IRS *e-file* Signature Authorization

OMB No. 1545-0074

Social accurity number

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)

Taxpayer's name

Taxpayer's name	Social security number
KUSHAGRA SHARMA	670-35-1054
Spouse's name	Spouse's social security number
NAVI SINGH THAKUR	980-99-7079
Part I Tax Return Information – Tax Year Ending December 31, 2022 (En	ter 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	1 126,644.
2 Total tax	2 13,398.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 15,625.
4 Amount you want refunded to you	4 2,227.
5 Amount you owe	5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	d keep a copy of your return)

Under penalties of perjury, 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	r
\mathbf{X}	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN		-
			-			1 5	٦

5	1	0	5	4	
Ent dor	er fiv i't er	/e di nter a	gits, all ze	but ros	as

7

9

as mv

7

0

Enter five digits, but don't enter all zeros

9

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 🕨

Spouse's PIN: check one box only

X I authorize GLOBAL TAXES LLC
ERO firm name

to enter or generate my PIN

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 🕨	Da	te 🕨	•							
Practitioner PIN Method Returns Only—continue below										
Part III Certification and Authentication –	Practitioner PIN Method Only									
ERO's EFIN/PIN. Enter your six-digit EFIN followed b	by your five-digit self-selected PIN.	2	2		 	6 all ze	 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 🕨	
Don	ERO Must Retain This Form – Submit This Form to the IRS Unl		
			F 0070 (D 01 0001)

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

Date

1040		rtment of the Treasury—Internal Revenue Servi S. Individual Income Tax		i rn	202	2	OMB No. 1545	-0074	IRS Use Only	–Do not w	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly u checked the MFS box, enter the na on is a child but not your dependent	ame of yo	U	parately (M se. If you ch	,				spo	lifying surv use (QSS) s name if th	U
Your first name	and mi	ddle initial	Last nam	ne						Your so	cial securit	ty number
KUSHAGRA			SHARN	ЧA						670-	35-105	4
If joint return, sp	ouse's	first name and middle initial	Last nam	ne						Spouse	's social sec	curity number
NAVI SIN	GH		THAKU	JR						980-	99-707	9
Home address (numbe	r and street). If you have a P.O. box, see	instructio	ns.				A	pt. no.	Preside	ntial Election	on Campaigr
21772 SL	ATE	RANGE TERR						4	00	Check I	here if you,	or your
		ce. If you have a foreign address, also co	mplete sp	aces belov	w.	Sta	te	ZIP c	ode			itly, want \$3
ASHBURN						VA	4	201	47	Ŭ		Checking a change
Foreign country	name		Fo	oreign prov	vince/state/c	ount	ÿ	Foreig	n postal code	box below will not change your tax or refund. You Spous		
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a				-		-			 Yes	No
Standard		eone can claim: You as a de					a dependent		. (
Deduction	_	Spouse itemizes on a separate return	•				•					
Age/Blindness	You:	Were born before January 2, 1	958	Are blin	d Spo	use	: 🗌 Was bor	n befo	ore January 2	2, 1958	🗌 ls bl	ind
Dependents	(see	instructions):		(2) So	cial security		(3) Relationsh	ip (4) Check the b	ox if quali	fies for (see	instructions):
If more	(1) Fi	rst name Last name		n	number		to you		Child tax c	redit	Credit for ot	her dependents
than four											[
dependents, see instructions											[
and check											[
here 🗌											[
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	instructi	ons)					. 1a	ı 13	38,457.
	b	Household employee wages not re	eported o	on Form(s	s) W-2					. 1b)	
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	(see inst	tructions)						. 10	;	
attach Forms	d	Medicaid waiver payments not rep	orted on	Form(s)	W-2 (see in	stru	ctions)			. 1d	1	
W-2G and	е	Taxable dependent care benefits f	rom Forn	n 2441, li	ne 26 .					. 1e	•	
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	Form 883	39, line 29					. 1f		
lf you did not	g	Wages from Form 8919, line 6 .								. 1g	1	
get a Form	h	Other earned income (see instructi	ons) .							. 1h	1	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instru	uctions)			1 i					
	z	Add lines 1a through 1h								. 1z	: 13	38,457.
Attach Sch. B	2a	Tax-exempt interest	2a		1	bТ	axable interest	: .		. 2b)	
if required.	3a	Qualified dividends	3a		1	bО	rdinary divide	nds .		. 3b)	
	4a	IRA distributions	4a		1	bТ	axable amoun	t		. 4b		
Standard	5a	Pensions and annuities	5a		I	bТ	axable amoun	t		. 5b)	
Deduction for -	6a	Social security benefits	6a		I	bТ	axable amoun	t		. 6b)	
 Single or Married filing 	с	If you elect to use the lump-sum e	lection m	ethod, cl	heck here (s	see	instructions)		[
separately, \$12,950	7	Capital gain or (loss). Attach Schee	dule D if i	required.	If not requi	red	, check here		[7		
Married filing	8	Other income from Schedule 1, line								. 8	-1	11,813.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T							. 9		26,644.
surviving spouse,	10	Adjustments to income from Sche								. 10		
\$25,900 • Head of	11	Subtract line 10 from line 9. This is								. 11		26,644.
household, \$19,400	12	Standard deduction or itemized	•							. 12		25,900.
If you checked	13	Qualified business income deducti		`		'	5-A			. 13		
any box under Standard	14	Add lines 12 and 13								. 14		25,900.
Deduction,	15	Subtract line 14 from line 11. If zer	o or less	, enter -0	This is vo	our i	axable incom	е.		. 15)0,744.
see instructions.												

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	13,398.
Credits	17	Amount from Schedule 2, lir	ne3						17	
	18	Add lines 16 and 17							18	13,398.
	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	B. If zero or less,	enter -0					22	13,398.
	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	13,398.
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				25a	15,	625.		
	b	Form(s) 1099				25b				
	с	Other forms (see instruction				25c				
	d	Add lines 25a through 25c	· · · · ·						25d	15,625.
16	26	2022 estimated tax paymen	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 fro				28				
	29	American opportunity credit	from Form 8863	8, 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	undable	e credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	15,625.
Refund	34	If line 33 is more than line 24							34	2,227.
Refutio	35a	Amount of line 34 you want				•	-		35a	2,227.
Direct deposit?	b	Routing number 0 2 1				Check		avings		
See instructions.	d	Account number 4 8 3	0 5 5 8	6 6 3 2	2 4 1		ľ	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 i	nstructions) .			38				
Third Party	Do	you want to allow another	r person to disc	cuss this retu	rn with the IRS?	See				
Designee		structions	· · · · ·				🗌 Yes. Co	mplete b	elow.	X No
		signee's		Phone				hal identif	cation	
	na			no.				er (PIN)		
Sign		der penalties of perjury, I declare tief, they are true, correct, and corr								
Here		ur signature		Date	Your occupation					nt you an Identity
	10	ur signature		Date						IN, enter it here
Joint return?					SENIOR SOFT	WARE	ENGINEER	ر (see i	nst.)	
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat	ion				nt your spouse an
Keep a copy for your records.						_		Identi (see i		ection PIN, enter it here
,		(510) 004 006			HOME MAKE		0.01.07.77.000	`	131.)	
		one no. (518) 894-296		Email address	KUSHAGRA.SHAF	1	-			Check if:
Paid		eparer's name	Preparer's signat		OIIDMA	Date		PTIN		
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	102/1	1/2023	P02082		Self-employed
Use Only		m's name GLOBAL TA			T 0001C					678) 965-9522
			Y CT E BRU	NSWICK N	1 08810			Firm'	s EIN	84-3171965
Go to www.irc.a	ov/Eorr	1040 for instructions and the late	et information							Form 1040 (2022)

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

BAA REV 02/05/23 PRO

Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

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** Your social security number 670-35-1054

Department of the Treasury	
Internal Revenue Service	

Name(s) show	vn on For	m 1(040, 10 ⁴	40-SR, or	[·] 1040-NR	
KUSHAGRA	SHARMA	3 &	NAVI	SINGH	THAKUR	

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	-11,813.
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		
I.	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	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t	-	
	Wages earned while incarcerated	<u>8u</u>		
Z	Other income. List type and amount:	0-		
0	Tatal ather income. Add lines On through On	8z		
9	Total other income. Add lines 8a through 8z		9	11 010
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR,	, or 1040-INK, line 8	10	-11,813.

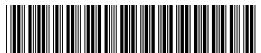
For Paperwork Reduction Act Notice, see your tax return instructions.

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 8l 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	
	ВАА	REV	02/05/23 P	RO	Schedu	le 1 (Form 1040) 2022

SCHEDULE E		Supplemental Income and Loss						OMB No. 1545-0074		
(Form 1040) (From rental real estate, royalties, partr			-			trusts, REMICs	, etc.)	20	22	
Department of the Treasury Attach to Form 1040, Internal Revenue Service Go to www.irs.gov/ScheduleE for							formation		Attachm	nent ce No. 13
Name(s) shown on return						itest in		our socia	al security	
							5-1054	lamber		
Part		or Loss From Rental Real Estate a	and Ro	valties				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0 1001	
	Note: If yo	ou are in the business of renting personal prop ome or loss from Form 4835 on page 2, line 4	perty, use		e C. See	instru	ctions. If you are	an indiv	vidual, rep	ort farm
Α		y payments in 2022 that would require yo		Eorm(s) 1	10002 9	Soo inc	tructions			e X No
		or will you file required Form(s) 1099?								
1 a	Physical addr	ress of each property (street, city, state, 2	ZIP cod	e)						
Α	2176/5 EK	TA PARISAR RATAN NAGAR, JAB	ALPUR	MADHYA	A PRA	DESH	IN 482001			
В										
С										
1b	Type of Prope					Fa			al Use	QJV
	(from list below	 above, report the number of fa personal use days. Check the 					Days	Da	-	
	3	if you meet the requirements to			A		365		0	
<u>В</u> С		qualified joint venture. See inst			BC					
	of Property:				C					
•••	Single Family R	esidence 3 Vacation/Short-Term Re	ental	5 Lanc	4	7	Self-Rental			
	Multi-Family Re		ontai	6 Roya			Other (describ	e)		
							Properties	;		0
Incom		4	2		A	2.4	В			С
3 4		1			1,6	24.				
Expen										
5			. 5							
6	-	el (see instructions)	-							
7					2,4	68.				
8	•		. 8		,					
9			. 9							
10		er professional fees								
11	Management f	ees	. 11		2,7	97.				
12	Mortgage inter	rest paid to banks, etc. (see instructions)	12							
13	Other interest		. 13							
14	Repairs		. 14		2,6	88.				
15	Supplies		. 15		2,5	78.				
16			-							
17					2,9	06.				
18		xpense or depletion								
19	Other (list)				10.4	0 -				
20	•	s. Add lines 5 through 19			13,4	31.				
21		0 from line 3 (rents) and/or 4 (royalties).								
	file Form 6198	s), see instructions to find out if you mus	. 21		-11,8	13				
22		tal real estate loss after limitation, if any			11/0	10.				
~~		(see instructions)	. 22	(11,81	3.)	()	()
23a		ounts reported on line 3 for all rental pro				23a		, 624.		/
b		ounts reported on line 4 for all royalty pro	-			23b	,			
С		ounts reported on line 12 for all propertie	-			23c				
d		ounts reported on line 18 for all propertie				23d				
е	Total of all amounts reported on line 20 for all properties									
24		positive amounts shown on line 21. Do I		-				24		
25		oyalty losses from line 21 and rental real es						25	(11,813.)
26		eal estate and royalty income or (loss								
		II, III, IV, and line 40 on page 2 do no								11 010
F . F		orm 1040), line 5. Otherwise, include this		t in the to NE		ne 41	on page 2 . -11,813.	26		-11,813.
FOR Pa	nanwork Roduct	IND ACT NOTICO SOO TAO SODARATO INSTRUCTION			~			6.1		orm 1040) 2023

Schedule E (Form 1040) 2022





KUSHAGRA NAVI SINGH 21772 SLATE RA	SHARMA THAKUR NGE TERF	R APT 400			
ASHBURN	V	VA 20147			
SSN - You SH	IAR	670351054	Vendor ID 1555	XX	XXX —
SSN - Spouse TH	IAK	980997079			
Fed Adj Gross Income (FAGI)	1.	126644.	Withholding (VA) - You	19A.	7359.
Additions	2.		Withholding (VA) - Spouse	19B.	
Subtotal	3.	126644.	Estimated Payments	20.	
Age Deduction - You	4A.		2021 Overpayment	21.	
Age Deduction - Spouse	4B.		Extension Payments	22.	
Soc Sec & Tier 1 Railroad	5.		Credit - Low-Income or EIC	23.	
State Income Tax Overpaymer	nt 6.		Credit - Schedule OSC	24.	
Subtractions	7.		Credits - Schedule CR	25.	
Subtotal Subtractions	8.		Total Payments / Credits	26.	7359.
Total VA Adj Gross Income (VA	(GI) 9.	126644.	Tax You Owe	27.	
Itemized Deductions - VA Sch	A 10.		Tax Overpayment	28.	1361.
Standard Deduction	11.	16000.	Overpayment Credited to Next Year	29.	
Exemptions	12.	1860.	VAC - Virginia 529 / ABLE	30.	
Deductions	13.		VAC - Other Contributions	31.	
Subtotal (Deductions & Exemp	tions) 14.	17860.	Addition to Tax, Penalty & Interest	32.	
VA Taxable Income	15.	108784.	Sales and Use Tax	33.	
Amount of Tax	16.	5998.	Amount You Owe		
Spouse Tax Adjustment (STA)	17.		Will Pay by Credit/Debit Card N Your Refund		1361.
VAGI - Spouse	17A.				001000000
Net Amount of Tax	18.	5998.	0	C	021000322
L	_		Bank Account #	4830558	66324

REV 02/09/23 PRO

____LAR ____DLAR ____DTD ____LTD \$_____

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670351054





I								
Filing Status, Age & License Information						Additional Filing Information		
Filing Status				2	Loc	ality		107
Federal Head of He	ousehold				Uni	nsured & Authorize DMAS		
DOB - You		1001	L199	0	Nar	me or Filing Status Change		
VA Driver's License	e ID - You	B6532	2538	9	Ado	dress Change		
VA Driver's License	e - Iss. Date - Yo	ou 0622	2202	1	VA	Return Not Filed Last Year		
Spouse Name (Fili	ng Status 3 Onl	у)			Dej	pendent on Another's Return		
		0602	0.0001.000		Farmer / Fisherman / Merchant Seaman			
DOB - Spouse	D Spouso	000.	06031990			Amended		
	VA Driver's License ID - Spouse				Re	Reason Code Overseas on Due Date		
VA Driver's License		-						
Exemptions (A) You	1	Exemptions (B) 65 & Over - You			Fee	deral EIC & Amount		
Spouse	1	65 & Over - Spouse			De	ceased Indicator		
Dependents		Blind - You			Fo	rm 760C or 760F		
Total (A)	2	Blind - Spouse			No	Sales & Use Tax Due Indica	itor	Х
		Total (B)			Ot	otain Electronic 1099G		
	C	ontact Information			ID	Theft PIN		
	declare under pen	alty of law that I (we) have ex				r) knowledge, it is a true, correct & d is for a domestic account within th		
Signature - You			Date		Phone	- You		5100942902
Signature - Spouse			Date	001100	Phone	- Spouse		
Signature - Preparer <u>Si</u>	YAM PRIYA RAM	SAGAR GUPTA TALLAM	Date	021123	Phone	- Preparer	7	6789659522
The Tax Department may discuss my/our return with my/our pr			eparer		Dura		7	P02082703

The Tax Department may discuss my/our return with my/our preparer.

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File by May 1, 2023 Include Page 1, Page 2 and all supporting 760CG documents. REV 02/09/23 PRO

245 ROONEY CT E BRUNSWICK

GLOBAL TAXES LLC

Preparer Information

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2022 Schedule INC/CG 670351054

Report all W-2s, 1099s & VK-1s with VA Withholding

KUSHAGRA SHARMA

NAVI SINGH THAKUR



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
670351054	W	6137.	223093525	30223093525F001	1 15124.
670351054	W	1222.	223301374	30223301374F001	23333.

Total VA Withholding	SSN	VA Withholding
You	670351054	7359.
Spouse		
Total # of W-2s,1099s & VK-1s	02	

To avoid delays - be sure to enter all information, including the Employer's FEIN.

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Virginia Individual Income Tax e-File Signature Authorization

Virginia Submission Identification Number (SID)							
		with the Neural and					
Your Name	B Your Social Sec	-					
KUSHAGRA SHARMA Spouse's Name	670-35-103 A Spouse's Social						
·		,					
Part I Tax Return Information	980-99-70 ⁻	B Yourself					
1. Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)							
 Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9) 		126644. 126644.					
 Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17) 		108784.					
4. Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		5998.					
5. Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		7359.					
6. Amount you Owe (Form 760CG, Line 35; Form 760PY, Line 35; Form 763, Line 35)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
7. Refund (Form 760CG, Line 36; 760PY, Line 36; Form 763, Line 36)		1361.					
Part II Declaration of Taxpayer and Signature Authorization		10011					
number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If I am filing a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Provider to transmit my complete return to Virginia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, the direct deposit of my refund or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.							
Taxpayer's e-File PIN: check one box only							
I authorize the ERO named below to enter my e-File PIN <u>5 1 0 5 4</u> as my signature on my 2022 e-1 Do not enter all zeros							
GLOBAL TAXES LLC ERO Firm Name							
I will enter my e-File PIN as my signature on my 2022 e-filed Virginia individual income tax return. Check this bo and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	ox only if you are entering	your own e-File PIN					
Your Signature Date							
Spouse's e-File PIN: check one box only							
I authorize the ERO named below to enter my e-File PIN 9 7 0 7 9 as my signature on my 2022 e-filed Virginia individual income tax return.							
GLOBAL TAXES LLC							
ERO Firm Name I will enter my e-File PIN as my signature on my 2022 e-filed Virginia individual income tax return. Check this box only if you are entering your own e-File PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.							
Spouse's Signature Date							
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	61989						
Do not enter all zeros I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2022 Virginia individual income tax return 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 Virginia's publication Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2022). EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.							
ERO's Signature Date	± ± ± 2 2	· · · · · · · · · · · · · · · · · · ·					

Tax Year

2022