Form **8879**

(Rev. January 2021)

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.

OMB No. 1545-0074

Subm	nission Identification Number (SID)					
Taxpay	yer's name	Social security	y number			
PRA	-0696					
Spouse	Spouse's name Spouse's socia					
Par	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	 er year you ar	re authorizing.)			
	whole dollars only on lines 1 through 5.	, ,	<u> </u>			
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1 1 100,255			
2	Total tax		2 14,829.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 17,799.			
4	Amount you want refunded to you		4 2,970.			
5	Amount you owe		5			
Par	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy	y of your return)			
return to sen for an Agent payme author payme busine taxes person	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abort (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transfer my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for respect to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in ent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recess days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the nal identification number (PIN) below is my signature for the income tax return (original or amended) I onic Funds Withdrawal Consent.	mitter, or electro- ejection of the tra U.S. Treasury ar dicated in the ta cion to debit the te the authoriza quests must be e processing of payment. I furtl	anic return originator (ERG ansmission, (b) the reasond its designated Financi ax preparation software for entry to this account. Thation. To revoke (cancel) a received no later than the electronic payment of the acknowledge that the			
Тахр	ayer's PIN: check one box only					
	I authorize GLOBAL TAXES LLC to enter or generate	ř Ent	o 6 9 6 as m			
	signature on the income tax return (original or amended) I am now authorizing.	doi	n't enter all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.					
Your	signature ▶ Date ▶					
Snou	se's PIN: check one box only					
Spou	_	, my DINI				
L	I authorize to enter or generate to enter or generate	,	er five digits, but			
	signature on the income tax return (original or amended) I am now authorizing.		't enter all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.					
Spou	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue belov	v				
Part	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		6 6 1 9 8 9 er all zeros			
autho	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sub ements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	mitting this retu	rn in accordance with th			
FR∩'	s signature ▶ Date ▶					
<u> </u>	ERO Must Retain This Form — See Instructions					
	ENG MUSI REMINITION FOR THE SECTION OF THE SECTION					

Don't Submit This Form to the IRS Unless Requested To Do So

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-007

IRS Use Only-Do not write or staple in this space.

Filing Status	s 🔀 S	Single Married filing jointly	Marrie	ed filing separately	y (MFS)	☐ Head of	household (HOH)		ifying s		ng	
Check only one box.	•	u checked the MFS box, enter the n	,	our spouse. If you	u check	ed the HOH or	QSS box, enter th		use (QS name it	,	_l ualifying	
Vour firet name		on is a child but not your dependen	Last nar	me				Vour so	cial sec	urity n	umber	
			TAK	ne .				Your social security number 500-97-0696				
	nouse's	s first name and middle initial	Last nar	me				Spouse's social security number				
n jonit rotarn, o	podoo c	, mot harro and middle initial	Laorna	110				opouse s social security number				
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	Preside	ntial Ele	ction C	Campaign	
3711 MEI	· DTCAI	DR					2712		eck here if you, or your			
		ce. If you have a foreign address, also co	omplete sp	paces below.	Sta	te	ZIP code	spouse if filing jointly, want \$3				
SAN ANTO				TX 78					to go to this fund. Checking a box below will not change			
Foreign country			F	oreign province/sta	ite/coun	ty	Foreign postal code		tax or refund.			
							·		Yo	u [Spouse	
Digital	At ar	ny time during 2022, did you: (a) red	eive (as	a reward, award,	or payr	ment for prope	rty or services); or	(b) sell,				
Assets	exch	ange, gift, or otherwise dispose of	a digital a	asset (or a financi	al inter	est in a digital	asset)? (See instru	ictions.)	Ye	s 🛚	V o	
Standard	Som	eone can claim:	ependent	Your spo	use as	a dependent						
Deduction		Spouse itemizes on a separate retu	n or you	were a dual-stat	us alien	l						
Age/Blindness	s You:	☐ Were born before January 2, 1	958	Are blind	Spouse	: Was bor	n before January 2	2, 1958	☐ Is	blind		
Dependent	s (see	instructions):		(2) Social secu	ırity	(3) Relationsh	ip (4) Check the b	ox if qualit	ies for (s	ee inst	ructions):	
If more	(1) First name Last name			number		to you	Child tax c	redit	Credit for	other o	dependents	
than four												
dependents, see instruction	s ——											
and check	·											
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .				. 1a	↓	110,	<u>,281.</u>	
	b	Household employee wages not r		. ,				. 1b	\bot			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)										
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)										
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26										
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29										
If you did not	g	Wages from Form 8919, line 6.						. 1g . 1h				
get a Form W-2, see	h	Other earned income (see instructions)									0.	
instructions.	i	Nontaxable combat pay election (see instr	uctions)		<u>li</u>			4	110	0.01	
		Add lines 1a through 1h			 L T			. 1z		110,	,281.	
Attach Sch. B if required.	2a	Tax-exempt interest	2a			axable interes		. 2b				
	3a	Qualified dividends	3a			ordinary divide		. 3b				
Standard	4a 5a	IRA distributions Pensions and annuities	4a 5a			axable amoun axable amoun		. 4b . 5b				
Standard Deduction for—	6a		6a			axable amoun		. 6b				
Single or Married filing	C	-	_	nethod check he			ι	. OB				
separately,	7	If you elect to use the lump-sum election method, check here (see instructions) L Capital gain or (loss). Attach Schedule D if required. If not required, check here							1			
\$12,950 Married filing	8	Other income from Schedule 1, lir								<u>-10</u>	,026.	
jointly or Qualifying	9	·	, 7, and 8. This is your total income								,255.	
surviving spouse,	10	Adjustments to income from Schedule 1, line 26										
\$25,900 • Head of	11	Subtract line 10 from line 9. This is						. <u>10</u> . 11		100.	,255.	
household, \$19,400	12	Standard deduction or itemized						. 12			,950.	
If you checked	13	Qualified business income deduct		•	,			. 13				
any box under Standard	14							. 14	1	12.	,950.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze									,305.	
SSS IIISTI UOTIONIS.												

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	14,829.
Credits	17	Amount from Schedule 2, lin	ne 3						17	
	18	Add lines 16 and 17							18	14,829.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812				19	
	20	Amount from Schedule 3, lin	ie 8						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	14,829.
	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	14,829.
Payments	25	Federal income tax withheld	from:				i			
	а	Form(s) W-2				25a	17	7,799.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c							25d	17,799.
If you have a	26	2022 estimated tax payment	ts 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 from	m 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, lin	ie 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	undabl	e credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	17,799.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you	overpaid		34	2,970.
	35a	Amount of line 34 you want			is attached, che	ck here			35a	2,970.
Direct deposit? See instructions.	b	Routing number 1 2 2				Check	king 🗌	Savings		
See instructions.	d	Account number 1 5 7	5 0 5 3	6 1 5 4	1 1					
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g		•					37	
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party Designee		you want to allow another	•		n with the IRS?		Yes. C	omplete	below.	X No
200.900	De	esignee's Phone Personal id								
	nai	ame no. number (PIN)								
Sign Here		der penalties of perjury, I declare tief, they are true, correct, and com								
Here	Yo	Your signature		Date Your occupation				If the IRS sent you an Identity Protection PIN, enter it here		
Joint return?					SOFTWARE I	ENGIN	IEER		e inst.)	
See instructions. Keep a copy for your records.	Sp	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupation			Ide		nt your spouse an ection PIN, enter it here
	Ph	one no. (909) 672-430	3	Email address	TAK.PRAGYA	A@GMZ	AIL.CON	1		
Daid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/0	14/2023	P0208	32703	Self-employed
Preparer	Fin	m's name GLOBAL TA	XES LLC					Pho	ne no.	(678) 965-9522
Use Only							n's EIN	84-3171965		

SCHEDULE 1 (Form 1040)

PRAGYA TAK

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

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

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

	Sequence No. 01
Your soci	ial security number
500-07	_0696

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. Att	ach Schedule E .	5	-10,026.
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		
ı	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 (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-		
0	Total other income. Add lines to through to	8z		
9 10	Total other income. Add lines 8a through 8z		9	-10-026

Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-	-basis 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	, , , , ,	24a		
b	Deductible expenses related to income reported on line 8l from the			
		24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	· · · · · · · · · · · · · · · · · · ·	24c		
d	' '	24d	_	
е	Repayment of supplemental unemployment benefits under the Trade			
	F	24e	_	
f		24f	-	
g	• • • • • • • • • • • • • • • • • • • •	24g	-	
h	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			
		24i	-	
j		24j	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
		24k	-	
Z	Other adjustments. List type and amount:	0.4		
0-		24z	0.5	
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 here and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. 13

Your social security number

PRAC	GYA TAK						500-9	7-0696)
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	d Ro	yalties e Schedule	C . See	instru	ctions. If you ar	re an indiv	vidual, rep	oort farm
	Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions								es 🗵 No
В	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city, state, ZIF	od cod	e)						
Α	KRISHNA MANDIR, VIJAY CHOWK NAGORI GATE	т. д	ODHPIJR	RAJ	ASTH	AN TN 342	001		
В	INCOME TRANSPORT VIOLET CHOWN MINORITORIES		ODIII OIC	10101	10 111	111 111 312	001		
C									
1b	Type of Property (from list below) 2 For each rental real estate property list above, report the number of fair rental real estate property list above.			and		ir Rental Days	Personal Use Days		QJV
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	qualified joint volitare. eee inetra	1011011	0.	С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (descri	ibe)		
						Propertie	es:		
Incor	ne:			Α		В			С
3	Rents received	3		6	31.				
4	Royalties received	4							
-	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,8	65.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		2,1	33.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13			4.5				
14	Repairs	14			17.				
15	Supplies	15		2,3	98.				
16	Taxes	16		0 0	1.1				
17	Utilities	17		2,0	44.				
18	Depreciation expense or depletion	18							
19	Other (list)	19		10 0					
20	Total expenses. Add lines 5 through 19	20		10,6	5/.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21	_	-10,0	26.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(10,02	26.)	()	()
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		631.		
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	10	,657.		
24	Income. Add positive amounts shown on line 21. Do no	t inclu	ude any lo	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estat	te loss	ses from lir	ne 22. E	nter to	otal losses her	e 25	(10,026.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, IV, and line 40 on page 2 do not Schedule 1 (Form 1040), line 5. Otherwise, include this ar						n 26		-10,026.