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 coourity number

Submission Identification Number (SID)

Taxpavar'a pama

тахрау		Social security number											
HEM	ANTH VENKATSAI KARRI	802-76-1159											
Spouse	's name	Spouse's social security number	_										
Part	Part I Tax Return Information – Tax Year Ending December 31, 2022 (Enter year you are authorizing.)												
Enter	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 70,643	•										
2	Total tax	2 8,306											
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	. 3 11,001											
4	Amount you want refunded to you	4 2,695											
5	Amount you owe	5											

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

X lauthorize GLOBAL TAXES LLC to enter or generate my PIN

6	1	1	5	9	20
	er fiv n't en				as

my

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.

Your signature K. Hemanth Venkatsai

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date 1/17/2023

as mv Enter five digits, but don't enter all zeros

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 🕨	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	by your five-digit self-selected PIN.	2	2					6 all zei	 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 🕨	
-	ust Retain This Form — See Instructions his Form to the IRS Unless Requested To	
For Denominary Deduction Act Nation and vour top		Eorm 8870 (Boy, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 01/09/23 PRO

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	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	Single Married filing jointly unchecked the MFS box, enter the n on is a child but not your dependent	ame of y	0	eparately (N use. If you ch	,			()	spor	lifying surviving use (QSS) name if the qualifying
Your first name	and mi	ddle initial	Last nar	me						Your so	cial security number
HEMANTH	VENH	KATSAI	KARR	I						802-	76-1159
lf joint return, sp	oouse's	first name and middle initial	Last nar	me						Spouse'	s social security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.				A	Apt. no.	Preside	ntial Election Campaigr
6653 MCK	INNE	EY RANCH PKWY						1	L3204		nere if you, or your
-		ce. If you have a foreign address, also co	mplete s	paces belo	ow.	Sta	ite	ZIP c	ode		if filing jointly, want \$3 this fund. Checking a
MCKINNEY						TΣ	X	750	70	0	ow will not change
Foreign country	name		F	oreign pro	ovince/state/c	oun	ty	Foreig	on postal code	your tax	k or refund.
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a									Yes 🛛 No
Standard	Som	eone can claim: You as a de	pendent	:	Your spouse	as	a dependent	,		,	
Deduction		Spouse itemizes on a separate retur Were born before January 2, 1		Are bli			_	n befo	ore January 2	. 1958	Is blind
Dependents					ocial security		(3) Relationsh	1			fies for (see instructions):
If more		irst name Last name			number		to you		Child tax cr	1	Credit for other dependent
than four	.,										
dependents,											
see instructions and check	;										
here											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instruct	tions)					. 1a	79,000.
meome	b	Household employee wages not re	eported	on Form	(s) W-2					. 1b)
Attach Form(s)	с	Tip income not reported on line 1a	(see ins	structions	s)					. 1c	:
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s)) W-2 (see in	Istru	uctions)			. 1d	
W-2G and	е	Taxable dependent care benefits f	rom For	m 2441,	line 26 .					. 1e	•
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	n Form 88	339, line 29					. 1f	
If you did not	g	Wages from Form 8919, line 6 .								. 1g	I
get a Form	h	Other earned income (see instruct	ions) .							. 1h	0.
W-2, see instructions.	i	Nontaxable combat pay election (see instr	uctions)			<u>1</u> i				
	z	Add lines 1a through 1h								. 1z	79,000.
Attach Sch. B	2a	Tax-exempt interest	2a			bТ	axable interes	t.		. 2b)
if required.	3a	Qualified dividends	3a			b C	Ordinary divide	nds .		. 3b)
	4a	IRA distributions	4a			bТ	axable amoun	t		. 4b)
Standard	5a	Pensions and annuities	5a			bТ	axable amoun	t		. 5b)
• Single or	6a	Social security benefits	6a			bТ	axable amoun	t	· · · _	. <u>6b</u>	
Married filing	С	If you elect to use the lump-sum e							L		
separately, \$12,950	7	Capital gain or (loss). Attach Sche							L	7	
 Married filing jointly or 	8	Other income from Schedule 1, lin								. 8	-8,357.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9	70,643.
surviving spouse, \$25,900	10	Adjustments to income from Sche	-							. 10	
 Head of household, 	11	Subtract line 10 from line 9. This is	-					• •		. 11	,
\$19,400 r	12	Standard deduction or itemized							• • •	. 12	,
 If you checked any box under 	13	Qualified business income deduct				899	95-A			. 13	
Standard Deduction,	14	Add lines 12 and 13				•				. 14	
see instructions.	15	Subtract line 14 from line 11. If zer	U OF IESS	s, enter -	u This is yo	Jur	laxable incom	ie .	• • •	. 15	57,693.

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	8,3	306.
Credits	17	Amount from Schedule 2, lir	ne3					17		
	18	Add lines 16 and 17						18	8,3	306.
	19	Child tax credit or credit for	other dependent	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	8,3	306.
	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	8,3	306.
Payments	25	Federal income tax withheld								
i aj incluio	а	Form(s) W-2				25a 11	,001.			
	b	Form(s) 1099				25b	•	-		
	с	Other forms (see instruction				25c		-		
	d	Add lines 25a through 25c	,					25d	11.(001.
	26	2022 estimated tax payment						26	,	
If you have a l qualifying child,	27	Earned income credit (EIC)				27	• •			
attach Sch. EIC.	28	Additional child tax credit from				28		-		
)	29	American opportunity credit				29		-		
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir				31		-		
	32	Add lines 27, 28, 29, and 31						32		
	33	Add lines 25d, 26, and 32. T	•	-	-			33	11_(001.
	34	If line 33 is more than line 24	· ·					34		695.
Refund	34 35a					•	•••	34 35a		695.
Direct deposit?	b soa	Amount of line 34 you want Routing number $1 1 1$					· Savings	358	2,	555.
See instructions.		Account number 4 8 8					Savings			
	d									
A	36	Amount of line 34 you want				36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						07		
rou owe	00					1 1	• •	37		
	38	Estimated tax penalty (see in	,			38				
Third Party		you want to allow another	•				omploto k	olow	× No	
Designee				· · · · Phone			onal identi			
	nai	signee's ne		no.			onar identi oer (PIN)	lication		
Sign	Un	der penalties of perjury, I declare t	hat I have examine	ed this return and	accompanying sch	edules and stateme	nts. and to	the bes	t of my knowle	edae and
-		ief, they are true, correct, and com								
Here	Yo	ur signature		Date	Your occupation		If the	IRS sei	nt you an Ident	ity
									IN, enter it here	э
Joint return?					SOFTWARE I			inst.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupat	ion			nt your spouse ection PIN, ente	
your records.								inst.)		
	Ph	one no. (217) 790-786	5	Email address	HEMANTHKARR	I009@GMAIL.CO)M			
		eparer's name	Preparer's signat		1111.111111111/ULV	Date	PTIN		Check if:	
Paid		I PRIYA RAM SAGAR GUPTA TALLAM			СПРТА ТАТ.Т.АМ		P0208	2703	Self-emp	oloved
Preparer		m's name GLOBAL TAX		1.1.11 0/10/11	COLTU IUTUALI	01/10/2020			(678) 965-	,
Use Only			Y CT E BRU	NSWICK N.	J 08816			's EIN	88-214	
		n10/0 for instructions and the late		TIONICIC IN	BAA				Eorm 10	

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

BAA REV 01/09/23 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	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
HEMANTH VENKAT	SAI KARRI	802-76	-1159

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
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. Att	ach Schedule E .	5	-8,357.
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		
	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	t, or 1040-NR, line 8	10	-8,357.

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	01/09/23 P	RO	Schedu	ile 1 (Form 1040) 2022

	DULE E			Supplementa	al Inc	ome an	d Los	SS			OMB No	o. 1545∙	-0074
(Form	1040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)											2
Departm	ent of the Treasury			Attach to Form 1040							Attachn	ent	
Internal	Revenue Service			Go to www.irs.gov/ScheduleE fo	or instru	uctions an	d the la	itest i	nformation.		Sequen	ce No.	
. ,	shown on return										al security		r
_	NTH VENKAT									802-7	6-1159		
Part		or L	.oss	From Rental Real Estate a	nd Ro	yalties	•						
	Note: If yo rental inco	ou are ome oi	r loss	e business of renting personal prope from Form 4835 on page 2, line 40.	erty, use	Schedule	C . See	e instru	actions. If you a	are an indi	vidual, rep	ort far	m
Α				nts in 2022 that would require you		Form(s) 1	099? 5	See in	structions .		. 🗌 Ye	s X	No
				u file required Form(s) 1099?		• • •							No
1a				ch property (street, city, state, Z									
	,					,				201			
	26-041-33.	2, CF	KP (QUARTERS RD ONGOLE, PRA	KASAI	4 ANDHR	KA PR.	ADES	6H IN 5230	101			
B C													
 1b	Turna of Drana	unter (•		auto di a	ha al			-in Doutol	Dawa aw			
di	Type of Prope (from list below		2	For each rental real estate prop above, report the number of fair				Fa	air Rental Days		nal Use iys	Q	JV
Α	3			personal use days. Check the C			Α		365		0	+	
B				if you meet the requirements to			B		303		0		
				qualified joint venture. See instr	uctions	3.	C						
	of Property:						<u> </u>					<u> </u>	
	Single Family R	eside	ence	3 Vacation/Short-Term Rei	ntal	5 Land		7	Self-Rental				
	Multi-Family Re			4 Commercial		6 Roya			Other (desc	ribe)			
						- · · · · , ·							
									Propert	es:			
Incom					•		A	0.0	В			С	
3							5	98.					
4		ived	• •		4								
Expen 5					5								
6				tructions)									
7		-					1 0	72.					
8	-						1,0	12.					
9													
9 10				ional fees	-								
11					-		1 6	91.					
12				to banks, etc. (see instructions)	12		1,0	91.					
13													
14	Renairs	•	• •		14		2.0	71.					
15	o "				15			67.					
16					16		± / •	• • •					
17					17		1.6	54.					
18				r depletion			_, -						
19	Other (list)	•			19								
20	· · ·			es 5 through 19			8,9	55.					
21				ne 3 (rents) and/or 4 (royalties). If			,						
				structions to find out if you must									
							-8,3	57.					
22	Deductible ren	ital re	eal e	state loss after limitation, if any,									
				ructions)		(8,35	57.)	()	()
23a	Total of all am	ounts	s rep	orted on line 3 for all rental prop	erties			23a		598.			
b	Total of all am	ounts	s rep	orted on line 4 for all royalty prop	oerties			23b					
С	Total of all am	ounts	s rep	orted on line 12 for all properties	s			23c					
d	Total of all am	ounts	s rep	orted on line 18 for all properties	;			23d					
е				orted on line 20 for all properties				23e	8	8,955.			
24		-		amounts shown on line 21. Do n e		-				. 24			
25				ses from line 21 and rental real esta							(8,3	57.)
26				e and royalty income or (loss).									
	here. If Parts	II, III,	, IV,	and line 40 on page 2 do not	apply	to you, a	also er	nter t	his amount o	on			

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.

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. -8,357. -8,357.

NPA