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)

Taxpay	ver's name	Social securit	y numb	er
SUM	IAN JATOTH	158-73-	-9908	3
Spouse	s's name	Spouse's soc	ial secu	irity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2022 (Ente	r year you a	re 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	69,016.
2	Total tax		2	7,954.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	8,937.
4	Amount you want refunded to you		4	983.
5	Amount you owe		5	
David	Townsway Declaration and Connetwy Authorization (Decume you get and			

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

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

_....

\sim	1 autriorize	GTODAT	CUVUI	ERO firm name	to enter or generate my Fin	Er
$\mathbf{\nabla}$	l authorize	CIOBAI	TAVEC	TTC	to enter or generate my PIN	

					as my
3	9	9	0	8	
					3 9 9 0 8 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: chec	k one box only	
l authorize		to enter or
	EBO firm name	

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.

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 si	gnature 🕨 🛛 Da	ate 🕨								
	Practitioner PIN Method Returns Only—continue	bel	ow							
Part III	Certification and Authentication – Practitioner PIN Method Only									
ERO's EFIN	I/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 all zei	I	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 Do So					
For Depertuerly Deduction Act Nation and your to		m 8870 (Day, 01 2021)				

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/10/23 PRO

E1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		202	2	OMB No. 1545	-0074	IRS Use Or	ily—Do not	t write or staple	e in this space.
Filing Status Check only one box.	lf yo	Single D Married filing jointly D uchecked the MFS box, enter the na on is a child but not your dependent	ame of your sp	g separately (N pouse. If you cl				, ,	sp	ualifying su ouse (QSS I's name if t)
Your first name			Last name						Your	social secur	rity number
SUMAN			JATOTH							-73-990	•
	ouse's	first name and middle initial	Last name						-		ecurity number
		r and street). If you have a P.O. box, see	instructions.				A	Apt. no.			tion Campaigr
-		E CREEK LANE								k here if you se if filing ioi	intly, want \$3
	ost offic	ce. If you have a foreign address, also co	mplete spaces t	below.	Sta		ZIP c		to go	to this fund	. Checking a
FRISCO Foreign country	name		Foreign	province/state/	T Coun		750 Foreig	35 In postal code		elow will no ax or refund	0
	• ·									You	Spouse
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a					-				X No
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate return		Your spouse a dual-status							
Age/Blindness		Were born before January 2, 1			ouse	_	n befo	ore January	2, 1958	B 🗌 ls b	olind
Dependents	(see	instructions):	(2	2) Social security	,	(3) Relationsh	ip (4) Check the	box if qu	alifies for (se	e instructions):
If more	(1) Fi	rst name Last name		number		to you		Child tax	credit	Credit for c	other dependents
than four											
dependents, see instructions											
and check											<u> </u>
here 🗌											
Income	1a	Total amount from Form(s) W-2, be		,							77,225.
Attach Form(s)	b	Household employee wages not re					• •			lb	
W-2 here. Also	C C	Tip income not reported on line 1a					• •	• • •		lc Id	
attach Forms W-2G and	d	Medicaid waiver payments not rep Taxable dependent care benefits f			istru	ictions)	• •			-	
1099-R if tax	e f	Employer-provided adoption bene		-	• •		• •			1e 1f	
was withheld.	1				•		• •				
lf you did not get a Form	g h	Other earned income (see instructi			• •		• •			1g 1h	0.
W-2, see	;	Nontaxable combat pay election (s	,	 	• •	1i	ì		. –		
instructions.	z	Add lines 1a through 1h		13)	• •	11				1z	77,225.
Attach Sch. B	2a		2a		 ь т	axable interest				2b	
if required.	3a		3a			Ordinary divider				3b	
	4a		4a			axable amoun				1b	
Standard	5a		5a			axable amoun			. 5	5b	
Deduction for –	6a		6a			axable amoun				6b	
 Single or Married filing 	с	If you elect to use the lump-sum el	lection method	d, check here	(see	instructions)					
separately, \$12,950	7	Capital gain or (loss). Attach Schee								7	
Married filing	8	Other income from Schedule 1, line							. [8	-8,209.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		s your total ind	com	e			. [9	69,016.
surviving spouse, \$25,900	10	Adjustments to income from Sche		-						10	
Head of	11	Subtract line 10 from line 9. This is	your adjuste	d gross incor	ne				. [1	11	69,016.
household, \$19,400	12	Standard deduction or itemized	deductions (f	rom Schedule	A)					12	12,950.
If you checked	13	Qualified business income deducti	on from Form	8995 or Form	899	95-A				13	
any box under Standard	14	Add lines 12 and 13							. [-	14	12,950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less, ente	er -0 This is y	our	taxable incom	е.		.	15	56,066.
)											

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 in	f any from Form	(s): 1 🗌 881	4 2 4972	3		16	7,	954.
Credits	17	Amount from Schedule 2, line	3					17		
	18	Add lines 16 and 17						18	7,	,954.
	19	Child tax credit or credit for o	ther dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, line	;8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	7,	,954.
	23	Other taxes, including self-en	nployment tax,	from Schedule	e 2, line 21 .			23		0.
	24	Add lines 22 and 23. This is y	our total tax					24	7,	,954.
Payments	25	Federal income tax withheld								
5	а	Form(s) W-2				25a 8	8,937.			
	b	Form(s) 1099				25b		1		
	с	Other forms (see instructions))			25c		1		
	d	Add lines 25a through 25c						25d	8,	,937.
K	26	2022 estimated tax payments	and amount a	pplied from 20	21 return			26		
If you have a l qualifying child,	27	Earned income credit (EIC) .				27				
attach Sch. EIC.	28	Additional child tax credit from				28		1		
	29	American opportunity credit f	rom Form 8863	3, line 8		29		1		
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line				31		1		
	32	Add lines 27, 28, 29, and 31.						32		
	33	Add lines 25d, 26, and 32. Th	-					33	8,	,937.
Defend	34	If line 33 is more than line 24,						34	,	983.
Refund	35a	Amount of line 34 you want r						35a		983.
Direct deposit?	b	Routing number 1 0 1					Savings			
See instructions.	d	Account number 1 5 2					53			
	36	Amount of line 34 you want a				36				
Amount	37	Subtract line 33 from line 24.						-		
You Owe	57	For details on how to pay, go						37		
	38	Estimated tax penalty (see ins	-	-		38		•		
Third Party		you want to allow another								
Designee		1				· · ·	omplete l	oelow.	X No	
	De	signee's		Phone		Pers	onal identi	fication		
	nai	ne		no.			ber (PIN)			
Sign		der penalties of perjury, I declare th								
Here		ief, they are true, correct, and comp	lete. Declaration of			ased on all informati		• •		0
	Yo	ur signature		Date	Your occupation				nt you an Ider IN, enter it he	
Joint return?					SOFTWARE 1	ENGINE		inst.)		
See instructions.	Sp	ouse's signature. If a joint return, be	oth must sign.	Date	Spouse's occupat		If the	e IRS ser	nt your spous	e an
Keep a copy for	op		Par maer eign	Duit					ection PIN, en	
your records.							(see	inst.)		
	Ph	one no. (669) 249-5719	1	Email address	JATOTHSUMA	N23@GMAIL.CO	M			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/22/2023	P0208	2703	Self-em	nployed
Use Only	Fir	m's name GLOBAL TAX	ES LLC				Pho	ne no. ((678)965	-9522
	Fir	m's address 245 ROONEY	CT E BRU	NSWICK N	J 08816		Firm	's EIN	84-31	71965
Go to www.irs.go	ov/Forn	1040 for instructions and the lates	t information.		BAA	REV 02/10/23 PRO			Form 1	040 (2022)

BAA

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 '((22 Attachment

Internal Revenue Service	Go to <i>www.irs.gov/Form1040</i> 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
SUMAN JATOTH		158-73	-9908
		-	

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	-8,209.
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-SF	t, or 1040-NR, line 8	10	-8,209.

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-basis	s government		
	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)			
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m		-	
d	Reforestation amortization and expenses		-	
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974		-	
f	Contributions to section 501(c)(18)(D) pension plans		-	
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)			
	Attorney fees and court costs you paid in connection with an award		-	
1	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
÷	Housing deduction from Form 2555			
J k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		-	
IX.	1041)			
7	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 . Enter		-	
			26	
				e 1 (Form 1040) 2022

(Form 1040)		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)									<i>୭</i> ୭୨		
	nent of the Treasury Revenue Service	Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to <i>www.irs.gov/ScheduleE</i> for instructions and the latest information.								Attachment Sequence No. 13			
Name(s) shown on return										Your soci	al security r	number	
SUMAN JATOTH						158-7					3-9908		
Part				tal Real Estate an									
	rental inco	ome or lo	ss from Form 48	renting personal proper 335 on page 2, line 40.									
		you make any payments in 2022 that would require you to file Form(s) 1099? See instructions										_	
1a				street, city, state, ZIF									
Α	5-126, RD	NO. 3	3, ADARSH	NAGAR SERILIN	IGAMI	PALLY,	HYDER	ABAD	IN 5000	19			
В													
С													
1b	Type of Prope (from list below			ntal real estate prope rt the number of fair i				Fa	ir Rental Days	Personal Use Days		QJV	
Α	3	,	personal us	e days. Check the Q.	IV box	x only	Α		365		0		
В				the requirements to f			B				-		
С			qualified joir	nt venture. See instru	ctions	5.	C						
-	of Property:												
	Single Family R	esidenc	e 3 Vaca	tion/Short-Term Rent	tal	5 Lar	nd	7	Self-Rental				
	Multi-Family Re				a	6 Roy			Other (desc	ribe)			
_													
									Propert	ies:	<u> </u>		
Incon							Α		В			C	
3					3			20.					
4		ived .			4								
Exper	ises:												
5	-				5								
6					6								
7	-				7		8	46.					
8	Commissions				8								
9					9								
10	Legal and other professional fees												
11	Management fees						1,0	49.					
12	Mortgage inter	d to banks, etc	12										
13	Other interest				13								
14	Repairs				14			49.					
15					15		2,4	11.					
16					16								
17					17		1,6	574.					
18		xpense	or depletion		18								
19	Other (list)				19								
20	Total expenses	s. Add li	ines 5 through	19	20		8,7	29.					
21				nd/or 4 (royalties). If									
				find out if you must									
					21		-8,2	09.					
22				ter limitation, if any,	22	(8,20)9.)	()	()	
23a	Total of all am	ounts re	ported on line	3 for all rental prope	rties			23a		520.			
b	Total of all am	ounts re	ported on line	4 for all royalty prop	erties			23b					
С			•	12 for all properties				23c					
d				18 for all properties				23d					
е				20 for all properties				23e	8	3,729.			
24			•	wn on line 21. Do no									
25		•		21 and rental real estat		-		Enter to	otal losses he	ere 25	(8,209.)	
26				y income or (loss).									
	here. If Parts	II, III, I\	/, and line 40	on page 2 do not	apply	to you,	also e	nter th	nis amount (on			

Supplemental Income and Loss

SCHEDULE E

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2022

26

-8,209.

OMB No. 1545-0074

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