL TA	XES LLC				Phor	ne no. (678)965-9522
Use Only	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm	's EIN	84-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

BHARATHI DEVI MALEMPATI

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

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 soci	al security number
492-91	-1693

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	ach Schedule E .	5	-8,450.
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		
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			
	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:	0-		
0	Total ather income. Add lines On through On	8z		
9 10	Total other income. Add lines 8a through 8z		9	-8 450

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 governr			
	officials. Attach Form 2106	L	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	L	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			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 . Enter here an Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	roini 1040 oi 1040-on, iiile 10, oi roini 1040-inn, iiile 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.

Attachment

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

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

2022	
Attachment Sequence No. 13	

Your social security number

OMB No. 1545-0074

BHAI	RATHI DEVI MALEMPATI						492-9	1-1693	•
Par	Note: If you are in the business of renting personal proper			C . See	instru	ctions. If you	are an indiv	vidual, rep	ort farm
	rental income or loss from Form 4835 on page 2, line 40.								
	Did you make any payments in 2022 that would require you								es 🗵 No
В	f "Yes," did you or will you file required Form(s) 1099? .							. \(\subseteq \text{Ye}	es 🗌 No
1a	Physical address of each property (street, city, state, ZII	P code	e)						
Α	ROAD NO:3/8, MATRUSRI NAGAR MIYAPUR, HYI	DERAE	BAD TEL	ANGA	NA I	N 500049			
В									
С									
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental	and		Fa	ir Rental Days	Person Da		QJV
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to find a qualified joint venture. See instru			В					
С	quainied joint venture. See institu	ICTIONS	·. [С					
Туре	of Property:								•
1	Single Family Residence 3 Vacation/Short-Term Ren	ital	5 Land		7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	ılties	8	Other (desc	ribe)		
	•		,						
_						Propert	ies:		
Incon				Α	- 0	В			С
3	Rents received	3		4	50.				
_ 4	Royalties received	4							
Expe		_							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		6	50.				
8	Commissions	8							
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							
13	Other interest	13							
14	Repairs	14			00.				
15	Supplies	15		2,3	50.				
16	Taxes	16							
17	Utilities	17		1,8	50.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		8,9	00.				
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			0 4	- 0				
	file Form 6198	21		-8,4	50.				
22	Deductible rental real estate loss after limitation, if any,						,	ı.	
	on Form 8582 (see instructions)	22	(8,45	0.)	()	(
23a	Total of all amounts reported on line 3 for all rental prope				23a		450.		
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b				
С	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	8	3,900.		
24	Income. Add positive amounts shown on line 21. Do no		-				. 24		
25	Losses. Add royalty losses from line 21 and rental real esta-	te loss	es from lir	ne 22. E	nter to	otal losses he	ere 25	(8,450.
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, IV, and line 40 on page 2 do not								
	Schedule 1 (Form 1040), line 5. Otherwise, include this at	mount	in the tot	tal on li	ne 41	on page 2	. 26		-8,450.