IRS e-file Signature Authorization

OMB No. 1545-0074

Conicl converts 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)

T.....

Taxpay	er s hame	Social security num	Social security number				
DES	U JAYANAGA VENKATA ANA	853-13-431	. 6				
Spouse	's name	Spouse's social sec	curity number				
Part	Tax Return Information – Tax Year Ending December 31, 2022 (Enter	er year you are au	Ithorizing.)				
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	92,017.				
2	Total tax	2	13,014.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	14,463.				
4	Amount you want refunded to you	4	1,449.				
5		5					

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

Х	I authorize	GLOBAL TAXE		to enter or generate my PIN	 Fi
			ERO firm name		4

	3	4	3	1	6	as				
Enter five digits, but don't enter all zeros										

my

as mv

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 ontor	or	generate	mv	PIN
to enter	U	yenerale	шу	FIN

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 ► C	ate 🖡							
Practitioner PIN Method Returns Only—continue	bel	ow						
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		0	2 7	1	

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 >			
	RO Must Retain This Form — Se omit This Form to the IRS Unless		
For Denemicarly Deduction Act Nation	aug tay yatuwa inatwoatiana		Earm 9970 (Day 01 0001)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/22/23 PRO

1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		m 20 2	2	OMB No. 1545	-0074	IRS Use (Only—	Do not w	rite or staple i	n this space.
Filing Status Check only	XS	Single Married filing jointly] Married	d filing separately (N	/IFS)	Head of	house	hold (HOF	ł) [ifying surv ıse (QSS)	riving
one box.		u checked the MFS box, enter the nation is a child but not your dependent		our spouse. If you c	heck	ed the HOH or	QSS	box, ente	r the	child's	name if th	e qualifying
Your first name	and mi	ddle initial	Last nam	ie					1	Your so	cial securit	y number
DESU			JAYAN	IAGA VENKATA	Al	NA			8	853-1	L3-4310	5
lf joint return, sp	ouse's	first name and middle initial	Last nam	le					5	Spouse'	s social sec	curity number
Home address	numbe	er and street). If you have a P.O. box, see	instructior	ns.			A	Apt. no.	I	Preside	ntial Electio	on Campaign
4955 USA	A BI	LVD					1	0			nere if you,	,
City, town, or po	ost offic	ce. If you have a foreign address, also co	mplete sp	aces below.	Sta	ite	ZIP c	ode				tly, want \$3 Checking a
SAN ANTO	NIO				TΣ	K	782	40			ow will not	
Foreign country	name		Fo	preign province/state/	count	ty	Foreig	in postal co	de 3	our tax	or refund.	_
											You	Spouse
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a									Yes	X No
Standard		eone can claim: You as a de	-	Vour spous		-	40000	. (000 m	51100			
Deduction	_	Spouse itemizes on a separate retur										
		Were born before January 2, 1		1	ouse		n befo	ore Janua	ry 2,	1958	🗌 ls bli	nd
Dependents				(2) Social security	,	(3) Relationsh			-		ies for (see	instructions):
If more		irst name Last name		number		to you		Child ta	x cre	dit	Credit for oth	ner dependents
than four											[
dependents,											[
see instructions and check	,										[
here 🗌											[
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	instructions) .						1a	10)3,319.
moomo	b	Household employee wages not re	eported o	on Form(s) W-2 .						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see inst	tructions)						1c		
attach Forms	d	Medicaid waiver payments not rep	orted on	Form(s) W-2 (see in	nstru	uctions)				1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Forn	n 2441, line 26						1e		
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .								1g		
get a Form W-2, see	h	Other earned income (see instruct				· · · · ·	· ·			1h	_	0.
instructions.	i	Nontaxable combat pay election (s	see instru	ictions)		<u>1</u> i						
	<u>z</u>	Add lines 1a through 1h	 . İ		· ·			• • •	• •	1z	10	3,319.
Attach Sch. B if required.	2a	'	2a			axable interest			• •	2b		
	<u>3a</u>		3a			Ordinary divide			• •	3b		
• • •	4a 5-		4a			axable amoun		• • •	• •	4b		
Standard Deduction for —	5a		5a			axable amoun axable amoun				5b		
Single or	6a	Social security benefits	6a	athod abook boro			ι		· ·	6b		
Married filing separately,	с 7	Capital gain or (loss). Attach Sche					• •	• • •		7		
\$12,950 Married filing	8	Other income from Schedule 1, lin					• •	• • •	• 🗆	8		1 302
Married filing jointly or	о 9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,					• •		• •	<u> </u>		<u>1,302.</u> 2,017.
Qualifying surviving spouse,	9 10	Adjustments to income from Sche		-		• · · · ·	• •		• •	10		/ L U L / .
\$25,900 • Head of	11	Subtract line 10 from line 9. This is					• •		• •	11		92,017.
household,	12	Standard deduction or itemized		-			• •		• •	12		2,017.
\$19,400 • If you checked	13	Qualified business income deduct								13		<u> </u>
any box under	14									14	-	2,950.
Standard Deduction,	15	Subtract line 14 from line 11. If zer					ie .			15		19,067.
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	13,0	14.
Credits	17	Amount from Schedule 2, line	e3					17		
	18	Add lines 16 and 17						18	13,0	14.
	19	Child tax credit or credit for o	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, line	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	13,0	14.
	23	Other taxes, including self-er	mployment tax,	from Schedule	e 2, line 21 .			23		0.
	24	Add lines 22 and 23. This is y	our total tax					24	13,0	14.
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25 a 14	,463.			
	b	Form(s) 1099				25b				
	с	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	14,4	63.
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 fron	n Schedule 8812			28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line	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. Th	nese are your to	tal payments				33	14,4	63.
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	1,4	49.
neruna	35a	Amount of line 34 you want r	efunded to you	J. If Form 8888	is attached, che	ck here		35a	1,4	49.
Direct deposit?	b	Routing number 1 1 1				Checking	Savings			
See instructions.	d	Account number 5 8 6	0 3 6 9	4 9 6 6	6 2					
	36	Amount of line 34 you want a	pplied 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.irs.go</i> v	//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					•		X No	
	De: nar	signee's ne		Phone no.			onal identi ber (PIN)	fication		
0:			at Lhave exemine				()	the box		
Sign		der penalties of perjury, I declare the ief, they are true, correct, and comp								
Here	Yo	ur signature		Date	Your occupation		If the	IRS se	nt you an Identii	ty
									IN, enter it here	
Joint return?					SOFTWARE 1	ENGINEER	(see	,		
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 a	
your records.							(see		ection PIN, ente	
	Ph	one no. (210) 780-2791	1	Email address	שאסנואו הבפוו		,	- /		
		one no. (210) 780-2791 parer's name	Preparer's signat		IARUN.DESU	Date	PTIN		Check if:	
Paid		PRIYA RAM SAGAR GUPTA TALLAM					P02082	2702	Self-empl	loved
Preparer	-	n's name GLOBAL TAX		INPI SAGAR	GUEIA IALLAM	07/2//2023				
Use Only		0.45 - 0.000-		NOWICK N	J 08816				678)965-9 94-3171	
Calla universita				TADAATCI/ IN				's EIN	84-3171	
GO TO WWW.Irs.go	uv/Forn	1040 for instructions and the lates	si mormation.		BAA	REV 03/22/23 PRO			Form 104	U (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 9**099**

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your 853-13-4316

soc	ial security number
	Attachment Sequence No. 01

Part	Addit	ional Incom	j		
DESU	JAYANAGA	VENKATA ANA	7		
	,	,	- ,		

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	-11,302.
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		
ĥ	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		
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	l, or 1040-NR, line 8	10	-11,302.

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-b	asis gover	mment						
	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		4a							
b	Deductible expenses related to income reported on line 8I from the								
		4b							
С	Nontaxable amount of the value of Olympic and Paralympic medals								
		4c							
d		4d							
е	Repayment of supplemental unemployment benefits under the Trade								
		4e							
f		4f							
g	, , , , , , , , , , , , , , , , , , ,	4g							
h	Attorney fees and court costs for actions involving certain unlawful								
		4h							
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								
		4i							
, i	•	4j							
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form								
		4k		-					
Z	Other adjustments. List type and amount:								
05		4z		05					
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			00					
				26					
	BAA	REV 03/22/23 PR	C	Schedul	e 1 (Form 1040) 2022				

SCHEDULE E		Supplemental Income and Loss							OMB No	OMB No. 1545-0074		
(Form 1040)		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)							20 2 2			
Department of the Treasury			Attach to Form 1040, 1040-SR, 1040-NR, or 1041.							Attachment		
	Revenue Service		Go to www.irs.gov/ScheduleE for instructions and the latest information.							Sequence No. 13		
Name(s)							social security number					
DESU JAYANAGA VENKATA ANA 853-13-										3-4316		
Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.												m
Α												
		\square or will you file required Form(s) 1099?										No
1 a			ch property (street, city, state, ZI									
Α			GUNTUR ANDHRA PRADESH		,							
B			GONTON ANDINA TINADESI	<u> </u>	022010							
<u> </u>												
1b	Type of Prope	rtv 2	For each rental real estate prope	ertv list	ed		Fa	ir Rental	Persor	nal Use		
110		(from list below) above, report the number of fair r							Days		QJV	
Α	personal use days. Check the					Α	185		0			
В			if you meet the requirements to a qualified joint venture. See instru								[
С					S. C						[
	of Property:											
	Single Family R		3 Vacation/Short-Term Ren	ital	5 Land			Self-Rental				
2	Multi-Family Re	sidence	4 Commercial		6 Roya	lties	8	Other (descr	ibe)			
Properties:												
Incom	ie:					A B					С	
3	Rents received	<i>.</i>		3		5	60.				-	
4	Royalties rece	ived		4								
Expen												
5	Advertising			5								
6	Auto and trave	l (see ins	tructions)	6								
7	Cleaning and r	leaning and maintenance					45.					
8	Commissions			8								
9				9								
10			ional fees	10								
11				11		1,3	61.					
12	Mortgage inter	12										
13				13		<u> </u>	0.0					
14 15	•		· · · · · · · · · · · · · ·	14 15			00. 56.					
15				16		5,1	50.					
17				17		2 9	00.					
18			r depletion	18		215						
19	Other (list)	•		19								
20	` '		es 5 through 19	20		11,8	62.					
21	•		ne 3 (rents) and/or 4 (royalties). If									
			structions to find out if you must									
	file Form 6198			21	-	-11 , 3	02.					
22			state loss after limitation, if any, ructions)	22	(11,30)2.)	()	()
2 3a	Total of all am	ounts rep	orted on line 3 for all rental prope	erties			23a		560.			
b			orted on line 4 for all royalty prop				23b					
С			orted on line 12 for all properties				23c					
d		· · · · ·					23d					
e		•	Ints reported on line 20 for all properties					11	,862.			
24								. 24	/	11 ^	<u>~~``</u>	
25										(11,3	02.)
26	26 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											
	Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 \cdot 26 $-11, 302$.										302.	

For Paperwork Reduction Act Notice, see the separate instructions.

-11,302.

Schedule E (Form 1040) 2022