Internal Revenue Service

Department of the Treasury

IRS e-file Signature Authorization

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

Submission Identification Number (SID)

Taxpay	er's name	Social secur	ty numb	ber
ANU	RAG BHANDARI	754-19	-9999	9
Spouse	o's name	Spouse's so	cial secu	urity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2022 (Enter	r year you a	are aut	thorizing.)
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	79,101.
2	Total tax		2	10,176.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12,027.
4	Amount you want refunded to you		4	1,851.
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	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	L
				ERO firm name		

9	9	9	9	9	
Ent dor	er fiv n't er	/e di nter a	gits, all ze	but ros	as 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

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

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 >	Date I					 		
Practitioner PIN Method Returns Only—contir	ue be	low						
Part III Certification and Authentication – Practitioner PIN Method Onl	/							
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		 6 all ze	 9	89)

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 This F Don't Submit This Form to the I			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 03/09/23 PRO	Form 8879 (Rev. 01-2021)

1040		artment of the Treasury-Internal Revenue Servi 5. Individual Income Ta		202	2	OMB No. 1545	-0074	IRS Use Only	–Do not w	rite or staple in this space.
-	X	Single	Married fili	ng separately (N	/IFS)	Head of	house	hold (HOH)		lifying surviving
Check only one box.	,	u checked the MFS box, enter the non- on is a child but not your dependent	,	spouse. If you cl	heck	ed the HOH or	QSS	box, enter th	•	use (QSS) name if the qualifying
Your first name	and mi	ddle initial	Last name						Your so	cial security number
ANURAG			BHANDAR	RI					754-1	19-9999
lf joint return, sp	ouse's	first name and middle initial	Last name						Spouse'	s social security number
		r and street). If you have a P.O. box, see	instructions.					vpt. no.		ntial Election Campaign
-		CREEK DR						15	1	here if you, or your if filing jointly, want \$3
	OST OTH	ce. If you have a foreign address, also co	mplete spaces	s below.	Sta		ZIP c		to go to	this fund. Checking a
			Faraia		TΣ		750		1	ow will not change or refund.
Foreign country	name		Foreig	n province/state/o	Journ	ly	Foreig	n postal code	your tax	You Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a								Yes X No
Standard	Som	eone can claim: 🗌 You as a de	pendent	Vour spouse	e as	a dependent	,	,	,	
Deduction		Spouse itemizes on a separate retur				_	n hofe	ore January	2 1059	Is blind
								,	,	fies for (see instructions):
Dependents	•	Instructions): rst name Last name		(2) Social security number		(3) Relationsh to you	ip	Child tax c	· · · · ·	Credit for other dependents
lf more than four	(1) !	Lasthamo							louit	
dependents,										
see instructions and check										
here										
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see inst	tructions)					. 1a	87,521.
income	b	Household employee wages not re	eported on Fo	orm(s) W-2					. 1b	
Attach Form(s)	с	Tip income not reported on line 1a	(see instruct	tions)					. 1c	
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	orted on For	rm(s) W-2 (see ir	nstru	uctions)			. 1d	
W-2G and	е	Taxable dependent care benefits f	rom Form 24	141, line 26 .					. 1e	
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from For	m 8839, line 29					. 1f	
lf you did not	g	Wages from Form 8919, line 6 .							. 1g	
get a Form	h	Other earned income (see instruct	ions)				· ·		. 1h	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instructio	ons)		1 i				
	Z	Add lines 1a through 1h							. 1z	87,521.
Attach Sch. B	2 a	Tax-exempt interest	2a		bΤ	axable interest	t.		. 2b	
if required.	3a		3a			Ordinary divide			. 3b	
	4a		4a			axable amoun			. 4b	
Standard Deduction for –	5a		5a			axable amoun			. 5b	
Single or	6a	,	6a			axable amoun	t	· · ·	. <u>6b</u>	
Married filing separately,	c	If you elect to use the lump-sum e		-	`	,	• •	l	-	
\$12,950	7	Capital gain or (loss). Attach Schee	•	•		-	• •	l		
 Married filing jointly or 	8	Other income from Schedule 1, lin					• •		. 8	-8,420.
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							. 9	79,101.
\$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 14	Qualified business income deduct				ю-А	• •	· · ·	. 13	
Standard Deduction,	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer		 ter -0- This is v		taxahle incom	 16		. <u>14</u> . 15	
see instructions.	10		5 01 1655, em	tor 0. mis is y	Jui				. 15	00,151.

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	10	,176.
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	10	,176.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	If zero or less,	enter -0				22	10	,176.
	23	Other taxes, including self-en	mployment tax,	from Schedule	e 2, line 21 .			23		0.
	24	Add lines 22 and 23. This is	your total tax					24	10	,176.
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25a 12	2,027.			
	b	Form(s) 1099				25b				
	с	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	12	,027.
If you have a	26	2022 estimated tax payment	s 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 fror	n Schedule 8812			28				
	29	American opportunity credit	from Form 8863	8, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	e15			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. T	hese are your to	tal payments				33	12	,027.
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amou	int you overpaid		34	1	,851.
nerana	35a	Amount of line 34 you want I			is attached, che	ck here	🗆	35a	1	,851.
Direct deposit?	b	Routing number 1 1 1				Checking	Savings			
See instructions.	d	Account number 4 8 8	0 7 3 3	9 1 6 9	9 8 8					
	36	Amount of line 34 you want a	applied to your	2023 estimate	edtax	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe						
You Owe		For details on how to pay, go	o to <i>www.ir</i> s.gov	//Payments or	see instructions			37		
	38	Estimated tax penalty (see in	structions) .			38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?				_	
Designee	ins	tructions					omplete k		X No	
	De: nar	signee's ne		Phone no.			onal identi ber (PIN)	fication		
0:		der penalties of perjury, I declare t	act I have exemine				. ,	the her		
Sign		ief, they are true, correct, and com			1 2 0		,		,	0
Here	Yo	ur signature		Date	Your occupation		If the	IRS se	nt you an Ide	entity
		5							IN, enter it h	ere
Joint return?		IT CONSULTANT		`	inst.)					
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, k	oth must sign.	Date	Spouse's occupa	tion			nt your spou ection PIN, e	
your records.								inst.)		
	Ph	one no. (469)427-346	5	Email address		ARI888@GMAIL.C	 ∩M			
		eparer's name	Preparer's signat		ANULAG, DIAND.	Date	PTIN		Check if:	
Paid					AR DUDIPALLI			1823	Self-ei	nploved
Preparer		n's name GLOBAL TAX					· · · · ·		678)965	
Use Only		m's address 245 ROONE		NSWICK N	J 08816			's EIN		45487
		1040 for instructions and the late			BAA	REV 03/09/23 PRO	1,000			040 (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 2

Attachment

Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Sequence No. 01
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
ANURAG BHANDAR	I	754-19	-9999
Part I Additio	onal Income		

Par	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. Att	ach Schedule E .	5	-8,420.
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		
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-SR	l, or 1040-NR, line 8	10	-8,420.

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			vernme	ent 🗍		
	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:						
 a		24a					
b	Deductible expenses related to income reported on line 8I 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					
e	Repayment of supplemental unemployment benefits under the Trade						
-	Act of 1974	24e					
f	Contributions to section 501(c)(18)(D) pension plans	24f					
q		24g					
•	Attorney fees and court costs for actions involving certain unlawful	_ 3					
		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					
, k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form						
		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					26	
	BAA	REV	03/09/23	PRO	S	chedu	le 1 (Form 1040) 2

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury Internal Revenue Service

24 25 26

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

2022
Attachment Sequence No. 13

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

) shown on return									ial security	number		
	AG BHANDARI								754-1	9-9999			
Part	Note: If you a	re in th	From Rental Real Estate an e business of renting personal prope from Form 4835 on page 2, line 40.	ertv. use	yalties Schedul	e C . See	e instru	ctions. If you a	are an indi	vidual, rep	ort farm		
Α			nts in 2022 that would require you		Form(s)	1099? 8	See ins	structions .		. 🗌 Ye	s 🕅 No		
		bu or will you file required Form(s) 1099?											
1a			ch property (street, city, state, Zl										
Α	NAWABGANJ HA	AZARI	BAG JHARKHAND IN 8253	01									
В													
С													
1b	Type of Property (from list below)	2	For each rental real estate proper above, report the number of fair					Fair Rental Days		nal Use ays	QJV		
Α	3	-	personal use days. Check the G					365					
B	5		if you meet the requirements to	file as	a	B		505	0				
			qualified joint venture. See instru	uctions	3.	C							
	of Property:	I				Ŭ							
1	Single Family Resid		3 Vacation/Short-Term Rer 4 Commercial	ntal	5 Land 6 Roya	-	-	Self-Rental Other (desc	ribe)				
								Properti	es:				
Incom	ne:					Α		В			С		
3						4	60.						
4	Royalties received	d		4									
Exper	ises:												
5	•												
6	Auto and travel (s	ee inst	ructions)	6									
7	Cleaning and maintenance												
8	Commissions .			8									
9	Insurance			9									
10	Legal and other p	rofess	ional fees	10									
11	Management fees	s		11		800.							
12	Mortgage interest	paid t	o banks, etc. (see instructions)	12									
13	Other interest .			13									
14	Repairs			14		2,560.							
15	Supplies			15		2,2	10.						
16	Taxes			16									
17				17		2,3	10.						
18	Depreciation expe	ense o	r depletion										
19													
20	Total expenses. A	dd line	es 5 through 19	20		8,8	80.						
21	result is a (loss), s	see ins	e 3 (rents) and/or 4 (royalties). If tructions to find out if you must										
						-8,4	20.	20.					
22			state loss after limitation, if any, ructions)		(8,42	20.)	()	()		
23a	Total of all amour	nts rep	orted on line 3 for all rental prop	erties			23a		460.				
b			orted on line 4 for all royalty prop				23b						
с			orted on line 12 for all properties				23c						
d			orted on line 18 for all properties				23d						
е			orted on line 20 for all properties				23e	8	,880.				
24			mounts shown on line 21. Do n o		ude any lo	osses			. 24				
25	Losses. Add roya	lty loss	es from line 21 and rental real esta	ate loss	ses from li	ne 22. E	Enter to	otal losses he	re 25	(8,420.)		

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 on

26

.

-8,420.