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) Sacial security number 76.9-45-66.94 Spouse's social security number 76.9-46.95 Sp				_!	
Spouse's social security number Spouse's social security number security number security numbers Spouse's 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 P	Submi	ssion Identification Number (SID)			
Part II Tax Return Information — Tax Year Ending December 31, 2022 (Enter year you are authorizing.)	Taxpaye	er's name	Social securi	y numb	per
Part II Tax Return Information — Tax Year Ending December 31, 2022 (Enter year you are authorizing.) Inter whole dollars only on lines 1 through 5. Note: Form 1040-SS fliers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income 2 Total tax 2 10, 847. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 1, 13, 802. 4 Amount you want refunded to you 4 2, 255. 5 Mount you want refunded to you 5 Mount you want refunded to you 4 2, 255. 5 Smouth you want refunded to you 4 2, 255. 5 Smouth you want refunded it is true, cornect, and complete. I further doctare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing, and to the best on ray knowledge and belief, it is true, cornect, and complete. I further doctare that the amounts in Part I above are the amounts from the income tax return (original or reseant or 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 on ray knowledge and belief, it is true, cornect, and complete. I further doctare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing and to the best on ray knowledge and belief, it is true, cornect, and complete. I further doctare that is amounts in Part I above are the amounts from the income software for any return. I amount of the transmission, (b) the research or any delay in processing the return or return, and (c) the date of any return. I amount of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the earth yet on the applicable of the payment of method with the financial institution account indicated in the tax premotes on Survey (c) (cancel) payment, I must contact the U.S. Treasury Financial Agent at trasses Says-452F, Payment cancellation requests must be received no later than 2 trasses days prior to the payment					
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	Spouse'	s name	Spouse's soc	ial secu	urity number
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	Dart	Tay Return Information — Tay Year Ending December 31 2022 (Enter	Vear vou a	re aut	thorizing)
Notes Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 13, 802.4 4 Amount you want refunded to you 5 Amount you want refunded to you 6 Amount you want refunded to you 7 Amount you want refunded to you 7 Amount you want refunded to you 8 Amount you want refunded to you 9 Amount you want you want you want you get and keep a copy of your return) 10 Amount you want refunded to you on wanthorizing, I consent to allow my intermediate sendice previously, transmission, the tensor to the previous of your your return (original or generated in the sex amined a copy of the income tax return (original or mended) I am now authorizing, and to the best on who 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, and to the best on who want to 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 (or a payment of estimated tax, and the financial institution account indicated in the tax preparation solvier for any delay in the financial institution account indicated in the tax preparation solvier for any delay in the financial institution account indicated in the tax preparation solvier for any delay in the financial institution account indicated in the tax preparation solvier for the inancial institution account indicated in the tax preparation and the financial institution account indicated in the tax preparation and the financial institution account indicated in the tax preparation and the financial institution account indicated a			year you a	i e au	inonzing.)
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Amount you want refunded to you				2	
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Taxpayer's PIN: check one box only	to send for any Agent t paymen authori paymen busines taxes t person	In my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indinated from the financial institution account indinated taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the I, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requise days prior to the payment (settlement) date. I also authorize the financial institutions involved in the oreceive confidential information necessary to answer inquiries and resolve issues related to the pall identification number (PIN) below is my signature for the income tax return (original or amended) I are	ction of the tr S. Treasury are cated in the ta in to debit the the authorizatests must be processing of ayment. I furt	ansmised and its control to the cont	ssion, (b) the reason designated Financial paration software for this account. This or revoke (cancel) a ved no later than 2 ectronic payment of knowledge that the
I authorize GLOBAL TAXES LLC 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 II below. Source's PIN: check one box only □ I authorize 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. □ I will enter my PIN as 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. □ 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 II below. Spouse's signature Partitioner 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 6 6 1 9 8 9 Don't enter all zeros 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.					
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·	ERO's	signature ▶ Date ▶			
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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.

Filing Status	X S	Single Married filing jointly	Marrie	ed filing separately	(MFS)	Head of	household (H	IOH)		lifying surv	iving
Check only	lf vo	u checked the MFS box, enter the	nome of v	our apouga. If you	ohook	ad tha UOU a	r OSS boy o	ntor th		use (QSS)	o auglifyina
one box.		son is a child but not your depender		rour spouse. It you	CHECK	ed the non o	QSS DOX, E	iilei lii	e criliu s	name ii iii	e qualifyirig
Your first name			Last nai	me					Your so	cial security	v numher
									Your social security number 769-45-6694		
SARVAGNA If joint return s		s first name and middle initial	Last nai	TIGIDDA					Spouse's social security number		
ii joint letuin, s	pouse	s instruarile and middle midal	Lastriai	THE STATE OF THE S					opouse	3 300101 300	unity mamber
Home address	(numbe	er and street). If you have a P.O. box, se	e instructio	ons.			Apt. no.		Preside	ntial Flection	on Campaign
		MON CIRCLE						1		nere if you,	. •
		ce. If you have a foreign address, also c	complete si	paces below.	Sta	te	ZIP code		spouse	if filing join	tly, want \$3
FAIRFAX		, , , , , , , , , , , , , , , , , , , ,					22031			this fund. (ow will not	Checking a
Foreign country	/ name		Foreign province/state/c				Foreign posta	l code		or refund.	change
						,				You Spouse	
Digital	At ar	ny time during 2022, did you: (a) re	ceive (as	a reward, award, c	r pavr	nent for prope	erty or service	es): or	(b) sell.		
Assets		ange, gift, or otherwise dispose of					-			Yes	⊠ No
Standard		eone can claim: You as a d							· ·		
Deduction		Spouse itemizes on a separate retu	•			•					
A ma /Dlindman	. V	Mayo have before leaven 0	1050 [Arabinal Co			un hafaua las		1050		
Age/Blindness			1936		oouse		rn before Jar			ls bli	instructions):
-	(see instructions): (1) First name Last name			(2) Social security number		(3) Relationsh to you	"P ' '	Child tax cred		,	ner dependents
If more than four	(1)	irst name Last name				,	Cilii		euit		
dependents,											┽──
see instructions	s —									L	┽──
and check here											┽──
	1a	Total amount from Form(s) W-2,	hox 1 (se	 					. 1a		2,248.
Income	b		,	,					1b		2,240.
Attach Form(s)	C	Household employee wages not reported on Form(s) W-2									
W-2 here. Also	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
attach Forms W-2G and	e	Taxable dependent care benefits from Form 2441, line 26									
1099-R if tax	f	Employer-provided adoption benefits from Form 8839, line 29							1e		
was withheld.	g	Wages from Form 8919, line 6.									
If you did not get a Form	h	Other earned income (see instruc							. 1g		0.
W-2, see	i	,	hbat pay election (see instructions)								
instructions.	z	Add lines 1a through 1h							. 1z	9	02,248.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	t		. 2b		
if required.	3a	Qualified dividends	3a		b C	rdinary divide					
	4a	IRA distributions	4a			axable amoun					
Standard	5a	Pensions and annuities	5a		b T	axable amoun	t		. 5b		
Deduction for —	6a	Social security benefits	6a		b T	axable amoun	t		. 6b		
Single or Married filing	С	If you elect to use the lump-sum election method, check here (see instructions)									
separately, \$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7		
Married filing	8	Other income from Schedule 1, li	her income from Schedule 1, line 10							-1	0,089.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income									32,159.
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26									
Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								8	32 , 159.
household, \$19,400	12	Standard deduction or itemized deductions (from Schedule A)								1	2,950.
If you checked	13	Qualified business income deduc	tion from	Form 8995 or For	m 899	5-A			. 13		
any box under Standard	14	Add lines 12 and 13							. 14	1 1	2 , 950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ero or less	s, enter -0 This is	your 1	axable incon	ne		15	6	59,209.

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12 002	
13,802. 2,955. 2,955.	
2,955.	
,	
× No	

Form 1040 (2022) **Tax** (see instructions). Check if any from Form(s): **1** 8814 **2** 4972 3 16 16 Tax and **Credits** 17 Amount from Schedule 2, line 3 17 Add lines 16 and 17 18 18 19 Child tax credit or credit for other dependents from Schedule 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, enter -0-22 Other taxes, including self-employment tax, from Schedule 2, line 21 23 23 Add lines 22 and 23. This is your total tax 24 24 **Payments** 25 Federal income tax withheld from: 13,802. Form(s) W-2 . 25a а Form(s) 1099 25b b Other forms (see instructions) 25c С 25d d Add lines 25a through 25c 26 2022 estimated tax payments and amount applied from 2021 return 26 If you have a 27 Earned income credit (EIC) 27 qualifying child, attach Sch. EIC. 28 Additional child tax credit from Schedule 8812 28 29 American opportunity credit from Form 8863, line 8. 29 30 30 Reserved for future use 31 Amount from Schedule 3, line 15 31 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 total payments 33 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 34 Refund Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a 35a Routing number 3 2 2 2 7 1 6 2 7 Direct deposit? b **c** Type: X Checking Savings See instructions. Account number 7 6 9 8 9 9 6 9 6 d 36 Amount of line 34 you want applied to your 2023 estimated tax . . . 36 Amount 37 Subtract line 33 from line 24. This is the amount you owe. You Owe For details on how to pay, go to www.irs.gov/Payments or see instructions . 37 Estimated tax penalty (see instructions) . . . Third Party Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. Designee Designee's Phone Personal identification number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and Sign 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 If the IRS sent you an Identity Your signature Date Your occupation Protection PIN, enter it here (see inst.) SOFTWARE ENGINEER Joint return? See instructions. If the IRS sent your spouse an Spouse's signature. If a joint return, both must sign. Date Spouse's occupation Keep a copy for Identity Protection PIN, enter it here your records. (see inst.) Phone no. (513)888-2733Email address SARVAGNA18@GMAIL.COM Preparer's name Preparer's signature PTIN Check if: Date **Paid** Self-employed SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/27/2023 P02082703 **Preparer** Phone no. (678) 965-9522

Firm's name

Firm's address

Use Only

GLOBAL TAXES LLC

245 ROONEY CT E BRUNSWICK NJ 08816

Firm's EIN

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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.

SARV	5-66	94							
Par	Part 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. Att	ach Schedule	E . L	5	-10,089.				
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							
	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-SF	, or 1040-NR	, line 8	10	-10 , 089.				

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:			
05		24z	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 .		00	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

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

OMB No. 1545-0074 Attachment Sequence No. 13

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

Your social security number

SARV	AGNA CHITTIGIDDA						769-	45-6694	
Part	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			c . See	instru	ctions. If you a	are an inc	lividual, rep	ort farm
	Did you make any payments in 2022 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city, state, ZIP code)								
Α	FATHENAGAR HYDERABAD TELANGANA IN 5	50001	18						
В									
С									
1b	(from list below) above, report the number of fair	above, report the number of fair rental				ir Rental Days	Perso D	QJV	
Α	gersonal use days. Check the Quiff you meet the requirements to	JV box	x only	A 365			0		
В	qualified joint venture. See instru	ine as actions	а S.	В					
С				С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (desci			
						Properti	es:	1	
Incon				Α	<u> </u>	В			С
3	Rents received	3		5	60.				
4 Evna	Royalties received	4							
Expei 5	Advertising	5							
6	Auto and travel (see instructions)	_		2	60				
7	Auto and travel (see instructions)								
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,3	56.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		2,6					
15	Supplies	15		3,4	58.				
16	Taxes	16							
17	Utilities	17		1,9	40.				
18	Depreciation expense or depletion	18							
19 20	Other (list) Total expenses. Add lines 5 through 19	20		10,6	10				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	20		10,0	ュク・				
21	result is a (loss), see instructions to find out if you must file Form 6198	21		-10,0	89.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		10,08		()()
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		560.		
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								
24	Income. Add positive amounts shown on line 21. Do no		-						40 '
25	Losses. Add royalty losses from line 21 and rental real esta							(10,089.)
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	apply	to you,	also er	nter th	is amount c			-10.089