# 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)    Earpyser's name				
Part II Tax Return Information — Tax Year Ending December 31, 2022 (Enter year you are authorizing.)  Fine the Mole Golfars only on lines 1 through 5.  Note: Form 1040-SS filter use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1	Submission Identification Number (SID)			
Spouse's script   Spouse's s	Taxpayer's name	Social securit	y number	
Spouse's series		749-74-	- -4264	
Enter whole dollars only on lines 1 through 5.  Note: Form 10:40-SS files 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) 10:99 3 1, 16, 75. 4 Amount you want refunded to you 4 1, 125. 5 Amount you want refunded to you 5 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 8 Amount you want refunded to you 9 Amount you 9 Amount you want refunded to you 9 Amount you want refunded to you 9 Amount		-		mber
Enter whole dollars only on lines 1 through 5.  Note: Form 10:40-SS files 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) 10:99 3 1, 16, 75. 4 Amount you want refunded to you 4 1, 125. 5 Amount you want refunded to you 5 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 8 Amount you want refunded to you 9 Amount you 9 Amount you want refunded to you 9 Amount you want refunded to you 9 Amount				
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income 2 Total tax 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 11, 675. 4 Amount you want refunded to you 4 1, 125. 5 Amount you want refunded to you 1 Adjusted group of your return) Under realities of perjury. I declare that I have examined a copy of the income tax return (original or amended) I am new authorizing and the best of the perjury of the properties of perjury. I declare that I have examined a copy of the income tax return (original or amended) I am new authorizing and the best of the perjury in the properties of perjury. I declare that I have examined a copy of the income tax return (original or amended) I am new authorizing in the perjury return or return (original or amended) I am new authorizing in the perjury return to return (original or amended) I am new authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (EFO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the mission (b) the term of the IRS (a) an acknowledgement of receipt or reason for receipt or reson for any delay in processing the return or return, and (c) the date of any return, If applicable, I authorize the U.S. Treasury and its designated Financial antibiotation or reson in fail from any delay to the financial institution account indicated in the preparation software for payment of my federal taxes over on this income and effect until 1 notify the U.S. Treasury financial institutions involved in the processing of the electronic payment of the payment. If the payment I always to the financial institutions involved in the processing of the electronic payment of the payment. If untern acknowledge that the parsonal identification number (Pilk) below is my signature for the income tax return (original or amended) I am now authorizing.    I will enter my PIN as my signature on the in		(Enter year you a	re authoriz	ing.)
1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 4 Amount you want refunded to you 4 1, 1, 125. 5 Amount you owe Part III 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 seamined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and bellef, 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, correct to allow my intermediate service provider, transmitter, or election return original or amended in my return to the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission (b) the reason or any delay in processing the return or return, and (c) the date of any return of 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 or any delay in processing the return or return, and (c) the date of any return 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 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 payment of the processing for to the payment federal accounts the financial institutions involved in the processing and or 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 present in the processing and the processing and the processing and the processing the 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 authori	,			
2 10,550.  3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 . 3 11,675.  4 Amount you want refunded to you . 4 1,125.  5 Amount you want refunded to you . 4 1,125.  5 Amount you owe . 4 1,125.  6 Amount you want refunded to you . 4 1,125.  5 Amount you want refunded to you . 4 1,125.  6 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)  1 Under penalties of perjuny. Ideclare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of your yellow in the last of the penalties of perjuny. Ideclare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of your delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury financial (fered teble) with to the financial institution account indicated in the tax preparation software for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury financial Agent at 148-88-834-857. 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 thurst 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.  1 authorize	·		اما	00 076
A Amount you want refunded to you	, ,			
Amount you want refunded to you  Amount you want refunded to you  Amount you want refunded to you  Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)  Under penalties of perlips, 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 whove the penalties of perlips, 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 the income tax return (original or amended) I am now authorizing, and to the best of your return or return, and (6) the cite of any return I applicable. I authorizer, or electronic return original or amended I am now authorizing, and to the best of any return I applicable. I authorizer, or electronic return original or any obey in processing better them or return, and (6) the cite of any return I applicable. I authorizer the U.S. Treasury Financial Institution account indicated in the tax preparation software for any dealth in declaration in the control of the control of the payment of the declaration 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, in trust contact the U.S. Treasury Financial Agent and Tessaury Financial Control to the payment of the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of the electronic Financial Institu				
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Spouse's PIN: check one box only  □ I authorize	Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or ammy knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, 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 Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution according authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to te 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 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 amend Electronic Funds Withdrawal Consent.  Taxpayer's PIN: check one box only  I authorize GLOBAL TAXES LLC to enter or general 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 find you are entering your own PIN and your return is filed using the Practitioner PIN below.	lended) I am now aut I above are the amo transmitter, or electro for rejection of the tr e the U.S. Treasury ar unt indicated in the stitution to debit the rminate the authorize on requests must be in the processing of the payment. I furt ed) I am now authori erate my PIN    Am now authorizing   Am now	horizing, and bunts from the price return oriansmission, (and its designate properties of the electronic her acknowled in a design and, if a design and its design an	to the best of e income tax ginator (ERO) b) the reason ated Financial or software for account. This ske (cancel) a clater than 2 c payment of edge that the pplicable, my as my but os only
I authorize	Your signature ► Dat	e ►		
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   ☐ Practitioner 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.  ☐ On't enter all zeros  ☐ 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  ☐ Date ☐ ERO Must Retain This Form — See Instructions	Spouse's PIN: check one box only			
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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 8 9 5 2 3 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.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions	I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN			
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.  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.  ERO's signature ▶ Date ▶  ERO Must Retain This Form — See Instructions	Spouse's signature ▶ Dat	re ▶		
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ERO Must Retain This Form — See Instructions	authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am	n submitting this retu	rn in accorda	ance with the

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

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OMB No. 1545-0074

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

Filing Status Check only	s 🗌 S	Single Married filing jointly	Marrie	ed filing separately	(MFS)	☐ Head of	household (HOH)		alifying use (C	g surviv OSS)	ing
one box.		u checked the MFS box, enter the nonis a child but not your dependent	-	our spouse. If you LA RESHMANJALI 1			QSS box, enter t				qualifying
Your first name	and mi	ddle initial	Last nar	me				Your so	ocial se	curity	number
BALA RAI	NJITE	H REDDY	GOPU					749-	74-4	1264	
If joint return, s	pouse's	first name and middle initial	Last nar	me				Spouse	's soci	al secu	rity number
								200-	21-5	5091	
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.			Apt. no.	Preside	ntial E	lection	Campaign
20503 PI	RAIRI	IE CYPRESS DR								you, o	•
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	paces below.	Sta	te	ZIP code		,		y, want \$3 hecking a
CYPRESS					T	ζ	77433			II not ch	
Foreign country	y name		F	oreign province/state	e/count	ty	Foreign postal code	your ta	x or re	fund.	· ·
									\	You	Spouse
Digital Assets		y time during 2022, did you: (a) recange, gift, or otherwise dispose of a	,				, , , , , , , , , , , , , , , , , , , ,	, ,		Yes	⊠ No
Standard		eone can claim: You as a de		<u></u>		a dependent					
Deduction		Spouse itemizes on a separate retur		•		•					
Age/Blindness	s You:	Were born before January 2, 1	958	Are blind S	pouse	: Was bor	n before January			Is bline	
Dependent				(2) Social secur	ity	(3) Relationsh		•	1	•	•
If more	<b>(1)</b> Fi	rst name Last name		number		to you	Child tax	credit	Credit	for other	r dependents
than four dependents,										<u>_</u>	<u> </u>
see instruction	s								<u> </u>	—⊨	<u> </u>
and check	, —									<u>-</u>	<u></u>
here	1										<u> </u>
Income	1a	Total amount from Form(s) W-2, b	,	,				. 18		85	5 <b>,</b> 939.
Attach Form(s)	b	Household employee wages not re	•	` '				. 11			
W-2 here. Also	С.	Tip income not reported on line 1a						. 10			
attach Forms	d	Medicaid waiver payments not rep		` ,	e instru	ictions)		. 10			
W-2G and 1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26									
was withheld.	f	Employer-provided adoption bene			29 .			. 11			
If you did not	g	Wages from Form 8919, line 6 .						. 19			
get a Form W-2, see	h	Other earned income (see instruct	,					. 11	1		0.
instructions.	i	Nontaxable combat pay election (s	see instr	fuctions)		<u>li</u>				0.5	- 020
	<u>z</u>	Add lines 1a through 1h		· · · · · · · · · · · · · · · · · · ·				. 12		85	5,939.
Attach Sch. B if required.	2a	· -	2a	62.		axable interes		. 21			38.
ii required.	3a		3a	02.		ordinary divide		. 3l			112.
	4a	<del>-</del>	4a			axable amoun					
Standard Deduction for—	5a	<del>-</del>	5a			axable amoun axable amoun		. 5l			
Single or	6a	,	6a	nothed shook her			t	. 6l	<u>'</u>		
Married filing separately,	С 7	If you elect to use the lump-sum e Capital gain or (loss). Attach Sche		·	,	,				,	1 077
\$12,950 Married filing	8	Other income from Schedule 1, lin		· · · · · · ·				. 8			<u>4,977.</u> 0,090.
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						. 9			),976.
Qualifying surviving spouse,	10	Adjustments to income from Sche		•				. 10			1,310.
\$25,900	11	Subtract line 10 from line 9. This is	-					. 1			976.
Head of household,	12	Standard deduction or itemized						. 12			2 <b>,</b> 950.
\$19,400 If you checked	13	Qualified business income deduct		•	,			. 13			1.
any box under	14									1 0	2,951.
Standard Deduction,	15	Subtract line 14 from line 11. If zer									3,025.
see instructions.			2 0. 1000	., 5 : 1111010	,			·   '	-		,,020.

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	10,550.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	10,550.
	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	10,550.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	10,550.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				<b>25a</b> 11	1,675.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	11,675.
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 <b>to</b>	tal payments				33	11,675.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	1,125.
riorana	35a	Amount of line 34 you want			is attached, che	ck here	🗌	35a	1,125.
Direct deposit?	b	Routing number 3 2 2			c Type: 🛛	Checking	Savings		
See instructions.	d	Account number 6 7 5	3 7 3 3	5 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 I	nelow.	X No
200.900	De	signee's		Phone			sonal identi		
	nai	me		no.		num	ber (PIN)		
Sign Here		der penalties of perjury, I declare tilef, they are true, correct, and com			1 , 0		,		, ,
Here	Yo	ur signature		Date	Your occupation				nt you an Identity
					   SOFTWARE	ZNCTNEED		ection P inst.)	IN, enter it here
Joint return? See instructions.	Sn	ouse's signature. If a joint return,	hoth must sign	Date	Spouse's occupat				t your spouse an
Keep a copy for your records.	Ор	ouse s signature. If a joint return,	oour mast sign.	Bate	орошос о осоцран	1011	Iden		ection PIN, enter it here
	Ph	one no. (754) 260-842	4	Email address	RAJUKNOW0:	14@GMAIL.CO	DM MC		
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	04/06/2023	P0208	2703	Self-employed
Preparer	Fin	m's name GLOBAL TA	XES LLC			•	Phor	ne no. (	(678) 965-9522
Use Only	Fin		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
Seguence No. 01

Department of the Treasury Internal Revenue Service

BALA RANJITH REDDY GOPU

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. <b>01</b>
Your soc	ial security number
749-74	-4264

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	-10,090.
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 other income. Add lines to through the	8z	0	
9 10	Total other income. Add lines 8a through 8z		9 10	-10,090.
IU	Combine lines i unough $i$ and $g$ . Enter here and on Form 1040, 1040-5K,	OI TO4O-IND, IIIIE O	10	-10 <b>,</b> 090.

Schedule 1 (Form 1040) 2022 Page **2** 

Par	II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b			
	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	, ,, ,, , , , , , , , , , , , , , , ,	4a		
b	Deductible expenses related to income reported on line 8l from the			
		4b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	·	4c		
d		4d		
е	Repayment of supplemental unemployment benefits under the Trade			
		4e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	4g		
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			
		24i	_	
J		24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	41-		
_	,	4k	_	
Z	Other adjustments. List type and amount:	4z		
25			05	
25 26	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> . E		26	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u> </u>		

#### SCHEDULE D (Form 1040)

Name(s) shown on return

#### **Capital Gains and Losses**

Attach to Form 1040, 1040-SR, or 1040-NR.

| 202

Your social security number

Department of the Treasury Internal Revenue Service

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Attachment Sequence No. **12** 

OMB No. 1545-0074

749-74-4264 BALA RANJITH REDDY GOPU Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked . . . . . . . . . . . . . . 14,281. 9,721. 0. 4,560. Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . 3 Totals for all transactions reported on Form(s) 8949 with Box C checked . . . . . . . . . . . . . . . . . 25. 59. -34. Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . . . . . 7 4,526. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (or other basis) Form(s) 8949, Part II, (sales price) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with Box D checked . . . . . . . . . . . . . 2,194. 280. 2,365. 451. 9 Totals for all transactions reported on Form(s) 8949 with 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15 451.

BAA

Schedule D (Form 1040) 2022 Page 2

#### Part III Summary 4,977. 16 Combine lines 7 and 15 and enter the result 16 • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? X Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet . . . . . . . . . . . . . . . . . . 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

### **Sales and Other Dispositions of Capital Assets**

Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074 Attachment

Social security number or taxpayer identification number

749-74-4264

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

BALA RANJITH REDDY GOPU

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Sequence No. 12A

Before you check Box A, B, or C belo statement will have the same informa broker and may even tell you which b	tion as Form	er you receive 1099-B. Either	ed any Form(s) 109 will show whether	99-B or substitute er your basis (usua	statement(s ally your cost	s) from your broke t) was reported to	r. A substitute the IRS by your
Short-Term. Transinstructions). For lo Note: You may agg reported to the IRS Schedule D, line 1a	ng-term tra regate all s and for wh	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or cod	oorted on Form les are required	(s) 1099-E d. Enter th	showing basi e totals directly	s was y on
You must check Box A, B, or C I complete a separate Form 8949, p for one or more of the boxes, com  (A) Short-term transactions (B) Short-term transactions (C) Short-term transactions	below. Checo page 1, for ea aplete as man reported on reported on	k only one k ach applicable by forms with Form(s) 1099 Form(s) 1099	box. If more than le box. If you have the same box of 3-B showing bas 3-B showing bas	n one box applies we more short-te checked as you r sis was reported	s for your s rm transacheed. to the IRS	hort-term transa tions than will fit (see <b>Note</b> above	ctions, on this page
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a c	if any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	14,281.	9,721.	W	0.	4,560.
2 Totals. Add the amounts in columns	s (d), (e), (g), and	d (h) (subtract					

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

14,281.

negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

above is checked), or line 3 (if Box C above is checked) .

9,721.

Form 8949 (2022) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side BALA RANJITH REDDY GOPU

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E

above is checked), or line 10 (if Box F above is checked) .

Social security number or taxpayer identification number 749-74-4264

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

🔀 (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions	not reported	to you on Fo	rm 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	2,365.	2,194.	W	280.	451.

**Note:** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

280.

451.

2,365.

2,194.

# 8949

#### **Sales and Other Dispositions of Capital Assets**

Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. OMB No. 1545-0074 Attachment Sequence No. 12A

Department of the Treasury Internal Revenue Service

Social security number or taxpayer identification number

BALA RANJITH REDDY GOPU

statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your

749-74-4264 Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute broker and may even tell you which box to check. Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS X (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). (d) Cost or other basis Gain or (loss) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired disposed of and see Column (e) (sales price) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (Mo., day, yr.) combine the result (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions. with column (a). instructions 01/01/22 12/31/22 25. 59. -34.

ROBINHOOD SECURITIES LLC 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B 25. 59. -34. above is checked), or line 3 (if Box C above is checked) .

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

#### **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

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

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s	s) shown on return						Your socia	al security	number
BALA	A RANJITH REDDY GOPU						749-7	4-4264	
Par	Income or Loss From Rental Real Estate Note: If you are in the business of renting personal pro rental income or loss from Form 4835 on page 2, line	perty, use		e C. See	instruc	ctions. If you ar	re an indiv	vidual, rep	ort farm
Α	Did you make any payments in 2022 that would require y	ou to file	Form(s)	1099? 5	See ins	tructions		. <u>Y</u> e	s 🛚 No
	If "Yes," did you or will you file required Form(s) 1099?								
1a	Physical address of each property (street, city, state,								
					<u> </u>	2.0			
_ <u>A</u>	5-213, REDDYPURAM HASANPARTHY WARANG	JAL, TE	LANGANA	A IN	50600	)2			
B									
C						T			
1b	Type of Property (from list below)  2 For each rental real estate property above, report the number of f				Fa	ir Rental	Person		QJV
						Days	Da		
_ <u>A</u>	ja personal use days. Check the if you meet the requirements			_ A		365		0	
B	qualified joint venture. See ins			В					
C	-f Duan auton			С					
	of Property:		5 l		7	O-If Dt-I			
	Single Family Residence 3 Vacation/Short-Term F	Rentai	5 Land			Self-Rental	:l= =\		
2	Multi-Family Residence 4 Commercial		6 Roya	aities	8	Other (descri	ibe)		
						Propertie	es:		
Incon	ne:			Α		В			С
3	Rents received	. 3		6	24.				
4	Royalties received	. 4							
Expe	nses:								
5	Advertising	. 5							
6	Auto and travel (see instructions)	. 6							
7	Cleaning and maintenance	. 7		2,6	51.				
8	Commissions	. 8							
9	Insurance	. 9							
10	Legal and other professional fees	. 10							
11	Management fees	. 11		1,9	24.				
12	Mortgage interest paid to banks, etc. (see instructions	s) <b>12</b>							
13	Other interest	. 13							
14	Repairs	. 14		2,5	26.				
15	Supplies	. 15		1,7	43.				
16	Taxes	. 16							
17	Utilities	. 17		1,8	70.				
18	Depreciation expense or depletion	. 18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	. 20		10,7	14.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties).								
	result is a (loss), see instructions to find out if you mu	I .							
	file <b>Form 6198</b>			-10,0	90.				
22	Deductible rental real estate loss after limitation, if ar								
	on Form 8582 (see instructions)		(	10,09			)	(	)
<b>23</b> a	Total of all amounts reported on line 3 for all rental pro	•			23a		624.		
b	Total of all amounts reported on line 4 for all royalty p	-			23b				
C	Total of all amounts reported on line 12 for all propert				23c				
d	Total of all amounts reported on line 18 for all propert				23d				
е	Total of all amounts reported on line 20 for all propert				23e	10,	,714.		
24	<b>Income.</b> Add positive amounts shown on line 21. <b>Do</b>		•				. 24		
25	Losses. Add royalty losses from line 21 and rental real e							(	10,090.
26	Total rental real estate and royalty income or (los								
	here. If Parts II, III, IV, and line 40 on page 2 do n						1 1		10 000
	Schedule 1 (Form 1040), line 5. Otherwise, include this	s arnouni	ı ın the to	ıaı on II	ne 4 I	on page 2 .	26		-10,090.

# Form **8995**

Department of the Treasury

Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2022

Attachment Sequence No. **55** 

Name(s) shown on return

BALA RANJITH REDDY GOPU

Your taxpayer identification number
749-74-4264

**Note.** You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$170,050 (\$340,100 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number		Qualified business ncome or (loss)
i				
ii				
iii				
iv				
- 14				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v,			
	column (c)	2		
3	Qualified business net (loss) carryforward from the prior year	3 (		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4		
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)			
	(see instructions)	<b>6</b> 5.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior			
	year	7 (		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero			
	or less, enter -0	<b>8</b> 5.		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	1.
10	Qualified business income deduction before the income limitation. Add lines 5 an	d 9	10	1.
11	Taxable income before qualified business income deduction (see instructions)	<b>11</b> 68,026.		
12	Net capital gain (see instructions)	<b>12</b> 513.		
13	Subtract line 12 from line 11. If zero or less, enter -0	<b>13</b> 67,513.		
14	Income limitation. Multiply line 13 by 20% (0.20) $\cdot$		14	13,503.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also			
	the applicable line of your return (see instructions)		15	1.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16 (	0.)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a	nd 7. If greater than		
	zero, enter -0		17 (	0.)

## (Rev. November 2019) Department of the Treasury Internal Revenue Service (99)

### **Allocation of Tax Amounts Between Certain Individuals in Community Property States**

OMB No. 1545-0074

► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/Form8958 for the latest information.

Attachment Sequence No. **63** 

nternal Revenue Service (99)	Go to www.irs.gov/Form8958 for the lat	est information.	Sequence No. 03
Your first name and initial	Your last name		Your social security number
BALA RANJITH REDDY	GOPU		749-74-4264
Spouse's or partner's first name and initial	Spouse's or partner's last name	)	Spouse's or partner's social security number
BALA RESHMANJALI	THUMMA		200-21-5091
	A Total Amount	B Allocated to Spouse or RDP	C Allocated to Spouse or RDP
		SSN 749 74 4264	SSN 200 21 5091
1 Wages (each employer)			
NITCO	85,939.	85,939.	
2 Interest Income (each payer) ROBINHOOD SECURITIES LLC	38.	38.	
3 Dividends (each payer) ROBINHOOD SECURITIES LLC	112.	112.	
NODINICOD BECONTITED BEC	112.	112.	
4 State Income Tax Refund			
5 Self-Employment Income (See instruct	tions)		
6 Capital Gains and Losses from Form 1040, line 6	4,977.	4,977.	
7 Pension Income			
8 Rents, Royalties, Partnerships, Estates from Form 1040, Schedule 1,		-10,090.	
Tom Torm 1040, Deficuate 1,	10,090.	10,000.	
or Denominant Dedication Act Notice	tav vatuus laatuustlana 🕒		- 00E0 /D 44 0/

Form 8958 (Rev. 11-2019)

	A Total Amount	B Allocated to Spouse or RDP	C Allocated to Spouse or RDP
		SSN 749 74 4264	SSN 200 21 5091
Deductible part of Self-Employment Tax (See instructions)			
10 Calf Employment Tay (Can instructions)			
10 Self-Employment Tax (See instructions)			
11 Taxes Withheld			
from Form 1040, line 17	11,675.	11,675.	
40 Other items and an Carial Convity Density			
12 Other items such as: Social Security Benefits, Unemployment Compensation, Deductions, Credits, etc.			