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

| Subm | ission Identification Number (SID) | | | |
|---|--|---|---|---|
| Taxpaye | number | | | |
| GOP | -1843 | | | |
| Spouse | cial security number | | | |
| HAR | APPLIEI | O FOR | | |
| Part | Tax Return Information — Tax Year Ending December 31, 2022 (Enter | year you a | re authorizin | g.) |
| 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 | | 1 17 | 79,565. |
| 2 | Total tax | | 2 2 | 25,040. |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 2 | 29,306. |
| 4 | Amount you want refunded to you | | 4 | 4,266. |
| 5 | Amount you owe | | 5 | |
| Part | II Taxpayer Declaration and Signature Authorization (Be sure you get and k | eep a copy | y of your re | turn) |
| return to send for any Agent payme authori payme busine taxes to person | owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abov (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reduction in the processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Ucto initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the financial transmitter of 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 terminated int, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I are original or amended) I are original or amended. | tter, or electro ction of the tra S. Treasury ar cated in the ta n to debit the the authoriza- lests must be processing of ayment. I furt | nic return original ansmission, (b) and its designated as preparation sentry to this action. To revoke the electronic the acknowled | nator (ERO) the reason of Financial software for count. This of (cancel) a ater than 2 payment of ge that the |
| | ayer's PIN: check one box only | | | ٦ |
| X | | my DINI 1 | 1 8 4 3 | ac my |
| | ERO firm name signature on the income tax return (original or amended) I am now authorizing. | Ent | er five digits, bu i't enter all zeros | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am notify you are entering your own PIN and your return is filed using the Practitioner PIN methology. | | | |
| Yours | signature ▶ Date ▶ | | | |
| Spour | se's PIN: check one box only | | | |
| · - | _ | my DINI | | 00 000 |
| × | I authorize GLOBAL TAXES LLC to enter or generate I | , | er five digits, bu | _ as my |
| | signature on the income tax return (original or amended) I am now authorizing. | | i't enter all zeros | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am notify you are entering your own PIN and your return is filed using the Practitioner PIN methology. | | | |
| Spous | se's signature ▶ Date ▶ | | | |
| | Practitioner PIN Method Returns Only—continue below | | | |
| Part | III Certification and Authentication — Practitioner PIN Method Only | | | |
| ERO's | s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2 | | 6 6 1 9 er all zeros | 8 9 |
| authori | y that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In | itting this retu | rn in accordan | ce with the |
| FR∩'s | s signature ► Date ► | | | |
| 2.10 | ERO Must Retain This Form — See Instructions | | | |
| | | | | |

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

OMB No. 1545-0074

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

| _ | s 🗌 S | Single X Married filing jointly | Marrie | ed filing separately | (MFS) | Head of | house | hold (HOH |) | | lifying surv | viving |
|---|---|---|---|----------------------------|---------|-----------------------------------|---------|-------------------|--|--------------------------------|-------------------------|--|
| Check only one box. | If vo | ou checked the MFS box, enter the r | name of v | our spouse. If you | check | ed the HOH o | r OSS | hox ente | r the c | • | use (QSS) name if th | ne qualifying |
| 0.10 00% | - | son is a child but not your dependen | - | our opouco. Il you | 0110011 | .00 110 11011 0 | . 400 | DOM, OTTO | 11100 | rilia o | Tiarrio II ti | o quamying |
| Your first name | first name and middle initial Last name Y | | | | Yo | Your social security number | | | | | | |
| GOPI REDDY | | | MARR | I | | | | | 7 | 708-91-1843 | | |
| If joint return, spouse's first name and middle initial | | | Last na | | | | | | _ | Spouse's social security numbe | | |
| HARIKA | | | | | | | A | APPLIED FOR | | | | |
| | | | | | | Presidential Election Campaign | | | | | | |
| 340 GRAN VIA | | | | | 2059 | | | CI | Check here if you, or your | | | |
| | | ce. If you have a foreign address, also c | te spaces below. State 2 | | | ZIP c | | | spouse if filing jointly, want \$3 | | | |
| IRVING | | | TX | | | 750 | 139 | | to go to this fund. Checking a box below will not change | | | |
| Foreign country | y name | | F | Foreign province/state/co | | county F | | | | your tax or refund. | | |
| | | | | | | | | | | You Spouse | | |
| Digital | At ar | ny time during 2022, did you: (a) red | ceive (as | a reward, award, | or payr | ment for prope | erty or | services); | or (b) | sell, | | |
| Assets | | lange, gift, or otherwise dispose of | | | | | | | | | Yes | ⊠ No |
| Standard | Som | eone can claim: You as a de | ependent | Your spo | use as | a dependent | | | | | | |
| Deduction | | Spouse itemizes on a separate retu | • | | | | | | | | | |
| A a /Dii al a | | | 1050 5 | 7 Ava blind 6 | | - D M b | 4 | | 0 1 | 050 | | |
| | | Were born before January 2, | 1958 _ | | pouse | | | ore Janua | , , | | ls bli | |
| Dependent | , | • | | (2) Social security number | | (3) Relationsh to you | nip (| (4) Check the box | | · 1 | • | • |
| If more | (1) F | irst name Last name | | number | | to you | | Child ta | x crear | 1 | Credit for otr | ner dependents |
| than four dependents, | | | | | | | | | | | | ┽── |
| see instruction | s — | | | | | | | <u>L</u> | <u> </u> | | L | ┽── |
| and check here | 1 — | | | | | | | <u>L</u> | <u> </u> | | L | ┽── |
| 11010 | J | T-1-1 | 4 / | | | | | | | | 1.0 | |
| Income | 1a | Total amount from Form(s) W-2, b | • | , | | | | | | 1a | | 32,565. |
| Attach Form(s) | b | Household employee wages not reported on Form(s) W-2 | | | | | | 1b | | | | |
| W-2 here. Also | C | Tip income not reported on line 1a (see instructions) | | | | | | | 1c | | | |
| attach Forms W-2G and | d | Medicaid waiver payments not reported on Form(s) W-2 (see instructions) | | | | | | | 1d | | | |
| 1099-R if tax | e | Taxable dependent care benefits from Form 2441, line 26 | | | | | | 1e | | | | |
| was withheld. | f | . , | | • | | | | | • | 1f | | |
| If you did not get a Form | g | Wages from Form 8919, line 6 . | | | | | | | • | 1g 1h | | 0. |
| W-2, see | h i | , | ner earned income (see instructions) | | | | | | 111 | | | |
| instructions. | | • • | (See IIISti | uctions) | | | | | | 1- | 1.0 | 32,565. |
| A# | z 2a | Add lines 1a through 1h Tax-exempt interest | 2a | | ьт | axable interes | | | • | 1z 2b | | 2,303. |
| Attach Sch. B if required. | 3a | Qualified dividends | 3a | | | axable interes Irdinary divide | | | • | 3b | | |
| | 4a | IRA distributions | 4a | | | axable amoun | | | • | 4b | | |
| Standard | 5a | Pensions and annuities | 5a | | | axable amoun | | | • | 5b | | |
| Deduction for— | 6a | Social security benefits | 6a | | | axable amoun | | | • | 6b | | |
| Single or | C | • | | method check he | | | и | | Ė | OD | | |
| Married filing separately, | 7 | If you elect to use the lump-sum election method, check here (see instructions) | | | | | | | 7 | ٦. | -3,000. | |
| \$12,950 Married filing | 8 | Other income from Schedule 1, line 10 | | | | | | 8 | | 3,000. | | |
| jointly or | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income | | | | | | 9 | 1 7 | 79,565. | | |
| Qualifying surviving spouse, | 10 | Add lines 12, 2b, 3b, 4b, 3b, 6b, 7, and 6. This is your total income | | | | | | | 10 | | <u> </u> | |
| \$25,900 • Head of | 11 | Subtract line 10 from line 9. This is your adjusted gross income | | | | | | 11 | | 79,565. | | |
| household, | 12 | Standard deduction or itemized | • | | | | | | • | 12 | | 25,900. |
| \$19,400 If you checked | 13 | Qualified business income deduc | | , | , | 5-A . | | | • | 13 | | <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> |
| any box under Standard | 14 | | | | | | | 14 | _ | 25,900. | | |
| Deduction, | 15 | | 14 from line 11. If zero or less, enter -0 This is your taxable income | | | | | 15 | | 53,665. | | |
| see instructions. | 1 | | | , | , | | | | | | | _ , |

| Form 1040 (2022 | 2) | | | | | | | Page 2 |
|---------------------------------|---|---|--------------------------------------|-------------------------------|------------------------|--------------|---|--------------------|
| Tax and | 16 | Tax (see instructions). Check if any from Form | m(s): 1 881 | 4 2 4972 | 3 🗌 | | 16 | 25,040. |
| Credits | 17 | Amount from Schedule 2, line 3 | | | | | 17 | |
| | 18 | Add lines 16 and 17 | | | | | 18 | 25,040. |
| | 19 | Child tax credit or credit for other depende | nts from Sched | ule 8812 | | | 19 | |
| | 20 | Amount from Schedule 3, line 8 | | | | | 20 | |
| | 21 | Add lines 19 and 20 | | | | | 21 | |
| | 22 | Subtract line 21 from line 18. If zero or less | , enter -0 | | | | 22 | 25,040. |
| | 23 | Other taxes, including self-employment tax | , from Schedule | e 2, line 21 | | | 23 | 0. |
| | 24 | Add lines 22 and 23. This is your total tax | | | | | 24 | 25,040. |
| Payments | 25 | Federal income tax withheld from: | | | | | | |
| _ | а | Form(s) W-2 | | | 25a 29 | 9,306. | | |
| | b | Form(s) 1099 | | | 25b | | | |
| | С | Other forms (see instructions) | | | 25c | | | |
| | d | Add lines 25a through 25c | | | | | 25d | 29,306. |
| If you have a | 26 | 2022 estimated tax payments and amount | applied from 20 | 021 return | | | 26 | |
| qualifying child, | 27 | Earned income credit (EIC) | | | 27 | | | |
| attach Sch. EIC. | 28 | Additional child tax credit from Schedule 881 | 2 | | 28 | | | |
| | 29 | American opportunity credit from Form 886 | 3, line 8 | | 29 | | | |
| | 30 | Reserved for future use | | | 30 | | | |
| | 31 | Amount from Schedule 3, line 15 | | | 31 | | | |
| | 32 | Add lines 27, 28, 29, and 31. These are you | r total other p | ayments and refu | ndable credits | | 32 | |
| | 33 | Add lines 25d, 26, and 32. These are your t | otal payments | | | | 33 | 29,306. |
| Refund | 34 | If line 33 is more than line 24, subtract line | 24 from line 33 | . This is the amour | nt you overpaid | | 34 | 4,266. |
| riciana | 35a | , , , | | | | | | 4,266. |
| Direct deposit? | b | Routing number 0 2 1 0 0 0 0 | 8 9 | c Type: 🛛 | Checking | Savings | | |
| See instructions. | d | Account number 4 9 9 1 1 9 8 | 4 7 3 | | | | | |
| | 36 | Amount of line 34 you want applied to you | 2023 estimate | ed tax | 36 | | | |
| Amount You Owe | 37 | Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions | | | | | | |
| | 38 | Estimated tax penalty (see instructions) . | | | 38 | | | |
| Third Party Designee | | you want to allow another person to distructions | | | | omplete b | elow. | X No |
| · · | | signee's | Phone | | | onal identif | ication I | |
| | | me | no. | | | iber (PIN) | | |
| Sign Here | Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which | | | | | | | , |
| Here | Your signature | | Date Your occupation | | | | | nt you an Identity |
| | | | ENGINEED | | | (see i | | N, enter it here |
| Joint return? See instructions. | | | Date | ENGINEER Spanse's accuration | | | | at vour spouse an |
| Keep a copy for your records. | | | Date Spouse's occupation HOME MAKER | | | Ident | If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) | |
| | Ph | one no. (516)728-0843 | Email address | GOPIREDDY.MA | | OM | | |
| | | eparer's name Preparer's signa | ature | | Date | PTIN | | Check if: |
| Paid | SYAN | PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA | RAM SAGAR | GUPTA TALLAM | 01/10/2023 | P02082 | 2703 | Self-employed |
| Preparer | | | | | | | | 678)965-9522 |
| Use Only | | | | | | Firm' | | 88-2145487 |
| | | | | | | 1 | | 4040 |

SCHEDULE D (Form 1040)

Department of the Treasury

Capital Gains and Losses

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

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.

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

Internal Revenue Service Name(s) shown on return Your social security number 708-91-1843 GOPI REDDY MARRI & HARIKA CHEEKURI 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. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) 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 Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. line 2. column (a) with 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 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 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 12,132.) 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 -12,132. 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 (sales price) (or other basis) Form(s) 8949, Part II, 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 Totals for all transactions reported on Form(s) 8949 with Box E checked 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)

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

11

12

13

14

15

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -12,132. • 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? ☐ **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? ☐ 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. 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.) • (\$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.