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	er's name	Social securi	ty numb	er
TAR	UN RAO UTLA	792-57	-9828	3
Spouse	's name	Spouse's soc	ial secu	rity number
Par	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you a	ire 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	79,250.
2	Total tax		2	10,209.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12,016.
4	Amount you want refunded to you		4	1,807.
5	Amount you owe		5	
Par	Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a cop	v of v	our 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

GLOBAL	TAXES	T.T.C	to enter or generate my PI	INI
GUODAU	TAVED		to enter or generate my Fi	11 1

Enter five digits, but don't enter all zeros							
7	9	8	2	8			

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

Date

#### Spouse's PIN: check one box only

I authorize

X 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 sig	gnature 🕨 🛛 Da	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		 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 >	Date 🕨							
-	Must Retain This Form — See Instructions t This Form to the IRS Unless Requested T							
For Denominarily Deduction Act Nation and your	bev return instructions	Earm <b>8870</b> (Bay, 01 2021)						

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

<b>1040</b>		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		rn 20 <b>2</b>	2	OMB No. 1545	-0074	IRS Use C	Dnly—D	o not w	rite or staple in th	is space.
Filing Status Check only		Single  Married filing jointly	_	I filing separately (N	,					spou	ifying survivir ıse (QSS)	0
one box.		u checked the MFS box, enter the nation is a child but not your dependent		our spouse. If you ch	neck	ed the HOH or	QSS	box, enter	r the c	child's	name if the c	lualifying
Your first name	and mi	ddle initial	Last nam	e					Y	our so	cial security n	umber
TARUN RA	40		UTLA						7	92-5	57-9828	
lf joint return, s	pouse's	first name and middle initial	Last nam	e					S	pouse'	s social securi	ty number
	`	r and street). If you have a P.O. box, see	instruction	IS.			A	Apt. no.			ntial Election C	
<u>103 DORS</u>		DR ce. If you have a foreign address, also co	mploto spr		Sta	to	ZIP c	odo			if filing jointly,	,
IRVING	051 0110	ce. Il you have a loreign address, also co	inpiete spa	aces below.	TX		750			0	this fund. Che	0
Foreign country	/ name		Eo	preign province/state/o				in postal cod			ow will not cha or refund.	ange
	, name			loigh province, clate, c	Joann	.y	1 or or or	n poota oot			You	Spouse
Digital		ny time during 2022, did you: (a) rec										No
Assets		ange, gift, or otherwise dispose of a	-	_		_	asset)	? (See Ins	structi	ons.)	Yes >	
Standard Deduction	_	eone can claim: U You as a de Spouse itemizes on a separate retur		Your spouse U								
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use	: 🗌 Was bor	n befo	ore Januar	ry 2, 1	1958	Is blind	
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	ip <b>(4</b>	) Check the	e box i	if qualif	ies for (see inst	ructions):
If more	<b>(1)</b> Fi	irst name Last name		number		to you		Child ta:	x cred	it	Credit for other o	dependents
than four												
dependents, see instructions	s ——											
and check												
here											<u> </u>	
Income	1a b	Total amount from Form(s) W-2, b Household employee wages not re		,					•	1a 1b	87	,450.
Attach Form(s)	c	Tip income not reported on line 1a					• •		•	10		
W-2 here. Also	d	Medicaid waiver payments not rep	•	,			• •		•	1d		
attach Forms W-2G and	e	Taxable dependent care benefits f			10110		• •		•	10		
1099-R if tax	f	Employer-provided adoption bene		-						1f		
was withheld.	g	Wages from Form 8919, line 6 .		-						1g		
get a Form	h	Other earned income (see instruct								1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instru	ctions)		1i						
	z	Add lines 1a through 1h								1z	87	,450.
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest	: .			2b		
if required.	3a	Qualified dividends	3a		<b>b</b> 0	rdinary divide	nds .			3b		
	4a	IRA distributions	4a		b T	axable amoun	t			4b		
Standard	5a	Pensions and annuities	5a		b T	axable amoun	t			5b		
<ul> <li>Deduction for –</li> <li>Single or</li> </ul>	6a	Social security benefits	6a		bΤ	axable amoun	t			6b		
Married filing	с	If you elect to use the lump-sum e	lection m	ethod, check here (	see	instructions)						
separately, \$12,950	7	Capital gain or (loss). Attach Sche	dule D if r	equired. If not requ	ired	, check here				7		
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin	e10 .		•					8		,200.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8. Tl	his is your <b>total inc</b>	ome	ə				9	79	,250.
surviving spouse, \$25,900	10	Adjustments to income from Sche								10		
Head of	11	Subtract line 10 from line 9. This is								11		,250.
household, \$19,400	12	Standard deduction or itemized								12		<u>,950.</u>
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deduct			899	5-A			•	13		
Standard Deduction,	14	Add lines 12 and 13					• •		•	14		<u>,950.</u>
see instructions.	15	Subtract line 14 from line 11. If zer	o or less,	enter -U This is ye	our <b>i</b>	axable incom	e.		•	15	66	,300.

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): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	10	,209.
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	10	,209.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	ie8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	10	,209.
	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	10	,209.
Payments	25	Federal income tax withheld								
,	а	Form(s) W-2				<b>25a</b> 12	2,016.			
	b	Form(s) 1099				25b		1		
	с	Other forms (see instructions				25c		-		
	d	Add lines 25a through 25c						25d	12	,016.
	26	2022 estimated tax payment						26		
If you have a 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, lin				31		-		
	32	Add lines 27, 28, 29, and 31						32		
	33	Add lines 25d, 26, and 32. T			•			33	12	,016.
Defined	34	If line 33 is more than line 24	,					34		,807.
Refund	35a	Amount of line 34 you want				, .		35a		,807.
Direct deposit?	b	Routing number X X X					Savings			<u>.</u>
See instructions.		Account number X X X					ournigo			
	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, g						37		
	38	Estimated tax penalty (see ir	-			38		0.		
Third Party		you want to allow another								
Designee		structions	•				omplete l	below.	× No	
	De	signee's		Phone			onal identi			
	nai	me		no.		num	ber (PIN)			
Sign		der penalties of perjury, I declare t			1 2 0		,		,	0
Here	bel	ief, they are true, correct, and com	plete. Declaration	of preparer (othe	,	ased on all informati				0
	Yo	ur signature		Date	Your occupation				nt you an Ide IN, enter it he	,
Joint return?					IT EMPLOY	ER		inst.)		
See instructions.	Sp	ouse's signature. If a joint return, <b>t</b>	ooth must sian.	Date	Spouse's occupat		If the	e IRS se	nt your spous	se an
Keep a copy for	-1-						Iden	tity Prot	ection PIN, e	
your records.							(see	inst.)		
		one no. (832)818-211		Email address	TARUNRAOUT	LA@GMAIL.CO	M			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/19/2023	P0208	2703	Self-er	nployed
Use Only	Fir	m's name GLOBAL TAX	XES LLC				Phor	ne no. (	678)965	-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm	's EIN	88-21	45487
Go to www.irs.ge	ov/Form	n1040 for instructions and the late	st information.		BAA	REV 01/09/23 PRO			Form 1	<b>040</b> (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.

OMB No. 1545-0074 2

Department of the Treasury Internal Revenue Service	Attachment Sequence No. <b>01</b>		
Name(s) shown on For	m 1040, 1040-SR, or 1040-NR	Your soc	ial security number
TARUN RAO UTLA		792-57	-9828
		-	

Par	t I 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. Atta	ach Scheo	dule E .	5	-8,200.
6	Farm income or (loss). Attach Schedule F.			6	
7	Unemployment compensation			7	
8	Other income:				
а	Net operating loss	<b>8a</b> (		)	
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				
		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	<b>8s</b> (		4	
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:				
0	Tatal ather income. Add linco for through On	8z			
9	Total other income. Add lines 8a through 8z		 ND line 9	9 10	-8,200.
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, 01 1040-	inn, iine ð	10	-8,200.

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			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		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	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				
ĥ	Attorney fees and court costs for actions involving certain unlawful					
		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					
		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	<u> </u>	<u> </u>	<u></u>	26	
	ВАА	REV	01/09/23 P	RO	Schedul	e 1 (Form 1040) 20

SCHEDULE	Е
(Form 1040)	

Department of the Treasury

### **Supplemental Income and Loss**

OMB No. 1545-0074

Attachment Sequence No. 13

20

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to *www.irs.gov/ScheduleE* for instructions and the latest information.

Internal Revenue Service Go to

	ame(s) snown on return FARUN RAO UTLA								792-57-9828			
				. 112				/92-5	7-9828			
Par	Note: If you a	Loss From Rental Real Estate an re in the business of renting personal proper or loss from Form 4835 on page 2, line 40.			<b>c</b> . See	instru	ctions. If you ar	re an indi	vidual, rep	ort far	m	
Α	Did you make any p	ayments in 2022 that would require you	Form(s) 1	099? 5	See ins	structions		. 🗌 Ye	es X	No		
B	"Yes," did you or will you file required Form(s) 1099?							🗌 Yes 🗌 No				
1a		s of each property (street, city, state, ZII										
				•)								
<u>A</u>												
B C												
			Fair Rental			Democratulas						
1b	Type of Property (from list below) 2 For each rental real estate property list above, report the number of fair rental				-		Days	Personal Use Days		Q	QJV	
Α	3	personal use days. Check the Q			Α		365		0			
B	3	if you meet the requirements to f			 B		305	0				
C		qualified joint venture. See instru	S.	C						3		
	of Property:				0					<u> </u>		
	Single Family Resid	dence 3 Vacation/Short-Term Ren	tal	5 Land	1	7	Self-Rental					
	Multi-Family Reside		itai	6 Roya			Other (descri	he)				
~	Walti Falliny Resid			- O Hoya		0						
					Properties:							
	ncome:				Α	В				С	C	
3			3		6	00.						
4			4									
Exper			_									
5	-		5									
6	Auto and travel (see instructions)											
7	Cleaning and maintenance				800.							
8			8									
9			9									
10	Legal and other professional fees		10									
11	Management fees				500.							
12			12 13									
13					2 500							
14 15					2,500.							
15 16	Supplies         .<			2,200.								
17	Utilities		16 17		2,800.							
18		ense or depletion	18		2,0	00.						
19			19									
20	Total expenses. A	Add lines 5 through 19	20		8,8	00.						
21		rom line 3 (rents) and/or 4 (royalties). If			- , -							
		see instructions to find out if you must										
			21		-8,2	00.						
22	Deductible rental	real estate loss after limitation, if any,								-		
	on <b>Form 8582</b> (se	ee instructions)	22	(	8,20	00.)	(	)	(		)	
23a	Total of all amoun	nts reported on line 3 for all rental prope	rties			23a		600.				
b	Total of all amoun	nts reported on line 4 for all royalty prop	erties			23b						
С	Total of all amoun	nts reported on line 12 for all properties				23c						
d	Total of all amoun	nts reported on line 18 for all properties			<b>23d</b>							
е		nts reported on line 20 for all properties		<b>23e</b>				,800.				
24	Income. Add pos					24						
25	Losses. Add royal	Ity losses from line 21 and rental real esta	te loss	ses from lir	ne 22. E	Inter to	otal losses here	e <b>25</b>	(	8,2	00.)	
26		estate and royalty income or (loss).										
		III, IV, and line 40 on page 2 do not								_		
	Schedule 1 (Form	1040), line 5. Otherwise, include this a	mount	t in the tol	tai on li	ne 41	on page 2	26		-8,	200.	