#### 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.

Social accurity number

Submission Identification Number (SID)

Taypayar'a nama

талрау		Social Sect	Social security number					
PAF	VATHISAM NADIMINTY	894-4	894-46-5469					
Spouse	's name	Spouse's s	Spouse's social security number					
Par	t I Tax Return Information – Tax Year Ending December 31, 2022 (Enter	er year you	are aut	thorizing.)				
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	68,194.				
2	Total tax		2	7,767.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	9,757.				
4	Amount you want refunded to you		4	1,990.				
5	Amount you owe		5					
David	Termenter De elevetien and Cinnetture Authentication (De ermenter act and			· · · · · · · · · · · · · · · · · · ·				

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

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		Ę	ſ
X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN		)

6	5	4	6	9	as my
Ent don	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 my
er fiv n't er		

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 >	Date 🕨	
Practitioner PIN Method Retu	rns Only—continue below	
Part III Certification and Authentication – Practitioner F	PIN Method Only	
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit	self-selected PIN. 2 2 2 4 9 6 3 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 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 >	ure ► Date ►									
ERO Must Retain This Fo Don't Submit This Form to the II										
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/22/23 PRO	Form 8879 (Rev. 01-2021)							

Filing Status       Single       Married filing jointly       Married filing separately (MFS)       Head of household (HOH, Check only one box.         If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter person is a child but not your dependent:         Your first name and middle initial       Last name         PARVATHISAM       NADIMINTY         If joint return, spouse's first name and middle initial       Last name         Home address (number and street). If you have a P.O. box, see instructions.       Apt. no.	Spouse Preside	alifying surviving use (QSS) s name if the qualifying ocial security number 46-5469 's social security number
person is a child but not your dependent:         Your first name and middle initial       Last name         PARVATHISAM       NADIMINTY         If joint return, spouse's first name and middle initial       Last name	Your so 894- Spouse Preside	ocial security number
PARVATHISAM     NADIMINTY       If joint return, spouse's first name and middle initial     Last name	894– Spouse Preside	46-5469
If joint return, spouse's first name and middle initial Last name	Spouse Preside	
	Preside	's social security number
Home address (number and street). If you have a P.O. box, see instructions. Apt. no.		
	Chook	ential Election Campaign
4445 GLOBE THISTLE DR		here if you, or your
City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code		e if filing jointly, want \$3 o this fund. Checking a
TAMPA FL 33619	box be	low will not change
Foreign country name Foreign province/state/county Foreign postal coo	e your ta	x or refund.
<b>Digital</b> At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services);	or (b) sell,	
Assets exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See ins		
Standard Someone can claim: Vou as a dependent Vour spouse as a dependent		
Deduction Spouse itemizes on a separate return or you were a dual-status alien		
Age/Blindness You: Were born before January 2, 1958 Are blind Spouse: Was born before Januar		Is blind
		ifies for (see instructions):
If more (1) First name Last name number to you Child tax	credit	Credit for other dependents
than four dependents,		
see instructions		
and check		
Income       1a       Total amount from Form(s) W-2, box 1 (see instructions)	· 18	
Attach Form(s)       c       Tip income not reported on line 1a (see instructions)	. 10	-
W-2 here. Also	. 10	-
attach Forms       0       Medicaid waiver payments not reported on Form(s) w-2 (see instructions)	. 16	
1099-R if tax	. 11	-
was withheld.Imployer-provided adoption benefits norm of 0003, inter23.If you did notgWages from Form 8919, line 6.	. 10	
get a Form <b>h</b> Other earned income (see instructions)	. 11	
W-2, see i Nontaxable combat pay election (see instructions)		
z Add lines 1a through 1h	. 12	z 77,347.
Attach Sch. B 2a Tax-exempt interest 2a b Taxable interest	. 2t	<b>b</b>
if required. 3a Qualified dividends 3a b Ordinary dividends	. 3ł	o
4a IRA distributions 4a b Taxable amount	. 4k	<b>D</b>
Standard     5a     b     Taxable amount	. 5ł	<b>b</b>
Deduction for-       6a       Social security benefits       6a       b       Taxable amount       .       .         • Single or       • Single or       • Taxable amount       • Single or       • Taxable amount       • Single or	. 6ł	0
Married filing <b>c</b> If you elect to use the lump-sum election method, check here (see instructions)		
separately, \$12,950 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here	7	
• Married filing 8 Other income from Schedule 1, line 10	. 8	-9,153.
jointly or Qualifying <b>9</b> Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>	. 9	,
surviving spouse, <b>10</b> Adjustments to income from Schedule 1, line 26	. 10	
Head of Subtract line 10 from line 9. This is your adjusted gross income	. 11	
household, \$19,400 <b>12</b> Standard deduction or itemized deductions (from Schedule A)	. 12	,
• If you checked any box under 13 Qualified business income deduction from Form 8995 or Form 8995-A	. 13	
Standard 14 Add lines 12 and 13	. 14	1
Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>	. 15	55,244.

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	n(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	7,	,767.
Credits	17	Amount from Schedule 2, lin	ne3					17		
	18	Add lines 16 and 17 .						18	7,	,767.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	ne8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	7,	,767.
	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	7,	,767.
Payments	25	Federal income tax withheld								
,,	а	Form(s) W-2				25a	9,757			
	b	Form(s) 1099				25b				
	с	Other forms (see instructions				25c				
	d	Add lines 25a through 25c	<i>.</i>					25d	9,	,757.
	26	2022 estimated tax payment						26		
If you have a qualifying child,	27	Earned income credit (EIC)		• •		27				
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .		-		30				
	31	Amount from Schedule 3, lin				31				
	32	Add lines 27, 28, 29, and 31				undable credits		32		
	33	Add lines 25d, 26, and 32. T	,	-	-			33	9,	<b>,</b> 757.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	1,	,990.
neiuliu	35a	Amount of line 34 you want	refunded to you	u. If Form 8888	is attached, che	ck here	🗆	35a	1,	,990.
Direct deposit?	b	Routing number 2 6 7					Savings			
See instructions.	d	Account number 7 7 5					0			
	36	Amount of line 34 you want a	applied to your	2023 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the <b>am</b>	ount vou owe						
You Owe		For details on how to pay, g						37		
	38	Estimated tax penalty (see ir	nstructions) .			38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See				
Designee	ins	structions				. 🗌 Yes. 🤇	Complete	below.	🗙 No	
		signee's		Phone			sonal iden	tification		
	na			no.			nber (PIN)			
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com								
Here		ur signature		Date	Your occupation				nt you an Ide	Ū
	10	ar signature		Date					IN, enter it he	
Joint return?					SOFTWARE B	ENGINEER	(se	e inst.)		
See instructions.	Sp	ouse's signature. If a joint return, I	<b>both</b> must sign.	Date	Spouse's occupat	on			nt your spous	
Keep a copy for your records.								ntity Prote e inst.)	ection PIN, er	nter it here
-	Dh	200 P2 (700) E17 74C	0	Email addraga						
		one no. (720) 517-746 eparer's name	0 Preparer's signat	Email address	PARVATHISAMNAI	Date			Check if:	
Paid			· · · · · · · · · · · · · · · ·		רווסייע האדדאא			22702	Self-en	mnloved
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUFIA IALLAM	04/11/2023				
Use Only		m's name GLOBAL TAX		INIGMITOR N	т 08816				(678)965	
		m's address 245 ROONE	Y CT E BRU	MONICE N	J U8816		Firr	n's EIN		71965
I TO TO WWW/W/ INC O	OV/FOrr	n 111411 for instructions and the late	st intormation			DEV 02/22/22 DDO			Form 1	(2022)

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

BAA REV 03/22/23 PRO Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

# 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 20 2

Attachment Sequence No. **01** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number PARVATHISAM NADIMINTY 894-46-5469

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	ach Schedule E .	5	-9,153.
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		
	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	-		
	instructions)	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	<b>8s</b> (	<u>)</u>	
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_		
•	Tatal ather income. Add lines On through On	8z		
9	Total other income. Add lines 8a through 8z		9	0 1 5 0
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-INR, line 8	10	-9,153.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	e-basi	s gov	ernment		
	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 8I from the					
	rental of personal property engaged in for profit	24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					
	and USOC prize money reported on line 8m	24c				
d	Reforestation amortization and expenses	24d				
е	Repayment of supplemental unemployment benefits under the Trade					
	Act of 1974	24e				
f	Contributions to section 501(c)(18)(D) pension plans	24f				
g	Contributions by certain chaplains to section 403(b) plans	24g				
h	Attorney fees and court costs for actions involving certain unlawful					
	discrimination claims (see instructions)	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					
	1041)	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	e. Ente	er here	and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA	REV	03/22/23 P	RO	Schedu	ile 1 (Form 1040) 2022

			ome an	OMB No. 1545-0074							
(Form	1040)	ental real estate, royalties, partners	-	-			trusts, REMI	Cs, etc.)	20	22	
Internal	ent of the Treasury Revenue Service		Attach to Form 1040 Go to www.irs.gov/ScheduleE fo					formation.			ce No. <b>13</b>
. ,	shown on return									al security	number
	ATHISAM NA								894-4	6-5469	
Part	Note: If yo	ou are in th	s From Rental Real Estate ar ne business of renting personal prope s from Form 4835 on page 2, line 40.	rty, use		<b>c</b> . See	e instru	ctions. If you a	are an indi	vidual, rep	ort farm
A			nts in 2022 that would require you		Form(s) 1	099? 8	See ins	structions .		. 🗌 Ye	s 🛛 No
			ou file required Form(s) 1099?							. 🗌 Ye	s 🗌 No
1a			ach property (street, city, state, ZI		,						
Α	F.NO 203,	SSS H	EIGHTS KURMANNAPALEM, V	IZAG	ANDHRA	A PRA	DESH	IN 5300	46		
B											
С									_		
1b	Type of Prope (from list below		For each rental real estate prope above, report the number of fair	rental	and		Fa	ir Rental Days	Persor Da	nal Use Iys	QJV
Α	3		personal use days. Check the Q			Α		365		0	
В			if you meet the requirements to qualified joint venture. See instru			В					
С						С					
	of Property:										
	Single Family R Multi-Family Re		<ul> <li>a Vacation/Short-Term Rer</li> <li>4 Commercial</li> </ul>	ntal	5 Land 6 Roya			Self-Rental	riba)		
		5100100					0	Other (desc Propert			
Incom						Α		B	103.		С
3		4		3			52.				0
4				-							
Expen											
5				5							
6	0		structions)	6							
7		-	nce	7		1,8	54.				
8	-			8							
9	Insurance			9							
10			sional fees	10							
11	Management f	ees		11		1,5	69.				
12	Mortgage inter	rest paid	to banks, etc. (see instructions)	12							
13	Other interest			13							
14	Repairs			14		2,3	62.				
15				15		1,8	79.				
16				16							
17				17		2,1	41.				
18	-	expense of	pr depletion	18							
19	Other (list)			19			0.5				
20			nes 5 through 19	20		9,8	05.				
21			ne 3 (rents) and/or 4 (royalties). If structions to find out if you must								
						-9,1	53				
22			estate loss after limitation, if any,								
~~	on Form 8582	(see inst	tructions)	22	(	9,15	53.)	(	)	(	)
23a		-	ported on line 3 for all rental prope				23a		652.		
b		-	ported on line 4 for all royalty prop				23b				
c			ported on line 12 for all properties				23c				
d			ported on line 18 for all properties				23d				
e 24			ported on line 20 for all properties				23e		9,805.		
24 25			amounts shown on line 21. <b>Do no</b> ses from line 21 and rental real esta		-			· · · · ·	. 24 re 25	(	0,152 \
25 26			e and royalty income or (loss).							1	9,153.)
20			, and line 40 on page 2 do not								

Schedule 1 (Form 1040), line 5. Otherwise, include this	amount in the total on line 41	on page 2 .
For Paperwork Reduction Act Notice, see the separate instruction	s. NPA	-9,153.

26

-9,153.