IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Submission Identification Number (SID)

Тахрау	er's name	Social security nur	nber
SRA	VIKA THATI	091-13-71	70
Spouse	o's name	Spouse's social se	curity number
Par	Tax Return Information – Tax Year Ending December 31, 2022 (Ent	ter year you are a	uthorizing.)
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	70,871.
2	Total tax	2	8,361.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	10,404.
4	Amount you want refunded to you	4	2,043.
5	Amount you owe	5	

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.

Тахрауе	er's PIN: che	eck one box only					2 7	1 7 0]
X	l authorize	GLOBAL TAXE	S LLC		to enter or generate	e my PIN	3 7	1 7 0	as my
	signature or	the income tax re	ERO firm name eturn (original or	amended) I am now a	authorizing.			e digits, but er all zeros	
		, , ,		ome tax return (origin turn is filed using the	Practitioner PIN met	thod. The	ERO mus	st comple ⁻	
Your sig	nature	·Sanote			Date ►	04/1:	3/202	3	
Spouse	's PIN: chec	k one box only							1
	I authorize				to enter or generate	e my PIN			as my
	signature or	n the income tax re	ERO firm name eturn (original or	amended) I am now a	authorizing.			e digits, but er all zeros	
				ome tax return (origin turn is filed using the					
Spouse'	s signature 🕨	•			Date 🕨				
		Pi	actitioner PIN	Method Returns Or	nly—continue belov	W			

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.

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 🕨	re ► Date ►							
Fee Demonstrale Deduction Act N	ation and second and second in structure to a		Farm 8870 (Day, 01 0001)					

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

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		_{rn} 202	2	OMB No. 1545	-0074	IRS Use Only	—Do not w	rite or staple in this space.
Filing Status Check only one box.	lf yo	u checked the MFS box, enter the na	ame of you	filing separately (N ur spouse. If you cl	,				spor	lifying surviving use (QSS) s name if the qualifying
		on is a child but not your dependent								
Your first name	and mi	iddle initial	Last name							cial security number
SRAVIKA		<i>.</i>	THATI							13-7170
If joint return, sp	oouse's	s first name and middle initial	Last name	9					Spouse'	's social security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruction:	s.			A	Apt. no.	Preside	ntial Election Campaigr
714 EWEI	L FZ	ARM DR								here if you, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete spa	aces below.	Sta	te	ZIP c	ode		if filing jointly, want \$3 this fund. Checking a
SPRING H	ILL				T1	1 L	371	74		ow will not change
Foreign country	name		Foi	reign province/state/	coun	ty	Foreig	n postal code		k or refund.
										You Spouse
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a					•	,	. ,	Yes X No
Standard		eone can claim: You as a de	-	Your spous		-	a5501)		10110113.)	
Deduction		Spouse itemizes on a separate return	•	· ·		•				
Age/Blindness	You	Were born before January 2, 1	958	Are blind Spo	ouse	: 🗌 Was bor	n befo	ore January 2	2, 1958	Is blind
Dependents				(2) Social security		(3) Relationsh	1			fies for (see instructions):
If more	•	irst name Last name		number		to you		Child tax c	redit	Credit for other dependents
than four										
dependents, see instructions										
and check	·									
here										
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see i	instructions) .					. 1a	80,163.
	b	Household employee wages not re	eported or	n Form(s) W-2 .					. 1b)
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	ı (see instr	ructions)					. 1c	;
attach Forms	d	Medicaid waiver payments not rep	orted on I	Form(s) W-2 (see ir	nstru	ictions)			. 1d	1
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Form	2441, line 26					. 1e	•
was withheld.	f	Employer-provided adoption bene	fits from F	orm 8839, line 29					. 1f	
lf you did not	g	Wages from Form 8919, line 6 .							. 1 g	
get a Form W-2, see	h	Other earned income (see instructi	ions) .			· · · · ·	· ·		. 1h	0.
instructions.	i	Nontaxable combat pay election (s	see instruc	ctions)		1 i				
	z	Add lines 1a through 1h	· · ·						. 1z	80,163.
Attach Sch. B	2a	· -	2a			axable interest			. 2b	
if required.	3a		3a			ordinary divider			. 3 b	
	4a		4a			axable amount			. 4b	
Standard Deduction for —	5a		5a			axable amoun			. 5b	
Single or	6a		6a			axable amount	t	· · ·	. 6b	•
Married filing separately,	с	If you elect to use the lump-sum el					• •	L		
\$12,950	7	Capital gain or (loss). Attach Scheo					• •	L	_ 7	
 Married filing jointly or 	8	Other income from Schedule 1, line		· · · · · · ·			· ·		. 8	-9,292.
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-				· · ·	. 9 . 10	70,871.
\$25,900	10	Adjustments to income from Schedule 1, line 26								
 Head of household, 	11	Subtract line 10 from line 9. This is	-				• •		. 11	
\$19,400	12	Standard deduction or itemized					• •		. 12	
 If you checked any box under 	13	Qualified business income deducti					• •		. 13	
Standard Deduction,	14 15	Add lines 12 and 13					· ·		. 14	1
see instructions.	15	Subtract line 14 from line 11. If zer	o or less,	enter -u This is y	our		е.		. 15	57,921.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	8,361.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	8,361.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	8,361.
	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	8,361.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 10	,404.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	10,404.
If	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return			26	
If you have a qualifying child,	27	Earned income credit (EIC)			No	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, lir				31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	Indable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	10,404.
Refund	34	If line 33 is more than line 24						34	2,043.
Refutio	35a	Amount of line 34 you want				•	. 🗆	35a	2,043.
Direct deposit?	b	Routing number 1 1 1					Savings		
See instructions.	d	Account number 4 8 8					0		
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	This is the am	ount vou owe					
You Owe		For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee		structions	· · · · ·			. 🗌 Yes. Co	omplete b	elow.	🗙 No
		signee's		Phone			onal identif	ication	
	nai			no.			ber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here		ur signature		Date	Your occupation		1	· ·	nt you an Identity
	10	ul signature		Date					IN, enter it here
Joint return?					SOFTWARE I	DEVELOPER	(see i	nst.)	
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupati	on			nt your spouse an
Keep a copy for your records.							Ident (see i		ection PIN, enter it here
,		(000) 000 001					(1131.)	
		one no. (832) 888-391		Email address	SRAVIKATHAT	I.7@GMAIL.CO			Charlet
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	04/14/2023	P02082		Self-employed
Use Only		m's name GLOBAL TAX			- 0001.0				678)965-9522
			Y CT E BRU	NSWICK N	J U8816		Firm'	s EIN	84-3171965
Go to wanter inc. ~	ov/Form	n1040 for instructions and the late	et information						Earm 1040 (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.

OMB No. 1545-0074 2

Department of the Treasury Internal Revenue Service		Attachment Sequence No. 01	
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
SRAVIKA THATI		091-13	-7170
		-	

6 Farm income or (loss). Attach Schedule F. 6 7 Unemployment compensation 7 8 Other income: 8a () 9 Net operating loss 8a () 9 Total other income. Add lines 8a through 8z 9	Par	t Additional Income										
2a Alimony received 2a b Date of original divorce or separation agreement (see instructions): 3 B usiness income or (loss). Attach Schedule C 3 4 Other gains or (losse). Attach Schedule F 4 5 Rental real estate, royalities, partnerships, S corporations, trusts, etc. Attach Schedule E 5 -9, 6 Tincome or (loss). Attach Schedule F 6 7 7 Unemployment compensation 8a (7 8 Other income: 8a (7 9 Gambling 8b 8c c Cancellation of debt 8d (8e 8d (1 Income from Form 8853 8e 8d (1 Income from Form 8853 8e 8d (1 Income from Form 8853 8e 8d (1 Alaska Permanent Fund dividends 8g 8i 1 Alaska Permanent Fund dividends 8d 8d 1 Alaska Permanent Fund dividends 8g 8d 1 Net options 8d 8d 8d 1 Activity not engaged in for profit income	1	Taxable refunds, credits, or offsets of state and local income taxes		1								
b Date of original divorce or separation agreement (see instructions): 3 3 Business income or (loss). Attach Schedule C 3 4 5 6 Fanna Income or (loss). Attach Schedule F 4 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 5 6 Farm income or (loss). Attach Schedule F 7 7 Unemployment compensation 7 8 Other income: 8a (9 Gambling 8b 7 6 Foreign earned income exclusion from Form 2555 8d (9 9 Alaska Permanent Fund dividends 8g 8h 1 Income from Form 8853 8f 8h 1 Prizes and awards 8i 8i 1 Activity not engaged in for profit income 8i 8k 1 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 8n 8n 1 Nortaxable distributions (see instructions) 8n 8a 8a 1 Nortaxable amount of Medicaid waiver payments included on Form 1040, li	2a			2a								
3 Business income or (loss). Attach Form 4797 3 4 Other gains or (losses). Attach Form 4797 4 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 5 -9, 6 Farm income or (loss). Attach Schedule F 6 -9, 7 Unemployment compensation 7 8 Other income: 8a (9 9 Total other income: 8a (9 9 Total other income: 8a (9 9 Total other income: 8a (9	b											
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7 Unemployment compensation	6			6								
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k Stock options	i	Prizes and awards	8i									
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p Section 461(l) excess business loss adjustment 8p 8g q Taxable distributions from an ABLE account (see instructions) 8q 8q r Scholarship and fellowship grants not reported on Form W-2 8r 8r s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d 8s (9 t Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan 8t 8t u Wages earned while incarcerated 8u 8t 8u g Total other income. Add lines 8a through 8z 9 9	n	Section 951(a) inclusion (see instructions)	8n									
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 r Scholarship and fellowship grants not reported on Form W-2 s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	р	Section 461(I) excess business loss adjustment	8p									
s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d 8s () t Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan 8t 8t u Wages earned while incarcerated 8u 8u 8u other income. List type and amount: 8z 9 Total other income. Add lines 8a through 8z 9	q	Taxable distributions from an ABLE account (see instructions)	8q									
1040, line 1a or 1d 1040, line 1a or 1d<	r		8r									
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: 8z 9 Total other income. Add lines 8a through 8z 9	S											
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			8s ()								
u Wages earned while incarcerated 8u z Other income. List type and amount: 8z 9 Total other income. Add lines 8a through 8z 9	t											
z Other income. List type and amount: 8z 9 Total other income. Add lines 8a through 8z			8t									
8z 9 Total other income. Add lines 8a through 8z	u		8u									
8z 9 Total other income. Add lines 8a through 8z	z	Other income. List type and amount:										
			-									
10 Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 10 -9,	9											
	10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF	l, or 1040-NR, line 8	10	-9,292.							

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 gove	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	le 1 (Form 1040) 2022

	EDULE E		Supplementa							OMB No. 1545-0074		
(Form	orm 1040) (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)							2022				
	partment of the Treasury Attach to Form 1040, 1040-SR, 1040-NR, or 1041. genul Revenue Service Go to www.irs.gov/ScheduleE for instructions and the latest information.						Attachn Seguen	nent ce No. 13				
) shown on return								our socia	al security		
SRAV	IKA THATI							C	91-1	3-7170		
Part	I Income	or Lo	ss From Rental Real Estate an	d Ro	yalties							
	Note: If yo	ou are in	the business of renting personal proper	ty, use	Schedule	C. See	instru	ctions. If you are	an indiv	/idual, rep	ort farm	
A [oss from Form 4835 on page 2, line 40.	to file		0000 0	See in	tructions				
			nents in 2022 that would require you									
			you file required Form(s) 1099?							re		
_1a			each property (street, city, state, ZIF		,							
Α	H.NO:12-1	14/7,	MAIN ROAD KODAD SURYAPE	ET TE	ELANGAN	A IN	508	206				
B												
<u> </u>												
1b	Type of Prope (from list below		For each rental real estate prope above, report the number of fair	erty list	ted		Fa	_	Person Da	al Use	QJV	
A	3	vv)	personal use days. Check the Q			Α		Days 365	Da	0		
	3		if you meet the requirements to f	file as	a	B		303		0		
			qualified joint venture. See instru	ictions	s	C						
	of Property:	I				•						
	Single Family R	esidend	ce 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental				
	Multi-Family Re				6 Roya	lties	8	Other (describ	e)			
	-				-			Properties				
Incom						Α		B).		С	
3		ł		3			27.				•	
4				4			<u> </u>					
Exper				<u> </u>								
5				5								
6			nstructions)	6								
7		-	nance	7		2,4	15.					
8	Commissions			8								
9	Insurance			9								
10			ssional fees	10								
11				11		1,2	41.					
12			d to banks, etc. (see instructions)	12								
13				13			0.1					
14				14		2,3						
15				15		Ζ,Ο	73.					
16 17				16 17		1,8	89					
18			or depletion	18		1,0	0.7.					
19		•	·	19								
20		s. Add I	lines 5 through 19	20		9,9	19.					
21	Subtract line 2	20 from	line 3 (rents) and/or 4 (royalties). If									
			instructions to find out if you must									
				21		-9,2	92.					
22			estate loss after limitation, if any, structions)	22	(9,29	12 1	((,	
23a			eported on line 3 for all rental prope				/∠.) 23a		/ 627.	\)	
b			eported on line 4 for all royalty prop				23b		•			
c			eported on line 12 for all properties				23c					
d			eported on line 18 for all properties				23d					
е			eported on line 20 for all properties				23e	9,9	919.			
24			e amounts shown on line 21. Do no						24			
25			osses from line 21 and rental real estat						25	(9,292.)	
26			ate and royalty income or (loss).									
			V, and line 40 on page 2 do not 40), line 5. Otherwise, include this ar						26		-9,292.	

For Paperwork Reduction	Act Notice, see	e the separate	instructions.

NPA

-9,292.

Schedule E (Form 1040) 2022