

Department of the Treasury Internal Revenue Service

Calendar Year — Due **04/18/2023** 

# 2023 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the \*United States Treasury.\* Write your social security number and \*2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

PJO:

162-53-0196 SWAROOP VASA APPLIED FOR

8226 GREEN PARROT ROAD UNIT 205 JACKSONVILLE FL 32256



Department of the Treasury Internal Revenue Service

Calendar Year — Due **06/15/2023** 

# 2023 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the \*United States Treasury.\* Write your social security number and \*2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

PJO:

162-53-0196 SWAROOP VASA APPLIED FOR

8226 GREEN PARROT ROAD UNIT 205 JACKSONVILLE FL 32256



Department of the Treasury Internal Revenue Service

Calendar Year — Due **09/15/2023** 

# 2023 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the \*United States Treasury.\* Write your social security number and \*2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

610.

162-53-0196 SWAROOP VASA APPLIED FOR

8226 GREEN PARROT ROAD UNIT 205 JACKSONVILLE FL 32256



Department of the Treasury Internal Revenue Service

Calendar Year — Due **01/16/2024** 

# 2023 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the \*United States Treasury.\* Write your social security number and \*2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

PJO:

162-53-0196 SWAROOP VASA APPLIED FOR

8226 GREEN PARROT ROAD UNIT 205 JACKSONVILLE FL 32256

#### 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

IIILEIIIai	nevertue Service	
Subm	nission Identification Number (SID)	·
Taxpay	ver's name	Social security number
SWA	AROOP VASA	162-53-0196
Spouse	e's name	Spouse's social security number
		APPLIED FOR
Par	Tax Return Information — Tax Year Ending December 31, 202	2 (Enter year you are authorizing.)
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	
2	Total tax	<b>2</b> 3,438.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4	Amount you want refunded to you	
5 Part	Amount you owe	
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or	
to sen for any Agent payme author payme busine taxes persor	(original or amended) I am now authorizing. I consent to allow my intermediate service provided my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reas y delay in processing the return or refund, and (c) the date of any refund. If applicable, I autho to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution actent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial rization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancell ess days prior to the payment (settlement) date. I also authorize the financial institutions involve to receive confidential information necessary to answer inquiries and resolve issues related to the confidential information of the payment (PIN) below is my signature for the income tax return (original or amendation).	on for rejection of the transmission, (b) the reasonize the U.S. Treasury and its designated Financia count indicated in the tax preparation software for all institution to debit the entry to this account. This terminate the authorization. To revoke (cancel) action requests must be received no later than 2 ted in the processing of the electronic payment of the to the payment. I further acknowledge that the
	ayer's PIN: check one box only	
		enerate my PIN 3 0 1 9 6 as my
•	ERO firm name	Enter five digits, but don't enter all zeros
	signature on the income tax return (original or amended) I am now authorizing.	don't enter an zeros
	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN <b>and</b> your return is filed using the Practitioner Fibelow.	
Your	signature >	Date ►
· -	ERO firm name	enerate my PIN  Enter five digits, but
_	signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
	I will enter my PIN as my signature on the income tax return (original or amender if you are entering your own PIN <b>and</b> your return is filed using the Practitioner Fibelow.	
Snous	se's signature	Date ►
Ороц	Practitioner PIN Method Returns Only—continu	
Part		0 001011
	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2 4 9 6 6 1 9 8 9  Don't enter all zeros
author require	fy that the above numeric entry is my PIN, which is my signature for the electronic individual rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I ements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Prov	am submitting this return in accordance with the iders of Individual Income Tax Returns.
EDO'	e eignatura 🕨	)ata

ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

Form 1040-V (2022) 2022 Page **2** 

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V 2022** 

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service 2022

Form 1040-V Payment Voucher

- ► Use this voucher when making a payment with Form 1040.
- ► Do not staple this voucher or your payment to Form 1040.
- Make your check or money order payable to the 'United States Treasury.'

► Write your social security number (SSN) on your check or money order.

Enter the amount of your payment . . . . . ► 2 · 523 · REV 02/05/23 PRO 1555

SWAROOP VASA

8226 GREEN PARROT ROAD UNIT 205 JACKSONVILLE FL 32256

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

2022
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OMB No. 1545-0074

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

Filing Status Check only one box.		Single  Married filing jointly [ u checked the MFS box, enter the r		ed filing separately (					spou	ifying surv use (QSS) name if th	Ü
		on is a child but not your dependen		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							, , ,
Your first name and middle initial			Last name						Your social security number		
SWAROOP			VASA						162-53-0196		
If joint return, spouse's first name and middle initial			Last nar	me					Spouse's social security number		
									APPLIED FOR		
Home address	(numbe	er and street). If you have a P.O. box, see	e instructio	ons.	Apt. no.				Presidential Election Campa		
8226 GRE	EN I	PARROT ROAD UNIT 205							Check here if you, or your		,
City, town, or post office. If you have a foreign address, als			complete spaces below. State Z			ZIP code				tly, want \$3 Checking a	
JACKSONVILLE			FL 3			32256			ow will not		
Foreign country name			Foreign province/state/county						or refund.	Ü	
										You	Spouse
Digital	At ar	ny time during 2022, did you: (a) red	eive (as	a reward, award, or	payr	ment for prope	rty or serv	rices); or	(b) sell,		
Assets		ange, gift, or otherwise dispose of								Yes	X No
Standard	Som	eone can claim: You as a de	ependent	Your spous	se as	a dependent		47			
<b>Deduction</b>		Spouse itemizes on a separate retu	rn or you	were a dual-status	alien	1					
Ago/Plindness	Value	☐ Were born before January 2,	1059	Are blind Sp	ouse	. D Was hor	n before	lanuary (	1059	☐ Is bli	nd
		<u> </u>	1930 _	<u> </u>			100				instructions):
Dependents				(2) Social securit number	У	(3) Relationsh to you	ip i			•	•
If more than four	(1) =	irst name Last name		number		to you	Child tax c		eait	Credit for oth	ner dependents
dependents,										<u>L</u>	
see instructions	s ——									<u>L</u>	┽──
and check here										<u>L</u>	┽──
	10	Total amount from Form(s) W-2, b	20 1 (co	o instructions)					10		<u> </u>
Income	1a	Household employee wages not r							. <u>1a</u> . 1b		57,977.
Attach Form(s)	b			7					10 10		
W-2 here. Also	c	Tip income not reported on line 1a (see instructions)							. 1d		
attach Forms W-2G and	d										
1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26						. 1e			
was withheld.	f		nployer-provided adoption benefits from Form 8839, line 29								
If you did not get a Form	g	Wages from Form 8919, line 6.							. 1g		0.
W-2, see	h :	Other earned income (see instruc					· · ·		. 1h		0.
instructions.	i	Nontaxable combat pay election (	see mstr	uctions)		!!			- 1-	_	57,977.
A# O D	z 2a	Add lines 1a through 1h	2a		 ьт	avabla interest			. 1z . 2b		1,911.
Attach Sch. B if required.	2a 3a	Tax-exempt interest	3a			axable interest Ordinary divider			3b		
	<u> </u>	IRA distributions	4a			axable amoun			. 4b		
Standard	<del>т</del> а 5а	Pensions and annuities	5a	,		axable amoun			. 5b		
Deduction for—	6a	Social security benefits	6a			axable amoun			. 6b		
Single or	C	If you elect to use the lump-sum election method, check here (see instructions)							. 00		
Married filing separately,											
\$12,950 Married filing	950 Capital gain or (loss). Attach Schedule D if required, if not required, check here					L	_				
jointly or	9								9	+	57,977.
Qualifying surviving spouse,	10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							. 10	+ - 3	1,311.
\$25,900	11	Adjustments to income from Schedule 1, line 26							. 11	-	7 077
<ul> <li>Head of household,</li> </ul>	12	Standard deduction or itemized	•						. 12		57,977.
\$19,400 If you checked	-	Qualified business income deduc		,	,	 15_Δ			. 13		25,900.
any box under	13									_	
Standard Deduction,	14 15	Add lines 12 and 13						. 14		25,900.	
see instructions.	13	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>							. 15		32,077.

Form 1040 (2022	2)			Page <b>2</b>	
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	3,438.	
Credits	17	Amount from Schedule 2, line 3	17		
3133113	18	Add lines 16 and 17	18	3,438.	
	19	Child tax credit or credit for other dependents from Schedule 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	3,438.	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.	
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	3,438.	
Payments	25	Federal income tax withheld from:			
,	а	Form(s) W-2			
	b	Form(s) 1099			
	С	Other forms (see instructions)			
	d	Add lines 25a through 25c	25d	999.	
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26		
qualifying child,	27	Earned income credit (EIC)			
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812			
	29	American opportunity credit from Form 8863, line 8			
	30	Reserved for future use			
	31	Amount from Schedule 3, line 15			
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32		
	33	Add lines 25d, 26, and 32. These are your total payments	33	999.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34		
riciana	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a		
Direct deposit?	b	Routing number X X X X X X X X X X X C Type: Checking Savings			
See instructions.	d	Account number X X X X X X X X X X X X X X X X X X X			
	36	Amount of line 34 you want applied to your 2023 estimated tax			
Amount You Owe	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .  For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37	2,523.	
	38	Estimated tax penalty (see instructions)			
Third Party		you want to allow another person to discuss this return with the IRS? See			
Designee		structions		⊠ No	
		signee's Phone Personal identi ne no. number (PIN)	rication		
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which			
Here	Yo	ur signature Date Your occupation If the	e IRS se	nt you an Identity	
			ection P inst.)	IN, enter it here	
Joint return? See instructions.		SOFTWARE ENGINEER		<u> </u>	
Keep a copy for	Sp			nt your spouse an ection PIN, enter it here	
your records.			inst.)		
	Ph	one no. (904)962-8342 Email address SWRUPK@GMAIL.COM			
Daid	Pre	eparer's name Preparer's signature Date PTIN		Check if:	
Paid	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/12/2023 P0208	2703	Self-employed	
Preparer			Phone no. (678)965-9522		
Use Only	Fire		's EIN	84-3171965	