Form <b>8879</b>
(Rev. January 2021)

#### Department of the Treasury Internal Revenue Service

### **IRS e-file Signature Authorization**

▶ ERO must obtain and retain completed Form 8879. moor the latest int ation.

Go to	www.irs	.gov/Fo	rm8879	for the	e latest	tinform

Submission Identification Number (SID)		222496202306007bg9yl
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Taxpayer's name	Social security number
PRAVEEN KUMAR VADDE	705-51-9800
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2022 (Ent	er year you are authorizing.)
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.	
<b>1</b> Adjusted gross income	<b>1</b> 142,634.
<b>2</b> Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	· · · · <b>3</b> 24,033.
4 Amount you want refunded to you	<b>4</b> 24,375.
<b>5</b> Amount you owe	5

#### Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. 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 my 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. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send 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 for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for 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 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, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. 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 further acknowledge that the 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.

### Taxpayer's PIN: check one box only

I authorize	GLOBAL TAXES LLC	to enter or generate my PIN
	ERO firm name	

1	9	8	0	0	
Ent don	er fiv n't er	/e di iter a	gits, all ze	but ros	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 III below.

Your signature 🕨

X

Date 🕨

#### Spouse's PIN: check one box only

I authorize

to enter or generate my PIN	to	enter	or	generate	my	PIN
-----------------------------	----	-------	----	----------	----	-----

as mv Enter five digits, but don't enter all zeros

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 D							 		
Practitioner PIN Method Returns Only—contir	ue be	low							
Part III Certification and Authentication – Practitioner PIN Method Onl	/								
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		 	6 all ze	 9	89	)

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 🕨										
Don't											
For Deperture Reduction Act Nation	an your tox return instructions		REV 02/24/22 RBO	Earm 8879 (Pov. 01 2021)							

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/24/23 PRO

E1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		<sub>m</sub> 202	2	OMB No. 1545	-0074	IRS Use On	y—Do not v	vrite or staple i	n this space.
Filing Status Check only one box.		Single D Married filing jointly under the marked the MFS box, enter the marked the MFS box.	_	filing separately (N ur spouse. If you cl	,			. ,	spo	alifying surv use (QSS) s name if th	0
		on is a child but not your dependent		i y							. , ,
Your first name	and m	iddle initial	Last name	9					Your so	ocial securit	y number
PRAVEEN	KUM	AR	VADDE						705-	51-9800	)
lf joint return, s	pouse's	s first name and middle initial	Last name	9					Spouse	's social sec	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instructions	S.			A	Apt. no.			on Campaign
1950 ALA	AMANI	DINE AVE								here if you,	or your tly, want \$3
City, town, or p AUBREY	oost offi	ce. If you have a foreign address, also co	omplete spa	ces below.	Sta TΣ		ZIP c 762		to go to	o this fund.	Checking a
Foreign country	y name		For	reign province/state/o				in postal code		low will not x or refund.	•
										You	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a					-		. ,	Yes	🗙 No
Standard	Som	eone can claim: 🗌 You as a de	pendent	Your spouse	e as	a dependent	,		,		
Deduction		Spouse itemizes on a separate retur	n or you w	vere a dual-status	alien	1					
		Were born before January 2, 1	958	Are blind Spc	ouse			ore January	,	Is bli	-
Dependents	- (	instructions): irst name Last name		(2) Social security number	,	(3) Relationsh to you	ip (4	Check the I Child tax		1	instructions): ner dependents
lf more than four	(1)1	Lasthame							orcon		
dependents,										Г П	1
see instruction	s ——									<u> </u>	1
here	]										
Income	<b>1</b> a	Total amount from Form(s) W-2, b	ox 1 (see i	nstructions) .					. 18	<b>a</b> 14	12,634.
	b	Household employee wages not re							. <u>1</u> k		
Attach Form(s) W-2 here. Also	c	Tip income not reported on line 1a (see instructions)    .    .    .    .    .    .						. 10			
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 10		
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							. 16		
was withheld.	f	Employer-provided adoption bene		-	•		• •		. 11		
If you did not	g	Wages from Form 8919, line 6 .					• •		. 10		
get a Form W-2, see	h	Other earned income (see instruct	,			· · · ·	· ·		. <u>1</u> ł	1	0.
instructions.	i	Nontaxable combat pay election (s	see instruc	ctions)		<b>1</b> i					
	Z		· · ·	· · · · · ·	• •		• •		. 12		12,634.
Attach Sch. B	2a	· -	2a			axable interest			. 2k		
if required.	3a		3a			ordinary divider			. 3k		
	4a		4a			axable amoun			. 4k		
Standard Deduction for—	5a		5a			axable amoun			. 5k		
Single or	6a	,	6a			axable amoun	t		. <u>6</u> k	)	
Married filing separately,	c	If you elect to use the lump-sum e					• •				
\$12,950	7	Capital gain or (loss). Attach Schee					• •				
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin					• •		. 8		
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		•			• •		. 9		12,634.
surviving spouse, \$25,900	10	Adjustments to income from Sche					• •		. 10		
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is					• •		. 11		12,634.
\$19,400	12	Standard deduction or itemized		,	,		• •		. 12		L2,950.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deduct							. 13		
Standard Deduction,	14	Add lines 12 and 13							. 14		<u>12,950.</u>
see instructions.	15	Subtract line 14 from line 11. If zer	U OF IESS,	enter -U I NIS IS Y	our	laxable incom	е.		. 15		29,684.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

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	24,960.
Credits	17	Amount from Schedule 2, lin	ie3					17	
	18	Add lines 16 and 17						18	24,960.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	24,960.
	21	Add lines 19 and 20						21	24,960.
	22	Subtract line 21 from line 18						22	0.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is						24	0.
Payments	25	Federal income tax withheld							
. aj mente	а	Form(s) W-2				<b>25a</b> 24	4,033.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions				25c		-	
	d	Add lines 25a through 25c						25d	24,033.
	26	2022 estimated tax payment						26	
If you have a l qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28		-	
)	29	American opportunity credit				29		-	
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3, lin				31	342.	-	
	32	Add lines 27, 28, 29, and 31						32	342.
	33	Add lines 25d, 26, and 32. T	•	-	-			33	24,375.
	34	If line 33 is more than line 24						34	24,375.
Refund		Amount of line 34 you want				•	· ·	35a	24,375.
Direct deposit?	35a b	Routing number 3 2 2						358	21,575.
See instructions.		Account number 6 8 0				Checking	Savings		
	d								
A	36	Amount of line 34 you want a				36		-	
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						07	
Tou Owe						1 1		37	
	38	Estimated tax penalty (see in				38			
Third Party		you want to allow another	•				omplete	bolow	× No
Designee		signee's		Phone			onal identi		
	nai			no.			ber (PIN)	lication	
Sign	Un	der penalties of perjury, I declare t	hat I have examine	ed this return and	d accompanving sch	edules and stateme	nts. and to	the bes	t of mv knowledge and
-	bel	ief, they are true, correct, and com	plete. Declaration	of preparer (othe	r than taxpayer) is b	ased on all informati	on of whic	n prepar	er has any knowledge.
Here	Yo	ur signature		Date	Your occupation				nt you an Identity
								ection P inst.)	IN, enter it here
Joint return? See instructions.					SOFTWARE		`	,	
Keep a copy for	Sp	ouse's signature. If a joint return, <b>t</b>	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an ection PIN, enter it here
your records.								inst.)	
	Ph	one no. (510)676-514	8	Email address	VADDEPRAVEE	N525@GMAIL.C	 MC		
		eparer's name	Preparer's signat			Date	PTIN		Check if:
Paid		ATA SAI PAVAN KUMAR DUDIPALLI	VENKATA SAT	PAVAN KIIN	IAR DUDIPALLI	03/03/2023	P0247	0833	Self-employed
Preparer		m's name GLOBAL TAX					<u> </u>		678)965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816			's EIN	88-2145487
Go to www.im.a		n1040 for instructions and the late					1	5 = 111	Eorm <b>1040</b> (2022)

Go to *www.irs.gov/Form1040* for instructions and the latest information.

REV 02/24/23 PRO BAA

Form **1040** (2022)

Department of the Treasury

# **Additional Credits and Payments**

OMB No. 1545-0074

2

20

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

	nent of the Treasury Revenue Service						
		rm 1040, 1040-SR, or 1040-NR					curity number
	TTI Nonre	fundable Credits			705-5	1-98	00
1		credit. Attach Form 1116 if required				1	
2	0	child and dependent care expenses from Form 244				•	
	Form 2441		· ·			2	
3	Education c	redits from Form 8863, line 19				3	
4	Retirement	savings contributions credit. Attach Form 8880				4	
5	Residential	energy credits. Attach Form 5695			[	5	24,960.
6	Other nonre	fundable credits:					
а	General bus	siness credit. Attach Form 3800	6a				
b	Credit for p	rior year minimum tax. Attach Form 8801	6b				
С	Adoption cr	edit. Attach Form 8839	6c				
d	Credit for th	e elderly or disabled. Attach Schedule R	6d				
е	Alternative r	motor vehicle credit. Attach Form 8910	6e				
f	Qualified plu	ug-in motor vehicle credit. Attach Form 8936	6f				
g	Mortgage ir	terest credit. Attach Form 8396	6g				
h	District of C	olumbia first-time homebuyer credit. Attach Form 8859	6h				
i	Qualified ele	ectric vehicle credit. Attach Form 8834	6i				
j	Alternative f	uel vehicle refueling property credit. Attach Form 8911	6j				
k	Credit to ho	Iders of tax credit bonds. Attach Form 8912	6k				
I	Amount on	Form 8978, line 14. See instructions	61				
z	Other nonre	fundable credits. List type and amount:					
			6z				
7	Total other	nonrefundable credits. Add lines 6a through 6z				7	
8		through 5 and 7. Enter here and on Form 1040, 1040	)-SR,	or 1040-	NR,		
	line 20		• •		•••	8	24,960.
For Pr	perwork Reduct	ion Act Notice, see your tax return instructions.		EV 02/24/23 PRO			ed on page 2) 3 (Form 1040) 2022
		Ion Act Notice, see your tax return instructions. BAA	IX E	- V UZ/2-+/20 F'RU		Sincuale	0 (1 0111 1040) 2022

Schedu	le 3 (Form 1040) 2022			Page <b>2</b>
Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions)		10	
11	Excess social security and tier 1 RRTA tax withheld		11	342.
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b		
с	Reserved for future use	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Reserved for future use	13g		
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 2021	13h		
z	Other payments or refundable credits. List type and amount:	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	0-SR, or 1040-NR,	15	342.
	BAA REV	02/24/23 PRO	Schedul	e 3 (Form 1040) 2022



Name(s) shown on return

## **Residential Energy Credits**

Go to www.irs.gov/Form5695 for instructions and the latest information. Attach to Form 1040, 1040-SR, or 1040-NR. OMB No. 1545-0074

Attachment Sequence No. **158** Your social security number 705-51-9800

PRAVEEN KUMAR VADDE

Part I Residential Clean Energy Credit (See instructions before completing this part.)

Note: Skip lines 1 through 11 if you only have a credit carryforward from 2021.

1	Qualified solar electric property costs	1	83,900.
2	Qualified solar water heating property costs	2	
3	Qualified small wind energy property costs	3	
4	Qualified geothermal heat pump property costs	4	
5	Qualified biomass fuel property costs	5	
6a	Add lines 1 through 5	6a	83,900.
b	Multiply line 6a by 30% (0.30)	6b	25,170.
7a	Qualified fuel cell property. Was qualified fuel cell property installed on, or in connection with, your main home located in the United States? (See instructions.)	7a	Yes No
	<b>Caution:</b> If you checked the "No" box, you cannot take a credit for qualified fuel cell property. Skip lines 7b through 11.		
b	Print the complete address of the main home where you installed the fuel cell property.		
	Number and street Unit No.		
	City, State, and ZIP code		
8	Qualified fuel cell property costs         8		
9	Multiply line 8 by 30% (0.30)		
10	Kilowatt capacity of property on line 8 above 10		
11	Enter the smaller of line 9 or line 10	11	
12	Credit carryforward from 2021. Enter the amount, if any, from your 2021 Form 5695, line 16	12	
13	Add lines 6b, 11, and 12	13	25,170.
14	Limitation based on tax liability. Enter the amount from the Residential Clean Energy Credit Limit Worksheet (see instructions)	14	24,960.
15	Residential clean energy credit. Enter the smaller of line 13 or line 14. Also include this amount on Schedule 3 (Form 1040), line 5	15	24,960.
16	Credit carryforward to 2023. If line 15 is less than line 13, subtract line 15 from line 13		
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 02/24/23 PRO		Form <b>5695</b> (2022)

Par	t II Energy Efficient Home Improvement Credit		
17a	Were the qualified energy efficiency improvements or residential energy property costs for your main home located in the United States? (see instructions)	17a	🗌 Yes 🗌 No
	<b>Caution:</b> If you checked the "No" box, you cannot claim the energy efficient home improvement credit. Do not complete Part II.		
b	Print the complete address of the main home where you made the qualifying improvements. <b>Caution:</b> You can only have one main home at a time.		
	Number and street Unit No.		
	City, State, and ZIP code		
С	Were any of these improvements related to the construction of this main home?	17c	Yes No
	<b>Caution:</b> If you checked the "Yes" box, you can only claim the energy efficient home improvement credit for qualifying improvements that were not related to the construction of the home. Do not include expenses related to the construction of your main home, even if the improvements were made after you moved into the home.		
18 19	Lifetime limitation. Enter the amount from the Lifetime Limitation Worksheet (see instructions) Qualified energy efficiency improvements (original use must begin with you and the component must reasonably be expected to last for at least 5 years; do not include labor costs) (see instructions).	18	
а	Insulation material or system specifically and primarily designed to reduce heat loss or gain of your home that meets the prescriptive criteria established by the 2009 IECC	19a	
b	Exterior doors that meet or exceed the version 6.0 Energy Star program requirements	19b	
С	Metal or asphalt roof that meets or exceeds the Energy Star program requirements and has appropriate pigmented coatings or cooling granules which are specifically and primarily designed to reduce the heat gain of your home	19c	
d	Exterior windows and skylights that meet or exceed the version 6.0 Energy Star program requirements	130	
е	Maximum amount of cost on which the credit can be figured <b>19e</b> \$2,000		
f	If you claimed window expenses on your Form 5695 prior to 2022, enter the amount from the Window Expense Worksheet (see instructions); otherwise		
	enter -0		
g	Subtract line 19f from line 19e. If zero or less, enter -0		
h	Enter the smaller of line 19d or line 19g         .	19h	0.
20 21	Add lines 19a, 19b, 19c, and 19h	20 21	0.
22	Multiply line 20 by 10% (0.10)	21	0
а	Energy-efficient building property. Do not enter more than <b>\$300</b>	22a	0.
b	Qualified natural gas, propane, or oil furnace or hot water boiler. Do not enter more than <b>\$150</b>	22b	0.
С	Advanced main air circulating fan used in a natural gas, propane, or oil furnace. Do not enter more		
	than <b>\$50</b>	22c	0.
23	Add lines 22a through 22c	23	

Maximum credit amount. (If you jointly occupied the home, see instructions) . . . . . . . . . . . .

Subtract line 26 from line 25. If zero or less, **stop;** you cannot take the energy efficient home improvement credit

REV 02/24/23 PRO