## 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

	5.1.00								
Submiss	ion Identification Number (SID)								
Taxpayer's	name	Social securit	Social security number						
SUMAT	EJA KALAPALA	753-82	753-82-5572						
Spouse's n			Spouse's social security number						
Part I	Tax Return Information — Tax Year Ending December 31, 2022 (	 Enter year you a	re aut	horizina	1.)				
,	ole dollars only on lines 1 through 5.				-/				
	orm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.								
	djusted gross income		1	50	0,943.				
2 T	otal tax ...............................		2	4	4,352.				
3 F	ederal income tax withheld from Form(s) W-2 and Form(s) 1099		3	6	5,889.				
<b>4</b> A	mount you want refunded to you		4	2	2,537.				
	mount you owe		5						
Part II	Taxpayer Declaration and Signature Authorization (Be sure you get a	and keep a cop	y of y	our retu	ırn)				
return (ori to send m for any de Agent to i payment o authorizat payment, business taxes to i personal i	ledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I ginal or amended) I am now authorizing. I consent to allow my intermediate service provider, to my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason felay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize nitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation days prior to the payment (settlement) date. I also authorize the financial institutions involved receive confidential information necessary to answer inquiries and resolve issues related to identification number (PIN) below is my signature for the income tax return (original or amended Funds Withdrawal Consent.	ransmitter, or electro or rejection of the transmitter. Treasury a nt indicated in the trastitution to debit the minate the authorizan requests must be in the processing of the payment. I further or the transmitter of the payment.	onic retronic retronic retronic retronic distribution. The receivable receivable receivation and retronic receivation and retronic receivation and retronic	urn origina sion, (b) to lesignated aration so this according to the control of t	ator (ERO) the reason d Financial oftware for count. This (cancel) a ter than 2 ayment of e that the				
	er's PIN: check one box only				]				
	Tauthorize GLOBAL TAXES LLC to enter or gene	erate my PIN	5 5	7 2	as my				
_	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ž En		digits, but r all zeros	ao my				
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.								
Your sigi	nature ▶ Date	· <b></b>							
Spouse'	s PIN: check one box only								
-	I authorize to enter or gene	erate my PIN			as my				
	ERO firm name	,	Enter five digits, but						
	signature on the income tax return (original or amended) I am now authorizing.	do	n't entei	r all zeros					
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.								
Spouse's	s signature ▶ Date	•							
	Practitioner PIN Method Returns Only—continue b	elow							
Part III	Certification and Authentication — Practitioner PIN Method Only								
ERO's E	FIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5 1 8 9 5 Don't ent	2 3 er all ze		8 9				
authorized	nat the above numeric entry is my PIN, which is my signature for the electronic individual incode to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I aments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Provider	submitting this retu	ırn in a	ccordanc					
ERO's si	gnature ► Date	e <b>&gt;</b>							
	ERO Must Retain This Form — See Instruction								
	Don't Submit This Form to the IRS Unless Requested	To Do So							

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

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 (N	(IFS)	Head of	household	(HOH)			ying survi se (QSS)	ving	
one box.	If yo	u checked the MFS box, enter the na	ame of y	our spouse. If you ch	necke	ed the HOH or	QSS box	, enter			` ,	e qualifying	
	pers	on is a child but not your dependent	: PA	AVAN MARGANA					_				
Your first name and middle initial				me					Your	Your social security number			
SUMATEJA			KALA	PALA					753	753-82-5572			
If joint return, s	pouse's	first name and middle initial	Last na	me					Spou	Spouse's social security number			
									669-62-1101				
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Apt. r	10.	Presi	Presidential Election Campaig			
10866 DO	YNWC	CUP DR								Check here if you, or your			
City, town, or p	ost offic	ce. If you have a foreign address, also co	emplete spaces below. State			ZIP code			spouse if filing jointly, want \$3 to go to this fund. Checking a				
FRISCO			TX				75035		-		w will not c	•	
Foreign country name			Foreign province/state/county			Foreign postal code yo		your	your tax or refund.				
									☐ You ☐ Spouse				
Digital	At an	ny time during 2022, did you: (a) rece	eive (as	a reward, award, or	paym	ent for prope	rty or serv	rices); d	or (b) se	II,	_		
Assets	exch	ange, gift, or otherwise dispose of a	digital	asset (or a financial i	ntere	st in a digital	asset)? (S	ee inst	ructions	s.)	Yes	⊠ No	
Standard		eone can claim:				a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien								
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	rn before c	January	2, 1958	3	☐ Is blir	nd	
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	nip (4) Ch	eck the	box if qu	alifie	s for (see ir	nstructions):	
If more	•	(1) First name Last name		number		to you	. c	Child tax cred		C	redit for othe	er dependents	
than four													
dependents,	_											]	
see instructions and check	s —											]	
here	]												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instructions)						1a	5	0,943.	
moonic	b	Household employee wages not re	eported	on Form(s) W-2						1b			
Attach Form(s)	С	Tip income not reported on line 1a (see instructions)								1c			
W-2 here. Also attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d			
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26								1e			
1099-R if tax was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29								1f			
If you did not	g	Wages from Form 8919, line 6 .								1g			
get a Form	h	Other earned income (see instructions)							1h		0.		
W-2, see instructions.	i	Nontaxable combat pay election (see instructions)											
	Z	Add lines 1a through 1h								1z	5	0,943.	
Attach Sch. B	2a	Tax-exempt interest	2a		<b>b</b> Ta	xable interes	t		. 🔯	2b			
if required.	3a	Qualified dividends	3a		<b>b</b> Or	dinary divide	nds		. 📙	3b			
	4a	IRA distributions	4a		<b>b</b> Ta	xable amoun	t		. L	4b			
Standard	5a	Pensions and annuities	5a		<b>b</b> Ta	xable amoun	t			5b			
Deduction for— Single or	6a	Social security benefits	6a		<b>b</b> Ta	xable amoun	t			6b			
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, line 10								8			
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								9	5	0,943.	
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26								10			
Head of	11	Subtract line 10 from line 9. This is your adjusted gross income								11	5	0,943.	
household, \$19,400	12	Standard deduction or itemized deductions (from Schedule A)								12	1	2,950.	
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A								13			
Standard	14	Add lines 12 and 13								14		2,950.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>								15	3	7,993.	

Form 1040 (2022	2)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	4,352.
Credits	17	Amount from Schedule 2, lir					[	17	
	18	Add lines 16 and 17					[	18	4,352.
	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	B. If zero or less,	enter -0			[	22	4,352.
	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	4,352.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				<b>25a</b> 6	,889.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c	•					25d	6,889.
	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	m Schedule 8812	2		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				indable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments			[	33	6,889.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amour	nt you <b>overpaid</b>		34	2,537.
neiuliu	35a	Amount of line 34 you want	refunded to you	یا. If Form 8888	is attached, ched	ck here	. 🗆 🛚	35a	2,537.
Direct deposit?	b	Routing number 1 1 1	0 0 0 6	1 4	c Type: 🛛	Checking S	Savings		
See instructions.	d	Account number 8 6 5	0 2 0 6	2 9					
	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				38			
Third Party Designee		you want to allow another	person to disc	cuss this retu			mplete be	low.	X No
	De	signee's		Phone		Perso	nal identific	ation	
-	naı	me		no.		numb	er (PIN)		
Sign Here		der penalties of perjury, I declare tief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		I		nt you an Identity
				HOME MAKED			(see in		IN, enter it here
Joint return? See instructions.	Sn	Spouse's signature. If a joint return, <b>both</b> must sign.		HOME MAKER  Date Spouse's occupation			`		at vour enquee an
Keep a copy for your records.	====== = o.ga.a.o a joint rotari, <b>sour</b> must olgi.		Opouso 3 occupation			Identity	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Ph	one no. (732)666-536	7	Email address	SAYHI2PAVA	N@GMAIL.CO	M .		
Daid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/31/2023	P020827	703	Self-employed
Preparer		m's name GLOBAL TA	1						678)965-9522
Use Only	Fire		Y CT E BRU	NSWICK N	J 08816		Firm's	EIN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV 03/22/23 PRO			Form <b>1040</b> (2022)