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)

T.....

Taxpayer's name	Social security number
VIJAY KUMAR YARASINGU	507-91-1283
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2022 (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 72,505.
2 Total tax	2 8,724.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 12,636.
4 Amount you want refunded to you	· · · · 4 3,912.
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.

Taxpayer's PIN: check one box only

				FBO firm name		E
X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	

Enter five digits, but don't enter all zeros										

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

signature on the income tax return (original or amended) I am now authorizing.

ERO firm name

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 Returns Only—continue below						
Part III Certification and Authentication – P	ctitioner PIN Method Only					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by y	ur five-digit self-selected PIN. 2 2 2 4 9 6 6 1 9 8	9				

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 >	Date 🕨									
ERO Must Retain Don't Submit This Form to										
For Paperwork Reduction Act Notice, see your tax return instru-	ctions. BAA	REV 01/14/23 PRO	Form 8879 (Rev. 01-2021)							

E 1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn 202	2	OMB No. 1545	-0074	IRS Us	e Only	—Do not v	vrite or stap	le in this space.
Filing Status Check only one box.	lf yc	Single Arried filing jointly successful dependent of the MFS box, enter the name on is a child but not your dependent	ame of y	ed filing separately (vour spouse. If you c	,				,	spo	alifying su use (QSS s name if	6)
Your first name	and m	iddle initial	Last na	me						Your se	ocial secu	rity number
VIJAY KU	IMAR		YARA	SINGU							91-12	-
		s first name and middle initial	Last na									ecurity number
-												
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.				Apt. no.		Preside	ential Elec	tion Campaign
7524 SOU	THS	IDE BLVD						306		Check	here if yo	u, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	Sta	te	ZIP					bintly, want \$3
JACKSONV	/ILL	E			FL	1	32	256		0		d. Checking a ot change
Foreign country	name		F	oreign province/state	'count	у	Forei	gn postal o	code		x or refun	•
											🗌 You	I Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a										s 🛛 No
Standard Deduction	_	eone can claim:	•	— ·		·						
Age/Blindness	You	: 🗌 Were born before January 2, 1	958	Are blind Sp	ouse	: 🗌 Was bor	rn bef	ore Janu	iary 2	2, 1958	ls Is	blind
Dependents	s (see	instructions):		(2) Social securit	v	(3) Relationsh	nip (4) Check	the b	ox if qual	ifies for (se	ee 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, b	ox 1 (se	e instructions) .						. 1a	a 📃	81,695.
	b	Household employee wages not re	•	.,						. 11	>	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	ı (see ins	structions)			• •			. 10	>	
attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s) W-2 (see	instru	ctions)	• •			. 10	k	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom For	m 2441, line 26			• •			. 10	•	
was withheld.	f	Employer-provided adoption bene	fits from	n Form 8839, line 29	• •		• •			. 11	f	
lf you did not	g	Wages from Form 8919, line 6 .					• •			. <u>1</u> ç	9	
get a Form W-2, see	h	Other earned income (see instruct	,			1	· ·		•	. 11	1	0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		<u>1</u> i						
	Z	Add lines 1a through 1h	· · ·						•	. 12		81,695.
Attach Sch. B	2a	' ⊢	2a			axable interest			·	. <u>2</u> k		
if required.	<u>3a</u>		3a			rdinary divide			·	. 3ł		
	4a		4a			axable amoun			·	. 41		
Standard Deduction for—	5a		5a			axable amoun			·	. 5k		
 Single or 	6a	, _	6a	nothed shark have		axable amoun	ι		г	. 6ł	,	
Married filing separately,	с 7	If you elect to use the lump-sum e				,	• •		• L			
\$12,950	7 8	Capital gain or (loss). Attach Scher Other income from Schedule 1, lin					• •		. L	_ 7 . 8		0 100
 Married filing jointly or 	8 9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		 This is your total in			• •		•	. 8 . 9	-	<u>-9,190.</u>
Qualifying surviving spouse,	9 10	Add lines 12, 20, 30, 40, 50, 60, 7 Adjustments to income from Sche				*	• •		•	. 9 . 10		72,505.
\$25,900 • Head of	11	Subtract line 10 from line 9. This is					• •		•	· <u> </u>		72 505
household,	12	Subtract line to from line 9. This is Standard deduction or itemized					• •		•	· 12		72,505.
\$19,400 • If you checked	13	Qualified business income deduct		,	,	 5-А	• •		•	· 11		,U.
any box under	14						• •		•	. 14		12,950.
Standard Deduction,	15	Subtract line 14 from line 11. If zer								· <u>·</u>		<u>12,950.</u> 59,555.
see instructions.			0 01 100		, 501 1				•		-	

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

Form **1040** (2022)

Form 1040 (2022	2)								Page
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 🗌 881	4 2 4972	3		16	8,724.
Credits	17	Amount from Schedule 2, lir	ne3				-	17	
	18	Add lines 16 and 17 .						18	8,724.
	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						22	8,724.
	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	8,724.
Payments	25	Federal income tax withheld							
,, ,	а	Form(s) W-2				25a 12	2,636.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c	<i>.</i>					25d	12,636.
15	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)				27			
attach Sch. EIC.	28	Additional child tax credit from				28		1	
	29	American opportunity credit	from Form 8863	3, line 8		29		1	
	30	Reserved for future use .				30		1	
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27, 28, 29, and 31				undable credits		32	
	33	Add lines 25d, 26, and 32. T	2	-	-			33	12,636.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	3,912.
neiulia	35a	Amount of line 34 you want	refunded to you	u. If Form 8888	is attached, che	ck here	🗆	35a	3,912.
Direct deposit?	b	Routing number 0 1 1					Savings		
See instructions.	d	Account number 3 8 8	0 0 4 8	8 2 3 8	3 6 7		-		
	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 amo	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. C	omplete l	below.	X No
		signee's		Phone			sonal identi	fication	
	na			no.			iber (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	ar signature		Date					IN, enter it here
Joint return?					SOFTWARE I	ENGINEER	(see	inst.)	
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupat	ion			nt your spouse an
Keep a copy for your records.								tity Prote inst.)	ection PIN, enter it here
-	Dh		F	Email address			(,	
		one no. (603)867-950 eparer's name	5 Preparer's signat	Email address	YVK784@GM	Date	PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM			ለጠውጥአ ጥአተተ አለ			2202	Self-employed
Preparer				RAM SAGAR	GUPIA IALLAM	01/22/2023			
Use Only		m's name GLOBAL TAX			T 00016				678)965-9522
		m's address 245 ROONE	Y CT E BRU	TIDMICK IN	J 08816		Firm	's EIN	88-2145487
IND TO WWW/W/ INC O	OV/FOrr	n 111411 for instructions and the late	st intormation			DEV/04/44/00 DDO			Lorm 1141 (2020

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

REV 01/14/23 PRO BAA

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 VIJAY KUMAR YARASINGU 507-91-1283

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	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. Att	ach Schedule E .	5	-9,190.
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		
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	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
ο	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	8s ()	
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	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF	l, or 1040-NR, line 8	10	-9,190.
D	e e construit de Brende e Martin e Alex Martin e construction de la construction de la construction de la const			

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

Schedule 1 (Form 1040) 2022

Par	II Adjustments to Income					
11	Educator expenses				. 11	
12	Certain business expenses of reservists, performing artists, and fee				nt	
	officials. Attach Form 2106				. 12	
13	Health savings account deduction. Attach Form 8889					
14	Moving expenses for members of the Armed Forces. Attach Form 3903				. 14	
15	Deductible part of self-employment tax. Attach Schedule SE					
16	Self-employed SEP, SIMPLE, and qualified plans				. 16	
17	Self-employed health insurance deduction				. 17	
18	Penalty on early withdrawal of savings					
19a	Alimony paid					
b	Recipient's SSN					
С	Date of original divorce or separation agreement (see instructions):	_			-	
20	IRA deduction					
21	Student loan interest deduction					
22	Reserved for future use					
23	Archer MSA deduction				. 23	
24	Other adjustments:					
 a		24a				
	Deductible expenses related to income reported on line 8l from the					
		24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					
	and USOC prize money reported on line 8m	24c				
d		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				
q	Contributions by certain chaplains to section 403(b) plans	24g				
·	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				
i	Housing deduction from Form 2555	24j				
	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					
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a					
	BAA	REV	01/14/23	PRO	Schedu	ile 1 (Form 1040) 202

	EDULE E 1040)	Supplemental Income and Loss OMB No.							b. 1545	-0074		
		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.) Attach to Form 1040, 1040-SR, 1040-NR, or 1041.								2()2	2
	nent of the Treasury Revenue Service		Go to www.irs.gov/ScheduleE fo					formation.		Attachn Sequen	nent ce No.	13
) shown on return	n return Your social										
VIJA	AY KUMAR YARASINGU 507-91-1283											
Par	Income	or Loss	s From Rental Real Estate an	nd Ro	yalties				1			
	Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.											
			nts in 2022 that would require you									No
В	f "Yes," did you	or will ye	ou file required Form(s) 1099? .							. 🗌 Ye	es 🗌	No
1a	Physical addr	ess of ea	ach property (street, city, state, Zl	P code	e)							
Α	1-73 CHIL	AMKUR,	PAMUR PRAKHASAM DIST AN	NDHRA	A PRADE	SH I	N 52	3108				
В												
С												
1b	Type of Prope	rty 2	For each rental real estate prope	erty list	ted		Fa	ir Rental	Person	al Use		. IV/
	(from list below	N)	above, report the number of fair	rental	and			Days	Da	ys	J	ίJΛ
Α	3		personal use days. Check the Q			Α		365		0		
В			if you meet the requirements to a qualified joint venture. See instru			В						
С						С						
	of Property:											
	Single Family R			ntal	5 Land		-	Self-Rental				
2	Multi-Family Re	sidence	4 Commercial		6 Roya	alties	8	Other (desc	ribe)			
								Propert	ies:			
Incon	ne:					Α		В			С	
3	Rents received	ł		3		4	90.					
4	Royalties recei	ived		4								
Expe	ises:											
5				5								
6		-	structions)	6								
7	-		nce	7		1,1	80.					
8				8								
9				9								
10 11			sional fees	10		1,300.						
12			to banks, etc. (see instructions)	12		1,3	00.					
13												
14				14		2,1	60.					
15	Supplies			15		2,4						
16				16		_,_						
17				17		2,6	00.					
18			or depletion	18								
19	Other (list)		·	19								
20	Total expenses		nes 5 through 19	20		9,6	80.					
21	Subtract line 2	0 from li	ne 3 (rents) and/or 4 (royalties). If									
			structions to find out if you must									
				21		-9,1	90.					
22			estate loss after limitation, if any,			0		/		,		
~~		-	tructions)	22	(90.)	()	()
23a			ported on line 3 for all rental prope			• •	23a		490.			
b			ported on line 4 for all royalty prop ported on line 12 for all properties			• •	23b 23c					
c d			ported on line 12 for all properties				23c 23d					
e e			ported on line 20 for all properties		· · ·		23u	(9,680.			
24			amounts shown on line 21. Do no						. 24			

25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses her 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount of 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 instructions.

NPA

210		
	24	
losses here	25	(9,190.)
r the result amount on		
page 2 .	26	-9,190.
-9,190.	Sc	hedule E (Form 1040) 2022

