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

illeriai neveriue Service	
Submission Identification Number (SID)	
Taxpayer's name	Social security number
SAGAR BOHRA	677-87-6009
Spouse's name	Spouse's social security number
Part I Tax Return Information — Tax Year Ending December 31, 2022 (En	nter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	inter year you are authorizing.)
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1 Adjusted gross income	1 72,477.
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 (Be sure you get an	
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amen	
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or 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 term payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds (Withdrawal Concent).	ne U.S. Treasury and its designated Financial indicated in the tax preparation software for itution to debit the entry to this account. This inate the authorization. To revoke (cancel) a requests must be received no later than 2 the processing of the electronic payment of he payment. I further acknowledge that the
Electronic Funds Withdrawal Consent.	
Taxpayer's PIN: check one box only	7 6 0 0 9
X I authorize GLOBAL TAXES LLC to enter or generation to enter or generation to enter or generation.	ate my PIN as my Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN m below.	
Your signature ► Date I	>
Spouse's PIN: check one box only	
I authorize to enter or general	ate my PIN as my
ERO firm name	Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN m below.	
Spouse's signature ▶ Date I	•
Practitioner PIN Method Returns Only—continue be	
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. 5	1 8 9 5 2 3 1 9 8 9
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5	Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incon authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am s requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers	submitting this return in accordance with the
ERO's signature ▶ Date I	
FRO Must Retain This Form — See Instructions	

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

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.

Check only		Single Married filing jointly	_	ed filing separately	, ,				•	spo	lifying sur use (QSS))
one box.		ou checked the MFS box, enter the na son is a child but not your dependent:	-	our spouse. If you	check	ed the HOH or	r QSS	S box, en	ter th	e child's	name if t	he qualifying
Your first name	and m	iddle initial	Last na	me						Your so	cial secur	ity number
SAGAR						677-	87-600	19				
If joint return, spouse's first name and middle initial			Last name									ecurity number
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.				Apt. no.		Preside	ntial Elect	ion Campaign
5510 SOT	JTH I	RICE AVENUE								Check	here if you	, or your
City, town, or p	ost offi	ice. If you have a foreign address, also col	mplete s	paces below.	Sta	te	ZIP	code			0,	ntly, want \$3
HOUSTON					TΣ	Σ	77	081		_	ow will no	. Checking a t change
Foreign country name			F	Foreign province/state/county			Fore	ign postal	code	your tax or refund.		
											You	Spouse
Digital Assets		ny time during 2022, did you: (a) rece nange, gift, or otherwise dispose of a									Yes	⊠ No
-		neone can claim: You as a dep		<u>_</u>			assc	1): (3661	113111	ictions.)		
Standard Deduction		Spouse itemizes on a separate return		•								
Age/Blindness	You	: Were born before January 2, 19	958	Are blind S	pouse	: Was bo	rn be	fore Janu	ary 2	2, 1958	☐ Is b	olind
Dependents	s (see	instructions):		(2) Social secur	ity	(3) Relationsh	nip	(4) Check	the b	ox if quali	fies for (see	e instructions):
If more	(1) F	irst name Last name		number		to you		Child	tax c	redit	Credit for o	ther dependents
than four												
dependents, see instruction	s											
and check	, —											<u> </u>
here]											
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (see	e instructions) .						. 1a	1	80,625.
	b	Household employee wages not re	ported	on Form(s) W-2.						. 1b)	
Attach Form(s) W-2 here. Also	С	,								. 10		
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 10			
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							. 16			
was withheld.	f	Employer-provided adoption benef								. <u>1f</u>		
If you did not	g									. 10		
get a Form W-2, see	h	Other earned income (see instructions)							. <u>1</u> h	1	0.	
instructions.	i	Nontaxable combat pay election (s	ee instr	uctions)		<u>1</u> i						00 605
	<u>z</u>			· · · · · i						. 1z		80,625.
Attach Sch. B if required.	2a	'	2a			axable interes			٠	. 2b		
	3a_		3a			ordinary divide				. 3b		
<u> </u>	4a		4a			axable amoun				. 4b		
Standard Deduction for—	5a	-	5a			axable amoun axable amoun				. 5b		
Single or	6a	Social security benefits	Sa	mathad abadi bar					. г	. 6b	•	
Married filing separately,	C 7	,		•	•	,	•		. [
\$12,950	12,950 Total required in not required, check here					٠ ـ	. 8		0 1/10			
Married filing jointly or	8 9	Other income from Schedule 1, line 10							. 8		-8,148. 72,477.	
Qualifying surviving spouse,	10	Add liftes 12, 25, 35, 45, 35, 65, 7, Adjustments to income from Scheo					•			. 10		14,711.
\$25,900 • Head of	11	Subtract line 10 from line 9. This is	•				•			. 11		72,477.
household,	12	Standard deduction or itemized					•		•	. 12		12,950.
\$19,400 • If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A							. 13		<u> </u>	
any box under Standard	14	Add lines 12 and 13								. 14		12,950.
Deduction,	15								. 15		59,527.	
see instructions.										- 1		

Form 1040 (2022	2)									Page 2
Tax and	16	Tax (see instructions). Check it	any from Form	ı(s): 1 881	4 2 🗌 4972	3 🗌		16	8,	713.
Credits	17	Amount from Schedule 2, line	3					17		
	18	Add lines 16 and 17						18	8,	713.
	19	Child tax credit or credit for o	ther dependen	ts 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	8,	713.
	23	Other taxes, including self-en	nployment tax,	from Schedule	2, line 21 .			23		0.
	24	Add lines 22 and 23. This is y	our total tax					24	8,	713.
Payments	25	Federal income tax withheld f								
-	а	Form(s) W-2				25 a 1	0,510.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c .						25d	10,	510.
If you have a	26	2022 estimated tax payments	and amount a	pplied from 20	21 return			26		
qualifying child,	27	Earned income credit (EIC) .			No .	27				
attach Sch. EIC.	28	Additional child tax credit from	Schedule 8812	2		28				
	29	American opportunity credit f	rom Form 8863	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 your	total other pa	ayments and ref	undable credits		32		
	33	Add lines 25d, 26, and 32. Th	ese are your to	tal payments				33	10,	510.
Refund	34	If line 33 is more than line 24,	subtract line 2	4 from line 33.	This is the amou	ınt you overpai d		34	1,	797.
neruna	35a	Amount of line 34 you want re			is attached, che	ck here	\square	35a	1,	797.
Direct deposit?	b	Routing number 1 1 1				Checking	Savings			
See instructions.	d	Account number 9 2 3	2 4 3 6	0 0 7						
	36	Amount of line 34 you want ap	pplied to your	2023 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24. For details on how to pay, go						37		
	38	Estimated tax penalty (see ins	structions) .			38				
Third Party Designee		you want to allow another tructions	•				Complete	below.	X No	
		signee's		Phone			rsonal ident	ification		
	nar			no.			mber (PIN)			
Sign Here		der penalties of perjury, I declare th ief, they are true, correct, and comp			1 , 0		,		,	0
11010	Yo	ur signature		Date	Your occupation		Pro	tection P	nt you an Ider	
Joint return?				DATA ANALYST Date Spouse's occupation				e inst.)		
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.		Date	Ider	the IRS sent your spouse and dentity Protection PIN, enter it here see inst.)					
	- Dh	000 00 (070\004 72C)		Email address	G 7 G 7 D 2 O 1 2	ecmatt cor		,		
		one no. (979)224-7368 eparer's name	Preparer's signat	Email address	SAGAR3213	@GMAIL.COM Date	PTIN		Check if:	
Paid		'			מוורת החודים			2702	Self-em	anloyed
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPIA TALLAN	1 04/05/2023				· ·
Use Only		m's name GLOBAL TAX		INTOTAT OF AT	T 00016				(678)965-	
		m's address 245 ROONEY		INSWICK NO				n's EIN	84-317	
Go to www.irs.go	ov/Forn	n1040 for instructions and the lates	t information.		BAA	REV 03/22/23 PRO)		Form 10)40 (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

SAGAR BOHRA

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

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

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

Your social security number 677–87–6009

-8,148.
-8,148.
-8,148.
-8,148.
-8,148.
-8,148.
-8,148.

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

Educator expenses 11	Par	Adjustments to Income			
officials. Attach Form 2106 1 Health savings account deduction. Attach Form 8889 1 Health savings account deduction. Attach Form 8889 1 Deductible part of self-employment tax. Attach Schedule SE 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed health insurance deduction 1 The Penalty on early withdrawal of savings 1 Ba Alimony paid 1 Ba Pecipient's SSN 1 C Date of original divorce or separation agreement (see instructions): 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA desclustion 2 IFA desclustion 2 IFA desclustion 2 IFA description of future use 2 IFA desclustion 2 IFA description of future use 2 IFA descri	11			11	
officials. Attach Form 2106 1 Health savings account deduction. Attach Form 8889 1 Health savings account deduction. Attach Form 8889 1 Deductible part of self-employment tax. Attach Schedule SE 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed health insurance deduction 1 The Penalty on early withdrawal of savings 1 Ba Alimony paid 1 Ba Pecipient's SSN 1 C Date of original divorce or separation agreement (see instructions): 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA desclustion 2 IFA desclustion 2 IFA desclustion 2 IFA description of future use 2 IFA desclustion 2 IFA description of future use 2 IFA descri	12	Certain business expenses of reservists, performing artists, and fee-ba	asis government		
13 Health savings account deduction. Attach Form 8889		officials. Attach Form 2106		12	
15 Deductible part of self-employment tax. Attach Schedule SE 16 Self-employed SEP, SIMPLE, and qualified plans 17 Self-employed death insurance deduction 17 Penalty on early withdrawal of savings 18 Penalty on early withdrawal of savings 19a Alimony paid 19a Alimony paid 19a Recipient's SSN 19a Becipient's SSN 19a Becipient	13	Health savings account deduction. Attach Form 8889		13	
16 Self-employed SEP, SIMPLE, and qualified plans	14			14	
17 Self-employed health insurance deduction 18 Penalty on early withdrawal of savings 18 18 19 Alimony paid 19 Recipient's SSN 10 Date of original divorce or separation agreement (see instructions): 20 IRA deduction 21 Student loan interest deduction 22 Archer MSA deduction 23 Archer MSA deduction 24 Other adjustments: 25 Jury duty pay (see instructions) 26 Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit 24 Contributions of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m 24 Reforestation amortization and expenses 24 Repayment of supplemental unemployment benefits under the Trade Act of 1974 24 Contributions to section 501(c)(18)(D) pension plans 24 Contributions by certain chaplains to section 403(b) plans 24 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24 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 24 Jeli 25 Total other adjustments. Add lines 24a through 24z 26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	15			_	
18	16			-	
19a Alimony paid b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 IRA deduction		Self-employed health insurance deduction		-	
b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 1RA deduction	18			-	
c Date of original divorce or separation agreement (see instructions): IRA deduction	19a			19a	
20 Student loan interest deduction 21 22 23 24 22 24 24 24 24	b	Recipient's SSN			
Student loan interest deduction Reserved for future use Archer MSA deduction Other adjustments: Jury duty pay (see instructions) Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m. Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974. Contributions to section 501(c)(18)(D) pension plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 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 Housing deduction from Form 2555 Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Other adjustments. List type and amount: 25 Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	С	Date of original divorce or separation agreement (see instructions):			
22 Archer MSA deduction				-	
Archer MSA deduction Other adjustments: Jury duty pay (see instructions) Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974 Contributions to section 501(c)(18)(D) pension plans Contributions by certain chaplains to section 403(b) plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 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 Jeuseph Housing deduction from Form 2555 Let Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Cother adjustments. List type and amount: Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on				$\overline{}$	
24 Other adjustments: a Jury duty pay (see instructions) b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit				-	
a Jury duty pay (see instructions) b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m				23	
b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24		_		
rental of personal property engaged in for profit		, , , , ,	la		
c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	b				
and USOC prize money reported on line 8m			łb	-	
d Reforestation amortization and expenses	С				
e Repayment of supplemental unemployment benefits under the Trade Act of 1974					
Act of 1974			ła		
f Contributions to section 501(c)(18)(D) pension plans	е		la la		
g Contributions by certain chaplains to section 403(b) plans					
h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)				-	
discrimination claims (see instructions)	_		rg		
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	"		lh		
from the IRS for information you provided that helped the IRS detect tax law violations	i	·	***		
tax law violations	٠				
j Housing deduction from Form 2555			4i		
k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	i				
1041)	k		.,		
z Other adjustments. List type and amount:	•••		lk		
Total other adjustments. Add lines 24a through 24z	z				
Total other adjustments. Add lines 24a through 24z	_		łz		
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	25			25	
	26	,			
				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.

Attachment Sequence No. **13**

OMB No. 1545-0074

SAG	AR BOHRA						677-8	7-6009	
Pa	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			C. See	instru	ctions. If you	are an indiv	ridual, rep	ort farm
Α	Did you make any payments in 2022 that would require you	to file	Form(e) 1	naa2 S	Soo inc	tructions		□ Vc	s 🛮 No
В	If "Yes," did you or will you file required Form(s) 1099? .								
1a						<u> </u>			.5 _ 140
	1 1 3 1 3 1		7						
_ <u>A</u>	JAMALPUR, ALIGARH UTTAR PRADESH IN 202	2002							
В									
С					I _		Ι_		
1b	(from list below) above, report the number of fair	rental a	and		Fa	ir Rental Days	Person Da		QΊΛ
Α	personal use days. Check the Quif you meet the requirements to f			Α		365		0	
В	qualified joint venture. See instru			В					
С	qualifica joint vontaro. Coo motra	10110110		С					
Туре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land			Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Royal	ties	8	Other (desc	ribe)		
						Propert			
Inco	me'	ŀ		Α		В	103.		С
3	Rents received	3			00.				
4	Royalties received	4							
	enses:	+ •							
-/.p\	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,0	0.0				
8	Commissions	8		± , o					
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		8	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		2,2	07.				
15	Supplies	15		2,6					
16	Taxes	16							
17	Utilities	17		2,0	01.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		8,6	48.				
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		-8,1	48.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(8,14	8.)	()	(
23 a					23a		500.		
b	, , , , , , , , , , , , , , , , , , , ,	erties			23b				
С	•				23c				
d	·				23d				
е	·				23e	3	3,648.		
24	Income. Add positive amounts shown on line 21. Do no		-				. 24		
25	Losses. Add royalty losses from line 21 and rental real estat	te losse	es from lin	e 22. E	nter to	tal losses he	re 25	(8,148.
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, IV, and line 40 on page 2 do not Schedule 1 (Form 1040), line 5. Otherwise, include this ar						on		-8,148.