### 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.

Submission Identification Number (SID)

Taxpa	/er's name	Social security number									
DHA	NASREE ARE	846-87-3200									
Spous	o's name	Spouse's social security number									
Par	t I Tax Return Information – Tax Year Ending December 31, 2022 (Enter	r year you	are aut	horizing.)							
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	116,831.							
2	Total tax		2	18,767.							
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	24,389.							
4	Amount you want refunded to you		4	5,622.							
5	Amount you owe		5								
Par	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

I authorize	CTORAT	TAVEC	TTC	to optor or concrete my DIN		ĺ
 rauthorize	GLUBAL	TAVES		to enter or generate my PIN	-	
			ERO firm name		E	1

7	3	2	0	0	
Ent don	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 signa	ature 🕨 🛛 Da	Date 🕨										
	Practitioner PIN Method Returns Only—continue	bel	ow									
Part III Ce	ertification and Authentication – Practitioner PIN Method Only											
ERO's EFIN/P	<b>IN.</b> Enter your six-digit EFIN followed 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 >			
	ust Retain This Form — See his Form to the IRS Unless		
For Denominark Reduction Act Nation and your tax	roturn instructions	BEV 02/10/22 BBO	Form 8879 (Bev. 01-2021)

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

<b>1040</b>		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		n 20 <b>2</b> :	2	OMB No. 1545	-0074	IRS Use Only	—Do not w	vrite or staple in this space.
Filing Status Check only one box.		Single D Married filing jointly	-	iling separately (N r spouse. If you ch	,			( )	spor	lifying surviving use (QSS) s name if the qualifying
	pers	son is a child but not your dependent	:							
Your first name	and m	iddle initial	Last name						Your so	cial security number
DHANASRE			ARE							87-3200
lf joint return, s	pouse's	s first name and middle initial	Last name						Spouse	's social security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instructions.				A	Apt. no.	Preside	ntial Election Campaigr
15551 NE	: TUI	RING ST					2	5713		here if you, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete space	es below.	Sta	te	ZIP c	ode		if filing jointly, want \$3 this fund. Checking a
REDMOND					WZ	7	980	52		ow will not change
Foreign country	/ name		Fore	eign province/state/c	oun	ty.	Foreig	n postal code	your tax	k or refund.
Digital		ny time during 2022, did you: (a) reco	•		-		-	,	. ,	Yes 🛛 No
Assets Standard		ange, gift, or otherwise dispose of a eone can claim:  You as a de	-	Your spouse		-	a55ei)		10115.)	
Deduction	_	Spouse itemizes on a separate retur	•			•				
Age/Blindness	You	: 🗌 Were born before January 2, 1	958 🗌 A	Are blind <b>Spo</b>	use	: 🗌 Was bor	n befo	ore January 2	2, 1958	Is blind
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4	) Check the b	ox if quali	fies for (see instructions):
If more	<b>(1)</b> F	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	•	,						
	b	Household employee wages not re					• •		. 1b	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a					• •		. 1c	
attach Forms	d	Medicaid waiver payments not rep			Istru	ictions)	• •		. 1d	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f							. 1e	
was withheld.	f	Employer-provided adoption bene							. 1f	
If you did not	g	Wages from Form 8919, line 6 .							. <b>1</b> g	
get a Form W-2, see	h	Other earned income (see instruction	,		•	· · · · ·	· ·		. <b>1</b> h	0.
instructions.	i	Nontaxable combat pay election (s	see instruct	tions)	•	<b>1</b> i			_	
	<b>Z</b>		· · · ·		•				. 1z	128,531.
Attach Sch. B	2a	· –	2a			axable interest			. 2b	)
if required.	3a		3a			ordinary divider			. 3b	)
	4a		4a			axable amount			. 4b	
Standard Deduction for—	5a		5a			axable amount			. <b>5</b> b	)
Single or	6a	, _	6a			axable amount			. 6b	
Married filing separately,	С	If you elect to use the lump-sum e					• •	L	_	
\$12,950	7	Capital gain or (loss). Attach Schee		quired. If not requi	ired	, check here	• •	L	_ 7	
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin							. 8	-11,700.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-			· ·		. 9	116,831.
surviving spouse, \$25,900	10	Adjustments to income from Sche					• •		. 10	
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is					• •		. 11	
\$19,400	12	Standard deduction or itemized							. 12	
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deduction		orm 8995 or Form	899	5-A			. 13	
Standard Deduction,	14	Add lines 12 and 13					· ·		. 14	1
see instructions.	15	Subtract line 14 from line 11. If zer	o or less, e	enter -U This is yo	our f	axable incom	е.		. 15	103,881.

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

Form **1040** (2022)

Form 1040 (2022	2)									Pag	e <b>2</b>
Tax and	16	Tax (see instructions). Check i	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3			16	18,767	•
Credits	17	Amount from Schedule 2, line	ə3						17		
	18	Add lines 16 and 17						[	18	18,767	
	19	Child tax credit or credit for c	other dependent	ts from Sched	ule 8812				19		
	20	Amount from Schedule 3, line	ə8						20		
	21	Add lines 19 and 20						[	21		
	22	Subtract line 21 from line 18.							22	18,767	
	23	Other taxes, including self-er	nployment tax,	from Schedule	e 2, line 21				23	0	
	24	Add lines 22 and 23. This is y	our total tax						24	18,767	
Payments	25	Federal income tax withheld									
	а	Form(s) W-2				25a	24,	389.			
	b	Form(s) 1099				25b					
	с	Other forms (see instructions	)			25c					
	d	Add lines 25a through 25c .	· • • • •						25d	24,389	
If	26	2022 estimated tax payments	s and amount a	pplied from 20	21 return				26		
If you have a l qualifying child,	27	Earned income credit (EIC) .			No	27					
attach Sch. EIC.	28	Additional child tax credit from				28					
	29	American opportunity credit f	from Form 8863	8, line 8		29					
	30	Reserved for future use				30					
	31	Amount from Schedule 3, line				31					
	32	Add lines 27, 28, 29, and 31.				Indable	credits		32		
	33	Add lines 25d, 26, and 32. Th	nese are your <b>to</b>	tal payments					33	24,389	•
Refund	34	If line 33 is more than line 24	, subtract line 24	4 from line 33.	This is the amou	nt you <b>ov</b>	erpaid		34	5,622	•
neiuliu	35a	Amount of line 34 you want r	efunded to you	I. If Form 8888	is attached, che	ck here		. 🗆	35a	5,622	•
Direct deposit?	b	Routing number 3 2 2				Checkir		1			
See instructions.	d	Account number 5 2 8						-			
	36	Amount of line 34 you want a	pplied 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, go	to www.irs.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	n with the IRS?	See					
Designee	ins	tructions				🗆	Yes. Con	nplete be	elow.	X No	
		signee's		Phone			Person numbe	al identific	cation		
	nai			no.				. ,			
Sign		der penalties of perjury, I declare the ief, they are true, correct, and comp			1 7 0			,		, 0	
Here		ur signature		Date	Your occupation					nt you an Identity	
	10			Duto						N, enter it here	
Joint return?					SOFTWARE I	DEVELC	PER	(see ir	ist.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occupat	ion				nt your spouse an	
your records.								(see in		ection PIN, enter it h	ere
	Dh	one no. (916)693-1027	7	Email address		107@CM			,		
		one no. (916)693-1027 parer's name	Preparer's signat	1	DHANASREE.2	287@GM. Date	1	PTIN		Check if:	
Paid		PRIYA RAM SAGAR GUPTA TALLAM	1 0					02082	702	Self-employed	d
Preparer		n's name GLOBAL TAX		TADAG INAN	OUFIA IAUUAM	102/10	/ 2023   P			678)965-952	
Use Only		n's address 245 ROONEY		NGWICK N	J 08816			Firm's		· · · ·	
Co to warne inc		1040 for instructions and the lates		TIONICIC IN	D 08810	DEVICE				84-317196	

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

BAA REV 02/10/23 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	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. <b>01</b>
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
DHANASREE ARE		846-87	-3200

Par	t 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	-11,700.
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		
Ζ	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	-11,700.

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

Schedule 1 (Form 1040) 2022

Parl	II Adjustments to Income						-	
11	Educator expenses					11		
12	Certain business expenses of reservists, performing artists, and fee	-basi	s aov	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						9a		
b	Recipient's SSN							
	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		
3	Archer MSA deduction					23		
24	Other adjustments:			• •	· F			
		24a						
	Deductible expenses related to income reported on line 81 from the							
~		24b						
с	Nontaxable amount of the value of Olympic and Paralympic medals							
Ŭ	and USOC prize money reported on line 8m	24c						
d		24d						
	Repayment of supplemental unemployment benefits under the Trade	210						
C	Act of 1974	24e						
f	Contributions to section 501(c)(18)(D) pension plans	24f						
		24g						
	Attorney fees and court costs for actions involving certain unlawful	<u></u>						
		24h						
;	Attorney fees and court costs you paid in connection with an award	<u></u>						
	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	<u>-</u>						
n		24k						
z	Other adjustments. List type and amount:	271						
2		24z						
5	Total other adjustments. Add lines 24a through 24z					25		
.5 26	Add lines 11 through 23 and 25. These are your adjustments to income					2.5		
.0	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a					26		
	BAA		02/10/23				le 1 (Form 1040	

	EDULE E 1040)	( <b>F</b>	Supplement							OMB No	o. 1545-0074
		(From r	rental real estate, royalties, partne		-			trusts, REMICS,	etc.)	20	22
	nent of the Treasury Revenue Service		Attach to Form 104 Go to <i>www.irs.gov/ScheduleE</i>					nformation.		Attachm	rent ce No. <b>13</b>
	) shown on return								our soci	al security	
DHAN	IASREE ARE							8	46-8	7-3200	
Par		or Los	s From Rental Real Estate a	and R	oyalties						
	Note: If yo	ou are in t	he business of renting personal prop	perty, us	se Schedule	<b>c</b> . See	e instru	ctions. If you are	an indi	vidual, rep	ort farm
•			ss from <b>Form 4835</b> on page 2, line 40 ents in 2022 that would require yo		o Eorm(o) 1	0002	Poo in	atructiona			
			you file required Form(s) 1099?								
1a	-		ach property (street, city, state, 2		,						
A	ROAD NO 1	B,GOPA	AL NAGAR HAFEEZPET ROAD	D HYI	DERABAD,	TELA	NGAN	A IN 50008	5		
<u> </u>											
<u>C</u>											
1b	Type of Prope (from list belov						Fa	_		nal Use	QJV
		~)	above, report the number of fa personal use days. Check the			•		Days	Da	ays	
 	3		if you meet the requirements to	o file as	sa	A B		365		0	
			qualified joint venture. See inst	tructior	ıs.	C					
	of Property:					U					
	Single Family R	esidence	e 3 Vacation/Short-Term Re	ental	5 Land		7	Self-Rental			
	Multi-Family Re				6 Roya	alties		Other (describe	e)		
	,										
Incon						•		Properties			С
Incon 3		4		. 3		A 5	80.	В			C
4							00.				
Expe		iveu		· -							
5				. 5							
6	-		structions)	-							
7		-	ance			1,4	60.				
8	-										
9											
10	Legal and othe	er profes	sional fees	. 10							
11	Management f	ees		. 11		1,2	00.				
12	Mortgage inter	rest paid	I to banks, etc. (see instructions)								
13	Other interest			. 13							
14					_		70.				
15					_	3,2	00.				
16							5.0				
17					-	3,5	50.				
18	•	xpense	or depletion	. 18							
19 20	Other (list)		nes 5 through 19			12,2	00				
20 21			ine 3 (rents) and/or 4 (royalties).			12,2	00.				
21			nstructions to find out if you mus								
					-	-11,7	00.				
22	Deductible ren	tal real o	estate loss after limitation, if any								
			tructions)		(	11,70	))))	(	)	(	)
<b>2</b> 3a	Total of all amo	ounts rej	ported on line 3 for all rental prop	perties			23a	5	80.		
b		-	ported on line 4 for all royalty pro	-			23b				
С	Total of all amo	ounts rej	ported on line 12 for all propertie	es.			23c				
d		-	ported on line 18 for all propertie				23d				
е		-	ported on line 20 for all propertie				23e	12,2			
24		-	amounts shown on line 21. Do r		-				24		
25			sses from line 21 and rental real es						25	( 1	11,700.)
26			te and royalty income or (loss)								
			', and line 40 on page 2 do no 0), line 5. Otherwise, include this						26		-11,700.
			-,,	anoul				page 2	20	1	±±,,000.

Schedule E (Form 1040) 2022

-11,700.