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)							
Taxpayer's name	Social securi	Social security number					
SAI KUMAR ANKULA	739-92	-002	7				
Spouse's name	Spouse's so	cial secu	irity numbe	er			
Part I Tax Return Information — Tax Year Ending December 31, 2022	(Enter vear you a	re aut	horizino	1.)	_		
Enter whole dollars only on lines 1 through 5.	(=:::::::)	0 0.0.)-/	_		
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1 Adjusted gross income		1	8	6 , 518	3.		
2 Total tax		2	1:	1,804	፟.		
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1	4,411			
4 Amount you want refunded to you		4		2 , 607	7 <u>. </u>		
5 Amount you owe		5					
Part II Taxpayer Declaration and Signature Authorization (Be sure you ge Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or a							
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Pareturn (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 reaso for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorit Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution acc payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to apayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancella business days prior to the payment (settlement) date. I also authorize the financial institutions involve taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or amer Electronic Funds Withdrawal Consent.	r, transmitter, or electrin for rejection of the tage the U.S. Treasury a count indicated in the transitution to debit the terminate the authorization requests must be do in the processing of to the payment. I fur	onic ret ransmis and its c ax prep e entry t ation. T e receive f the ele ther ac	urn origin sion, (b) to designated paration so to this according to the control of the control o	ator (EF the reased Finance oftware count. To (cancel ter thare ayment e that	RO) son cial for his l) a n 2 t of the		
				1			
Taxpayer's PIN: check one box only X I authorize GLOBAL TAXES LLC to enter or getting to the content of the content	parata my DINI	0 0	2 7	00.0	~		
ERO firm name	En		digits, but r all zeros	as n	Пу		
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 if you are entering your own PIN and your return is filed using the Practitioner PI below.							
Your signature ►	ate▶						
Spouse's PIN: check one box only				_			
	enerate my PIN			as n	nv.		
ERO firm name	-	ter five	diaits. but	as II	Пу		
signature on the income tax return (original or amended) I am now authorizing.			r all zeros				
I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner PI below.							
apadas a digitation at	ate ▶						
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.	2 2 2 4 9	6 6		8 9			
	Don't en	er all ze	ros				
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual in authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I a requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method in the PIN met	am submitting this ret	urn in a	ccordanc				
ERO's signature ▶ Da	ate ▶						
ERO Must Retain This Form — See Instructi	ions				_		
Don't Submit This Form to the IRS Unless Requeste	ed To Do So						

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	s X	Single Married filing jointly	Marrie	ed filing separately (N	/IFS)	☐ Head of	household (H	OH)		lifying sur		
Check only one box.	If vo	u checked the MFS box, enter the n	ame of v	your spouse. If you of	hacks	ad the HOH or	OSS hov er	ıtar th		use (QSS) name if t		
ONC DOX.	•	on is a child but not your dependent	,	rour spouse. It you or	ICCRC		QOO DOX, CI	itoi ti	ic crilic s	marrie ii t	ne quantying	
Your first name	and mi	iddle initial	Last nar	me					Your so	cial securi	ity number	
				739-92-0027								
				Spouse's social security number								
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			Apt. no.		Preside	ntial Elect	ion Campaign	
332 BURI	NING	BROOK DR							1	eck here if you, or your		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete spaces below. State ZIP				ZIP code			spouse if filing jointly, want \$3 o go to this fund. Checking a		
O FALLO	1		MO 6			63366		box bel	box below will not change			
Foreign countr	y name		F	Foreign province/state/o	county	/	Foreign postal	code				
										You	Spouse	
Digital		ny time during 2022, did you: (a) rec	,		. ,		,	, .	. ,		\sqrt	
Assets		ange, gift, or otherwise dispose of a		<u>_</u>			asset)? (See	instru	uctions.)	Yes	⊠ No	
Standard	_	eone can claim: You as a de		•		a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien							
Age/Blindnes	s You:	Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before Jan	uary 2	2, 1958	☐ Is b	olind	
Dependent	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4) Check	the b	ox if quali	fies for (see	e instructions):	
If more	(1) F	(1) First name Last name		number		to you	to you Child ta		redit	Credit for other dependent		
than four												
dependents, see instruction	s ——											
and check	·											
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)					. 1a		95,341.	
	b	Household employee wages not re	•	, ,					. 1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	(see ins	structions)					. 1c			
attach Forms	d	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f		· ·					. 1e			
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29					. <u>1f</u>			
If you did not	g	Wages from Form 8919, line 6.							. 1g			
get a Form W-2, see	h	Other earned income (see instruct	,						. 1h	-	0.	
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>li</u>					05 041	
	<u>z</u>	Add lines 1a through 1h							. 1z		95,341.	
Attach Sch. B	2a	· -	2a			xable interest			. 2b			
if required.	3a		3a			dinary divide			. 3b			
	4a	-	4a			xable amoun			. 4b			
Standard Deduction for—	5a	-	5a			xable amoun			. 5b			
Single or	6a	,	6a			xable amoun	τ		. 6b			
Married filing separately,	C	If you elect to use the lump-sum e			`	,		. L	\			
\$12,950 To Capital gain or (loss). Attach Schedule Diffrequired. If not required, check here						_		0 0 2 2				
Married filing jointly or	8 9	Other income from Schedule 1, lin							. 8		-8,823.	
Quality in g						. 10		86,518.				
\$25,900	11	•	-					•	. 10		96 510	
household, 12 Standard doduction or itemized deductions (from Schodule A)						. 12		86,518. 12,950.				
\$19,400 If you checked	13	Qualified business income deduct		`	,	 5-Δ			. 13		<u>14,330.</u>	
any box under	14							•	. 14		12,950.	
Standard Deduction,	15	Subtract line 14 from line 11. If zer							. 15		73,568.	
see instructions.				., 5 . //// // // y	•			•			,	

Form 1040 (2022	2)					_					Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		1	6	11,8	04.
Credits	17	Amount from Schedule 2, lin	ne 3					1	7		
	18	Add lines 16 and 17						1	8	11,8	04.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			1	9		
	20	Amount from Schedule 3, lin	ie 8					2	0		
	21	Add lines 19 and 20						2	1		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				2	2	11,8	04.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			2	3		0.
	24	Add lines 22 and 23. This is	your total tax					2	4	11,8	04.
Payments	25	Federal income tax withheld									
-	а	Form(s) W-2				25a	14,	411.			
	b	Form(s) 1099				25b					
	С	Other forms (see instruction	s)			25c					
	d	Add lines 25a through 25c						25	ód	14,4	11.
If	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return			2	6		
If you have a 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	3, line 8		29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lin	ie 15			31					
	32	Add lines 27, 28, 29, and 31				efundable	credits	3	2		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				3	3	14,4	11.
Refund	34	If line 33 is more than line 24							4	2,6	507.
neiulia	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	s is attached, ch	neck here		. 🗆 35	ба	2,6	507.
Direct deposit?	b	Routing number 1 0 1			c Type:						
See instructions.	d	Account number 5 1 8			9 0 1	_	Ĭ				
	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							_		
rou owe	38		•	-		1 1		3			
The level December		Estimated tax penalty (see in									
Third Party Designee		you want to allow another	•			_	Yes. Con	nnlete helo	w [≺ No	
Designee		signee's		Phone				al identificati	_		
	nai			no.			numbe		511		
Sign		der penalties of perjury, I declare tief, they are true, correct, and com									
Here		ur signature		Date	Your occupation			If the IRS	sent y	ou an Identi	ty
Joint return?					IT SOFTW	SOFTWARE ENGINEER (see				enter it here	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.							our spouse	
your records.								(see inst.)		on PIN, ente	r it here
		(705) 770 500	^	Farall addisses		TZ O CD ZD	TT 0011	(00001.)			ш
		one no. (785) 770-599 eparer's name	∠ Preparer's signat	Email address	SKANKULA	Date		PTIN		neck if:	
Paid		•	l		רווחחת חתויי				_	Self-empl	loved
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLA	MI UI/I	1/2023 P	0208270			
Use Only		m's name GLOBAL TA		NIOTAT OTC. 37	T 00016			Phone no		78) 965-9	
			Y CT E BRU	NOWICK No				Firm's Ell	N	88-2145	
Go to www.irs.g	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/	02/23 PRO			Form 104	U (2022)

SCHEDULE 1 (Form 1040)

SAI KUMAR

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

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

ANKULA

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

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

	Sequence No. 01
Your soc	ial security number
739-92	-0027

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	-8,823.
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			
	, , , , , , , , , , , , , , , , , , ,	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-		
•	Total ather income. Add lines On thus with On	8z		
9	Total other income. Add lines 8a through 8z		9	0.000
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR,	or 1040-NR, line 8	10	-8 , 823.

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-	-basis government		
	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 8l from the			
	, , , , , , , , , , , , , , , , , , , ,	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			
	tax law violations	24i		
j	Housing deduction from Form 2555	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
		24k		
Z	Other adjustments. List type and amount:			
		24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income	. Enter here and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041, Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 739-92-0027 SAI KUMAR ANKULA Part I **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . Yes 1a Physical address of each property (street, city, state, ZIP code) PLOT NO:1-1-267/23 SRINIVAS NAGAR, KAPRA A S RAO NAGAR HYDERABAD, TELANGANA IN 500062 Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 510. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 982. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 1,867. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,167. 14 14 Repairs 2,674. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,643. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 9,333. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -8,823. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 8,823.) 510. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 9,333. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 8,823. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

-8,823.

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2