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 security number
VENKAT RAMANA DUDALA	784-36-6904
Spouse's name	Spouse's social security number
LAVANYA REDDY KONTHAM	973-99-8501
Part I Tax Return Information — Tax Year Ending Decemb	er 31, 2022 (Enter 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.	
1 Adjusted gross income	
2 Total tax	· · · · · · · · · · · · · · · · · · ·
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 .	
4 Amount you want refunded to you	
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization (E	Be sure you get and keep a copy of your return)
my knowledge and belief, it is true, correct, and complete. I further declare that return (original or amended) I am now authorizing. I consent to allow my intermedia to send my return to the IRS and to receive from the IRS (a) an acknowledgement for any delay in processing the return or refund, and (c) the date of any refund. If a Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the finar payment of my federal taxes owed on this return and/or a payment of estimated taxed authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent at 1-888-353-4537. business days prior to the payment (settlement) date. I also authorize the financial taxes to receive confidential information necessary to answer inquiries and reso personal identification number (PIN) below is my signature for the income tax reture Electronic Funds Withdrawal Consent.	tte service provider, transmitter, or electronic return originator (ERO) of receipt or reason for rejection of the transmission, (b) the reason pplicable, I authorize the U.S. Treasury and its designated Financial icial institution account indicated in the tax preparation software for x, and the financial institution to debit the entry to this account. This inancial Agent to terminate the authorization. To revoke (cancel) a Payment cancellation requests must be received no later than 2 institutions involved in the processing of the electronic payment of live issues related to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
	to enter or generate my PIN 6 6 6 9 0 4 as my
ERO firm name	to enter or generate my PIN Enter five digits, but don't enter all zeros
signature on the income tax return (original or amended) I am nov	v authorizing.
I will enter my PIN as my signature on the income tax return (origing if you are entering your own PIN and your return is filed using the below.	
Your signature ►	Date ►
Spouse's PIN: check one box only	
X lauthorize GLOBAL TAXES LLC	to enter or generate my PIN 9 8 5 0 1 as my
ERO firm name	Enter five digits, but don't enter all zeros
signature on the income tax return (original or amended) I am nov	vautionzing.
I will enter my PIN as my signature on the income tax return (origing if you are entering your own PIN and your return is filed using the below.	
Spouse's signature ▶	Date ►
Practitioner PIN Method Returns	
Part III Certification and Authentication — Practitioner PIN	-
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-	Selected PIN. 2 2 2 4 9 6 6 1 9 8 9 Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the eleauthorized to file for tax year indicated above for the taxpayer(s) indicated above requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorize	. I confirm that I am submitting this return in accordance with the
ERO's signature ▶	Date ▶
ERO Must Retain This Form -	

Don't Submit This Form to the IRS Unless Requested To Do So

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

2022)
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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 X Married filing jointly	Marrie	ed filing separate	ly (MFS)	☐ Head of	household (F	НОН)		fying sur		g
one box.	-	u checked the MFS box, enter the r	-	our spouse. If yo	ou check	ed the HOH or	r QSS box, e	enter	the c	hild's	name if t	he q	ualifying
		on is a child but not your dependen							1				
Your first name			Last na								ial secur	-	mber
VENKAT I			DUDA						_	784-36-6904			
		s first name and middle initial	Last na						_ ·	Spouse's social security number			
LAVANYA			KONT								9-850		
		er and street). If you have a P.O. box, see	e instructio	ons.			Apt. no		- 1	Presidential Election Campa Check here if you, or your			
		AL PARKWAY			04-			112100			f filing joi		
		ce. If you have a foreign address, also c	ompiete si	paces below.	Sta		ZIP code	to g			this fund	. Che	cking a
CEDAR PA			1.	Townian municipae (at	TX		78613	al aa			w will no or refund		nge
Foreign country	y name			Foreign province/st	ate/count	У	Foreign posta	ai coc	ie yo	ui tax	You	_	Spouse
Digital	At ar	ny time during 2022, did you: (a) red	ceive (as	a reward, award	, or payn	nent for prope	erty or servic	es);	or (b)	sell,			
Assets		ange, gift, or otherwise dispose of					-				☐ Yes	X	No
Standard	Som	eone can claim:	ependent	t Your sp	ouse as	a dependent							
Deduction		Spouse itemizes on a separate retu	rn or you	were a dual-sta	tus alien								
Age/Blindnes:	s You:	☐ Were born before January 2,	1958	Are blind	Spouse	: Was bo	rn before Ja	nuar	y 2, 1	958	☐ Is b	lind	
Dependent	s (see	instructions):		(2) Social sec	urity	(3) Relationsh	nip (4) Chec	k the	e box it	f qualifi	es for (se	e instr	ructions):
If more	(1) Fi	rst name Last name		number		to you	Chi	ld tax	x credi	t C	Credit for c	ther d	ependents
than four]				
dependents, see instruction	s ——]				
and check _													
here]									\perp			
Income	1a	Total amount from Form(s) W-2, b	oox 1 (see	e instructions)						1a		85,	000.
	b	Household employee wages not a	•							1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1								1c	-		
attach Forms	d	Medicaid waiver payments not re		. , , ,	ee instru	ctions)				1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits		· ·						1e			
was withheld.	f	Employer-provided adoption ben								1f			
If you did not	g	Wages from Form 8919, line 6.								1g	-		
get a Form W-2, see	h	Other earned income (see instruc								1h	-		0.
instructions.	i	Nontaxable combat pay election	(see instr	ructions)		<u>1</u> i					1	0.5	000
		Add lines 1a through 1h	· · ·		 I . . .					1z		85,	000.
Attach Sch. B if required.	2a	Tax-exempt interest	2a		i	axable interes			•	2b	-		
	3a	Qualified dividends	3a		1	rdinary divide				3b			
M	4a 5a	IRA distributions Pensions and annuities	4a 5a		1	axable amoun axable amoun				4b 5b			
Standard Deduction for—	6a	Social security benefits	6a		1	axable amoun			•	6b			
Single or	C	If you elect to use the lump-sum		method check h	1				Ė	OD			
Married filing separately,	7	Capital gain or (loss). Attach Sche		·	`	,				7	1		
\$12,950 Married filing	8	Other income from Schedule 1, lin								8	<u> </u>	1 0	848.
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							•	9			152.
Qualifying surviving spouse,	10	Adjustments to income from Sche							•	10		/ T /	104.
\$25,900 Head of	11	Subtract line 10 from line 9. This i	-						•	11		74	152.
household,	12	Standard deduction or itemized	•	-					•	12			900.
\$19,400 If you checked	13	Qualified business income deduc				5-A .			•	13		<u>_</u> _,	
any box under Standard	14	Add lines 12 and 13								14		25	900.
Deduction,	15	Subtract line 14 from line 11. If ze								15			252.
see instructions.	_			,	. ,		-						

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 3 4972	3 🗌		16	5,382.
Credits	17	Amount from Schedule 2, lir	-					17	
3134113	18	Add lines 16 and 17					🗔	18	5,382.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	<u> </u>
	20	Amount from Schedule 3, lir	ie 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	5,382.
	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	5,382.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				25a 6	,681.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c					2	5d	6,681.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return		2	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, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits	(32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments			(33	6,681.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amour	nt you overpaid	(34	1,299.
riorana	35a	Amount of line 34 you want			is attached, chec	k here	. 🗌 🛭	5a	1,299.
Direct deposit?	b	Routing number 0 8 1			c Type: 🛛 🗙	Checking S	Savings		
See instructions.	d	Account number 3 5 5	0 0 7 7	4 5 3 1	1 4				
	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 structions	•		rn with the IRS?		mplete belo	ow.	× No
· ·		signee's		Phone			nal identificat	tion	
		me		no.			er (PIN)		
Sign Here		der penalties of perjury, I declare tief, they are true, correct, and com							
11010	Yo	ur signature		Date	Your occupation		I		ou an Identity
Joint return?					 SOFTWARE E	NCINEER	(see inst		enter it here
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sian.	Date	Spouse's occupati		If the IRS	S sent v	our spouse an
Keep a copy for	- 1	, ·					Identity I	Protection Protection	on PIN, enter it here
your records.					HOME MAKEF		(see inst	.)	
		one no. (347) 530-997		Email address	VENKAT.DUDAI	A67@GMAIL.CO			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN	-	heck if:
Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	03/02/2023	P020827	03 L	Self-employed
Use Only	Fin	m's name GLOBAL TA					Phone n	o. (67	78) 965-9522
	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's E	IN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 02/24/23 PRO			Form 1040 (2022)

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

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

VENKAT RAMANA DUDALA & LAVANYA REDDY KONTHAM

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 soci	ial security number
791-36	-6904

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. Att		5	-10,848.
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	_	
į	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	0		
	instructions)	8m	-	
n	Section 951(a) inclusion (see instructions)	8n 8o	-	
0	Section 951A(a) inclusion (see instructions)	8p		
p	Taxable distributions from an ABLE account (see instructions)	8q		
q r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form	OI		
3	1040, line 1a or 1d	8s (
t	Pension or annuity from a nonqualifed deferred compensation plan or		4	
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9 Enter here and on Form 1040, 1040-SE		$\overline{}$	-10.848

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	, , , , , , , , , , , , , , , , , , ,	24a		
b	Deductible expenses related to income reported on line 8I 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			
		24i	-	
j		24j	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
		24k	-	
Z	Other adjustments. List type and amount:	0.4		
0-		24z	0.5	
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.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Your social security number

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

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

2022	
Attachment Sequence No. 13	

OMB No. 1545-0074

VENE	KAT RAMANA DU:	DALA	& LAVANY	A REDDY KONTH	MAI					78	34-3	6-6904		
Part	Income or Note: If you a rental income	Loss are in the or los	s From Ren he business of as from Form 48	tal Real Estate a renting personal prope 335 on page 2, line 40	nd Ro erty, use	yalties Schedule	e C. See	instrud	ctions. If you a	are a	ın indiv	ridual, rep	ort farm	
		u make any payments in 2022 that would require you to file Form(s) 1099? See instructions												
В	f "Yes," did you or	will y	ou file require	d Form(s) 1099?								. 🗌 Ye	s 🗌 N	lo
1a	Physical address	s of ea	ach property (street, city, state, Z	IP code	e)								
Α	ADHARSH NAGA	AR A	LER NALGO	NDA NALGONDA	TELAI	NGANA :	IN 508	3115						
В														
С														
1b	Type of Property (from list below)	2	above, repo	and	nd Days						g QJV			
Α	3			e days. Check the C		Α		365			0			
В				if you meet the requirements to file as qualified joint venture. See instruction										
С			quamou jon	TOTAL OF COO INC.	40110111		С							
1	of Property: Single Family Resid Multi-Family Resid		e 3 Vaca 4 Com	tion/Short-Term Re mercial	ntal	5 Land 6 Roya	-	-	Self-Rental Other (desc)			
							_		Propert	ies:				
Incon							A	2.4	В				С	
3 4							6	34.						
Expe		u			4									
⊑xpei 5					. 5									
6	•													
7							2,9	61						
8							2,3	01.						
9														
10														
11							1,4	52						
12				. (see instructions)	12			-						
13	0 0	•			_									
14							2,6	36.						
15							2,3							
16														
17	Utilities				. 17		2,1	01.						
18														
19	Other (list)			40	19									
20	Total expenses. A	Add Iir	nes 5 through	19	20		11,4	82.						
21	result is a (loss), s	see in	structions to	nd/or 4 (royalties). If find out if you must	t		-10,8	48.						
22				er limitation, if any,		(10,84	8.)	()	()
23a		-		3 for all rental prop				23a		6.	34.			
b				4 for all royalty pro				23b]			
С				12 for all properties				23c						
d				18 for all properties				23d						
е				20 for all properties				23e	11	L, 4				
24	·			wn on line 21. Do n		•				.	24			
25	•	•		1 and rental real esta						t	25	(10,848	8.)
26	here. If Parts II,	III, IV	, and line 40	y income or (loss). on page 2 do not rwise, include this a	apply	to you,	also er	iter th	is amount o		26		-10,84	48.