Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name Social security number								
SAN	TOSH KUMAR YADAV KARNA GOLLA	855-8	30-4060	5				
Spouse	's name	Spouse's	social secu	ırity number				
Dar	Part I Tax Return Information – Tax Year Ending December 31, 2021 (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		. 1	17,276.				
2	Total tax		. 2	443.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		. 3	2,867.				
4	Amount you want refunded to you		. 4	2,424.				
5	Amount you owe		. 5					
Part	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

				FBO firm name	5 ,	E
X Ia	authorize	GLOBAL '	TAXES	LLC	to enter or generate my PIN	

0	4	0	6	6	
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

Date

Spouse's PIN: check one box only

I authorize

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 >			•					 		
Practitioner PIN Method Returns Only—continue below										
Part III Certification and Authentication – Practitioner PIN Metho	d Only									
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selecte	ed PIN.	5	8			 	6 all zer	 9	8 9	Э

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 >		
	t Retain This Form — See Instructions s Form to the IRS Unless Requested To Do So	
For Denergy Reduction Act Nation and your toy of		Earm 8870 (Pay 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/18/22 PRO

1040	-NR Departs	ment of the Treasury—I Nonresident	Internal Revenue Service Alien Income Tax	(99) Return	2021	OMB No. 15	645-0074	IRS Use Only-Do not write or staple in this space.
Filing Status Check only one box.	,	Married filing s we QW box, enter the h is a child but not ye		Qualifying	widow(er) (QW)		
	and middle initial UMAR YADAV	Last name KARNA GOLLA	Π.			(see in	dentifying number structions) -80-4066	
,	number and street IRE PLACE	or rural route). If you	u have a P.O. box, see inst	ructions.		Apt. no. 2	Check	if: X Individual Estate or Trust
City, town, or pos	st office. If you have	a foreign address, al	so complete spaces below.	State	ZIP coc	е		
HACKENSACK				NJ	07601	_		
Foreign country	name		Foreign province/state/co	ounty	Foreign	postal code		
At any time durir	ng 2021, did you re	eceive, sell, exchang	e, or otherwise dispose of	any financia	al interest in an	virtual curre	ency?	Ves X No

Dependents							(4) 🗸	if qualifie	es for (see inst.):
(see instructions)		(1) First name	Last name	(2) Dependent's identifying number		ependent's nship to you	Child tax	c credit	Credit for other dependents
If more than four]	
dependents, see]	
instructions and]	
check here ►]	
Income	1a	Wages, salaries, tips, etc	. Attach Form(s) W-	2				1a	19,776.
Effectively	b	Scholarship and fellowsh	ip grants. Attach Fo	orm(s) 1042-S or required	d stateme	nt. See instruc	tions .	1b	
Connected	с	Total income exempt by	a treaty from Sche	dule OI (Form 1040-NR)), Item				
With U.S.		L, line 1(e)			🗋	1c			
Trade or	2a	Tax-exempt interest .	2a	b Tax	able inter	est		2b	
Business	3a	Qualified dividends .	<u>3a</u>	b Orc	dinary divi	dends		3b	
	4a	IRA distributions	4a	b Tax	able amo	unt		4b	
	5a	Pensions and annuities	<u>5a</u>	b Tax	able amo	unt		5b	
	6	Reserved for future use						6	
	7	Capital gain or (loss). Atta	ach Schedule D (Fo	rm 1040) if required. If no	ot require	d, check here	. 🕨 🗌	7	
	8	Other income from Sche	dule 1 (Form 1040),	line 10				8	
	9	Add lines 1a, 1b, 2b, 3b,	4b, 5b, 7, and 8. Th	is is your total effective	ly conne	cted income	🕨	9	19,776.
	10	Adjustments to income:							
	а	From Schedule 1 (Form 1	1040), line 26..			10a 2	2,500.		
	b	Reserved for future use				10b			
	с	Scholarship and fellowsh	ip grants excluded		🗋	10c			
	d	Add lines 10a and 10c. T	hese are your total	adjustments to income	. .		🕨	10d	2,500.
	11	Subtract line 10d from lin	ne 9. This is your ad	justed gross income	_.		🕨	11	17,276.
	12a	Itemized deductions (fr							
		residents of India, standa	ard deduction. See i	nstructions Std.Dedn US/Indi	a Treaty	12a 1	2,550.		
	b	Charitable contributions f	for certain residents	of India. See instructions	s.	12b	300.		
	с	Add lines 12a and 12b						12c	12,850.
	13a	Qualified business incom	e deduction from F	orm 8995 or Form 8995-	Α.	13a			
	b	Exemptions for estates a	nd trusts only. See	instructions	[13b			
	с	Add lines 13a and 13b						13c	
	14	Add lines 12c and 13c						14	12,850.
	15	Taxable income. Subtra	ct line 14 from line	11. If zero or less, enter -	-0			15	4,426.
For Disclosure,	Priva	cy Act, and Paperwork Re	duction Act Notice,	see separate instruction	IS.	BAA REV (02/18/22 PRO	Fo	rm 1040-NR (2021)

Form 1040-NR (2021)								Page 2
	16	Tax (see instructions). Check if	any from Form	(s): 1 🗌 88	314 2 🗌 497	2 3		16	443.
	17	Amount from Schedule 2 (Forr	n 1040), line 3					17	0.
	18	Add lines 16 and 17						18	443.
	19	Nonrefundable child tax credit	or credit for o	ther depender	nts from Schedule	8812 (Form 104	0)	19	
	20	Amount from Schedule 3 (Forr	,					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. It	f zero or less,	enter -0				22	443.
	23a	Tax on income not effectively from Schedule NEC (Form 104				23a			
	b	Other taxes, including self-em line 21				23b			
	С	Transportation tax (see instruc	,			23c			
	d	Add lines 23a through 23c .						23d	
	24	Add lines 22 and 23d. This is y					🕨	24	443.
	25	Federal income tax withheld fr							
	а	Form(s) W-2				25a 2	2,867.	-	
	b	Form(s) 1099				25b		-	
	С	Other forms (see instructions)				25c		-	
	d	Add lines 25a through 25c .						25d	2,867.
	е	Form(s) 8805						25e	
	f	Form(s) 8288-A						25f	
	g	Form(s) 1042-S						25g	
	26	2021 estimated tax payments						26	
	27	Reserved for future use				27		-	
	28	Refundable child tax credit o 8812 (Form 1040)			from Schedule	28			
	29	Credit for amount paid with Fo				29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Forr	,			31			
	32 33	Add lines 28, 29, and 31. Thes Add lines 25d, 25e, 25f, 25g, 2	26, and 32. The	ese are your to	otal payments .			32 33	2,867.
Refund	34 35a	If line 33 is more than line 24, s Amount of line 34 you want re	funded to you	I. If Form 8888	is attached, chec	k here	. ► 🗆	34 35a	2,424. 2,424.
Direct deposit?	►b	Routing number 0 2 1			► c Type: 🛛	Checking	Savings		
See instructions.	►d	Account number 5 2 9	3 5 1 3	3 3 7					
	►e	If you want your refund check enter it here.			le the United State	es not shown on	page 1,		
	36	Amount of line 34 you want ap	plied to your	2022 estimat	ed tax 🕨 🕨	36			
Amount You Owe	37 38	Amount you owe. Subtract lin Estimated tax penalty (see inst				ee instructions 38	. ►	37	
Third Party Designee	-	ou want to allow another nstructions	person to di 	iscuss this r	eturn with the I · · · · · · ·		Complete	below.	X No
	Desig name			Phone no. ►			nal identifi er (PIN)	cation ▶	
Sign		penalties of perjury, I declare that I they are true, correct, and complete							
Here	Your	signature		Date	Your occupation				nt you an Identity
						NATNEED		_	N, enter it here
					SOFTWARE E	NGINEER	(see l	inst.) ▶	
	Phone		Preparer's si	Email addres	S	Date	PTIN		Ohaala ifa
Paid	•	Irer's name		•					Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		A RAM SAGAR	GUPIA TALLAM	03/03/2022	P02082		Self-employed
Use Only		sname GLOBAL TAXES							8)965-9522
		s address ► 2530 Pebble			g GA 30041		_		<u>)-1017196</u>
GO TO WWW.Irs.	yov/Foi	m1040NR for instructions and the	e latest informa	tion.	ΙC	REV 02/18/22 PR	0	For	rm 1040-NR (2021)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

Name(s) sho	own on F	orm 1040), 1040-S	R, or 1040-NR
SANTOSH	KUMAR	YADAV	KARNA	GOLLA

Your social security number 855-80-4066

Part I Additional Income

For Pa	perwork Reduction Act Notice, see your tax return instructions.			le 1 (Form 1040) 2021
10	Combine lines 1 through 7 and 9. Enter here and on Form 1 1040-NR, line 8	040, 1040-SR, or	10	
9	Total other income. Add lines 8a through 8z		9	
۷		8z		
P Z	Other income. List type and amount	<u>ч</u>		
p	Taxable distributions from an ABLE account (see instructions).	8p		
0	Section 461(I) excess business loss adjustment	80		
n	Section 951A(a) inclusion (see instructions)	8n		
m	Section 951(a) inclusion (see instructions)	8m		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81		
J k	Stock options	8j 8k		
:	Activity not engaged in for profit income	8i 8i		
h i	Prizes and awards	8h		С
	Alaska Permanent Fund dividends	8f 8g		
e	Taxable Health Savings Account distribution	8e		
d	Foreign earned income exclusion from Form 2555	8d (
С	Cancellation of debt	80		
b	Gambling income	8b		
а	Net operating loss	8a (
8	Other income:			
7	Unemployment compensation		7	
6	Farm income or (loss). Attach Schedule F		6	
5	Rental real estate, royalties, partnerships, S corporations, tr Schedule E	usts, etc. Attach	5	
4	Other gains or (losses). Attach Form 4797		4	
b 3	Date of original divorce or separation agreement (see instructions) ■ Business income or (loss). Attach Schedule C		3	
2a	Alimony received		2a	
1	Taxable refunds, credits, or offsets of state and local income taxe		1	

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b 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 3	903	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	2,500.
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	4a		
b	Deductible expenses related to income reported on line 8k from			
		4b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 81	4c		
d		4d	_	
е	Repayment of supplemental unemployment benefits under the	_		
	Trade Act of 1974	4e		
f	Contributions to section 501(c)(18)(D) pension plans 2	24f		
g	Contributions by certain chaplains to section 403(b) plans 2	4g		
h	Attorney fees and court costs for actions involving certain			
i	unlawful discrimination claims (see instructions)	4h		
•	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 1041)	4k		
z	Other adjustments. List type and amount			
05		4z	05	
25 26	Total other adjustments. Add lines 24a through 24z	income Enter	25	
	here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line		26	2,500.

BAA

SCHE	DULE	ΟΙ
(Form	1040-N	R)

Other Information

OMB No. 1545-0074

Go to www.irs.gov/Form1040NR for instruct	tions and the latest information
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(►Go	to www.irs.gov/Form1040		d the latest information	า.	2(0)	21
Department of the Treasury Internal Revenue Service (99)		 Attach to Form 1040-NR. Answer all questions. 				Attachment Sequence N		
	hown on Form 1040		P Alls			Your identifyi		10. 10
	SANTOSH KUMAR YADAV KARNA GOLLA					855-80-	•	
A			were you a citizen or nation	al during the tax year?	, TNDTA	000 00		
В			residence for tax purpose					
С	Have you ever	Yes	No					
D	Were you ever:							
1.	A U.S. citizen?						Yes	X No
2.	A green card he	older (lawful pe	ermanent resident) of the Ur	nited States?			Yes	X No
	If you answer "	you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.						
Е			day of the tax year, enter y day of the tax year <u>F1</u>		did not have a visa, en			
F	-		visa type (nonimmigrant sta	tus) or U.S. immigration				X No
	-		te the date and nature of th					
G	•		left the United States durin	•				
			Canada or Mexico AND co r Mexico and skip to item H			ent intervals		
		United States	Date departed United Stat		ate entered United State		parted Unite	d States
		dd/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy	
н			vacation, nonworkdays, and			-	1:	
	2019		, 2020	, and 20	21 365	· · ·	$\mathbf{\nabla}$	
I			return for any prior year?.					∐ No
J			nd form number you filed ► st?...........					X No
J			U.S. or foreign owner unde					<u>n</u> NU
			ribution from a U.S. person					No
К			sation of \$250,000 or more					X No
	lf "Yes," did yo	u use an altern	ative method to determine	the source of this corr	pensation?		Yes	🗌 No
L			f you are claiming exempt v. See Pub. 901 for more in			tax treaty w	ith a foreigr	ר country
1.	,	• • •	the applicable tax treaty art			claimed the	treaty benef	it, and the
			ne columns below. Attach Fo					
		(a) Cou	untry	(b) Tax treaty article	(c) Number of month		Amount of ex	
					claimed in prior tax ye	ars incom	e in current t	ax year
	(e) Total. Ente	r this amount c	on Form 1040-NR, line 1c. D	Do not enter it on line ⁻	1a or line 1b	•		
2.			preign country on any of the				Yes	No
3.	-		ts pursuant to a Competen				Yes	🗙 No
			Competent Authority deterr	mination letter to your	return.			
Μ	Check the appl	icable box if:						

1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 02/18/22 PRO Schedule OI (Form 1040-NR) 2021