### Department of the Treasury Internal Revenue Service

# **IRS e-file Signature Authorization**

OMB No. 1545-0074

Social security number

ERO must obtain and retain completed Form 8879.
 Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name

Takpayor o hanno	
PRAVEEN KUMAR MYNENI	363-73-0887
Spouse's name	Spouse's social security number
SWAPNA MYNENI	159-57-5201
Part I Tax Return Information – Tax Year Ending December 31, 2022 (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.	
<b>1</b> Adjusted gross income	<b>1</b> 71,799.
<b>2</b> Total tax	<b>2</b> 5,094.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3
4 Amount you want refunded to you	4
5 Amount you owe	<b>5</b> 5,276.
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k	keep a copy of your return)

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

X	I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN
			ERO firm name	

3	0	8	8	7	as mv
Ent don	er fiv i't er				

1

Enter five digits, but don't enter all zeros

as mv

7 5 2 0

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

## Spouse's PIN: check one box only

X I authorize GLOBAL TAXES LLC 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 >	Date 🕨	
Practitioner PIN Method Ret	urns Only—continue below	
Part III Certification and Authentication – Practitioner	PIN Method Only	
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-dig	it self-selected PIN. 2 2 2 4 9 6 6 1 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 ►	
	n This Form — See Instructions to the IRS Unless Requested To Do So	
E. B		9970 (Days 01 0001)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

Date

to enter or generate my PIN

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



# 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. REV 02/24/23 PRO 1555

5.276.

INTERNAL REVENUE SERVICE P.O. BOX 1214 CHARLOTTE, NC 28201-1214

### PRAVEEN KUMAR MYNENI SWAPNA MYNENI 3120 AVENUE OF THE STARS #1324 FRISCO TX 75034

E1040		rtment of the Treasury—Internal Revenue Servi <b>5. Individual Income Tax</b>		<sub>ırn</sub> 20 <b>2</b>	2	OMB No. 1545	-0074	IRS Use	Only—[	Do not w	rite or staple	in this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly C u checked the MFS box, enter the n on is a child but not your dependent	ame of y	d filing separately (N our spouse. If you c						spou	lifying sun use (QSS) s name if th	0
Your first name	and mi	ddle initial	Last nan	ne					Y	'our so	cial securi	ty number
PRAVEEN	KUMA	AR	MYNEI	NI					3	63-	73-088	7
If joint return, sp	ouse's	first name and middle initial	Last nan	ne					s	pouse'	's social see	curity number
SWAPNA			MYNEI	NI					1	59-	57-520	1
Home address (	numbe	r and street). If you have a P.O. box, see	instructio	ons.			A	pt. no.	P	reside	ntial Election	on Campaign
	NUE	OF THE STARS					#	1324			nere if you,	
City, town, or po	ost offic	ce. If you have a foreign address, also co	mplete sp	baces below.	Sta	ate	ZIP co	ode		•		tly, want \$3 Checking a
FRISCO					TΣ	X	750	34		0	ow will not	•
Foreign country	name		F	oreign province/state/	coun	ty	Foreig	n postal co	ode y	our tax	c or refund.	
											You	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a									Yes	X No
Standard	Som	eone can claim: 🗌 You as a de	pendent	Your spous	e as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alier	ı						
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	ouse	: 🗌 Was bor	n befc	ore Janua	arv 2. <sup>-</sup>	1958	🗌 ls bl	ind
Dependents				(2) Social security		(3) Relationsh	14					instructions):
	`	rst name Last name		number		to you		Child ta		· · ·		her dependents
lf more than four												
dependents,								[	1			
see instructions and check								[	1			
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)						1a	8	82,119.
Income	b	Household employee wages not re	eported o	on Form(s) W-2 .						1b		
Attach Form(s)	с	Tip income not reported on line 1a	(see ins	tructions)						1c	;	
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	orted on	n Form(s) W-2 (see i	nstru	uctions)				1d		
W-2G and	е	Taxable dependent care benefits f	rom Forr	m 2441, line 26						1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29						1f		
lf you did not	g	Wages from Form 8919, line 6 .								1g		
get a Form	h	Other earned income (see instruct	ions) .				· ·			1h	1	0.
W-2, see instructions.	i	Nontaxable combat pay election (	see instru	uctions)		<b>1</b> i						
	z	Add lines 1a through 1h								1z	8	82,119.
Attach Sch. B	2a	Tax-exempt interest	2a		bΤ	axable interest				2b	)	
if required.	3a	Qualified dividends	3a			Ordinary divider				3b	)	
	4a		4a			axable amoun				4b	)	
Standard Deduction for –	5a		5a			axable amoun				5b		
Single or	6a		6a			axable amoun	t		· .	6b	•	
Married filing separately,	С	If you elect to use the lump-sum e			`	,	• •	• •	· 📋			
\$12,950	7	Capital gain or (loss). Attach Sche					• •	• •	. Ц	7	-	
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin					· ·	• •		8		<u>10,320.</u>
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		•			• •			9		71,799.
\$25,900	10	Adjustments to income from Sche					• •		• •	10		71 700
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is	-				• •	• •		11		<u>71,799.</u>
\$19,400	12	Standard deduction or itemized				 	• •	• •		12		25,900.
<ul> <li>If you checked any box under</li> </ul>	13 14	Qualified business income deduct			099	ю-А		• •		13		
Standard Deduction,	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer			· ·	· · · · ·		• •		14		<u>25,900.</u> 45 900
see instructions.			0 01 1035	, ontor 0-, rins is y	Jui		• .	• •	• •	15	<u> </u>	45,899.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)									Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	5	,094.
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	5	,094.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	5	,094.
	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 <b>total tax</b>					24	5	,094.
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25a				
	b	Form(s) 1099				25b				
	с	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d		
If	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return			26		
If you have a <sup>L</sup> qualifying child,	27	Earned income credit (EIC)			No	27				
attach Sch. EIC.	28	Additional child tax credit from				28		1		
	29	American opportunity credit	from Form 8863	3, line 8		29		1		
	30	Reserved for future use .				30		1		
	31	Amount from Schedule 3, lin				31		1		
	32	Add lines 27, 28, 29, and 31				undable credits		32		
	33	Add lines 25d, 26, and 32. T	,		-			33		
Defund	34	If line 33 is more than line 24						34		
Refund	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	is attached, che	ck here	. 🗆	35a		
Direct deposit?	b	Routing number X X X					Savings			
See instructions.	d	Account number X X X					0			
	36	Amount of line 34 you want a				36				
Amount	37	Subtract line 33 from line 24	This is the <b>amo</b>	ount vou owe						
You Owe	0.	For details on how to pay, g						37	5	,276.
	38	Estimated tax penalty (see in				38	182.			
Third Party	Do	you want to allow another				' See				
Designee		structions	•				omplete l	celow.	× No	
U U	De	signee's		Phone			onal identi	fication		
	nai	me		no.		num	ber (PIN)			
Sign		der penalties of perjury, I declare t								
Here		lief, they are true, correct, and com	plete. Declaration of		1, 2, 7	ased on all information		• •	,	0
	Yo	ur signature		Date	Your occupation				nt you an Ide IN, enter it he	,
Joint return?					SR ACCOUN	T MANAGER		inst.)		
See instructions.	Sp	ouse's signature. If a joint return, <b>t</b>	ooth must sign.	Date	Spouse's occupat		If the	e IRS ser	nt your spous	se an
Keep a copy for		<b>0</b>	0				Iden	tity Prote	ection PIN, er	
your records.					HOME MAKE	R	(see	inst.)		
		one no. (214)796-733		Email address	MYNENIPRAVEE	NKUMAR@GMAIL.C	MC			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer	VENK	ATA SAI PAVAN KUMAR DUDIPALLI	VENKATA SAI	PAVAN KUM	AR DUDIPALLI	02/25/2023	P0247	0833	Self-en	nployed
Use Only	Fir	m's name GLOBAL TAX	XES LLC				Pho	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.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 02/24/23 PRO			Form 10	<b>040</b> (2022)

SCHE	DULE	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 20 2

Department of the Treasury Internal Revenue Service	' Co to unum ire dov/Earm10/0 tor instructions and the latest intermation			
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number	
PRAVEEN KUMAR	& SWAPNA MYNENI	363-73	-0887	

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 Schedule E .	5	-10,320.
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 $\ldots$	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
ο	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	10.200
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-INR, line 8	10	-10,320.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

	Educator expenses					
2					11	
	Certain business expenses of reservists, performing artists, and fee	-basi	is qov	ernment		
	officials. Attach Form 2106				12	
	Health savings account deduction. Attach Form 8889				13	
4	Moving expenses for members of the Armed Forces. Attach Form 3903				14	
	Deductible part of self-employment tax. Attach Schedule SE				15	
	Self-employed SEP, SIMPLE, and qualified plans				16	
	Self-employed health insurance deduction				17	
	Penalty on early withdrawal of savings				18	
	Alimony paid				19a	
	Recipient's SSN					
С	Date of original divorce or separation agreement (see instructions):					
	IRA deduction				20	
	Student loan interest deduction				21	
	Reserved for future use				22	
	Archer MSA deduction				23	
	Other adjustments:					
	Jury duty pay (see instructions)	24a				
	Deductible expenses related to income reported on line 8l from the					
	rental of personal property engaged in for profit	24b				
	Nontaxable amount of the value of Olympic and Paralympic medals					
	and USOC prize money reported on line 8m	24c				
	Reforestation amortization and expenses	24d				
	Repayment of supplemental unemployment benefits under the Trade					
	Act of 1974	24e				
	Contributions to section 501(c)(18)(D) pension plans	24f				
	Contributions by certain chaplains to section 403(b) plans	24g				
	Attorney fees and court costs for actions involving certain unlawful	- 19			-	
	discrimination claims (see instructions)	24h				
	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				
	Housing deduction from Form 2555	24j				
	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
		24k				
	Other adjustments. List type and amount:	2-11			-	
-		24z				
25 <sup>±</sup>	Total other adjustments. Add lines 24a through 24z				25	
	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b>				20	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA		02/24/23 F			le 1 (Form 1040) 202

SCHEDULE E (Form 1040)		Supplemental Income and Loss (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)								OMB No. 1545-0074		
Department of the Treasury												
	Revenue Service		Go to www.irs.gov/ScheduleE for instruc								Sequence No. 13	
Name(s) shown on return										al security		
									3-0887			
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.												
Α												
B li											es 🗌 No	
1a												
Α	RAMNARESHCOLONY NIZAMPET HYDERABAD TELANGANA IN 500085											
В												
С												
1b	Type of Prope	erty list	ted	Fair Rental			Person	al Use	0.11/			
	(from list below) above, report the number of			rental			Days		Days		QJV	
Α	3			ersonal use days. Check the QJV bo you meet the requirements to file as			365		0			
В			qualified joint venture. See instru									
C						С						
Type of Property:												
	1 Single Family Residence3 Vacation/Short-Term Rental5 Land7 Self-Rental2 Multi-Family Residence4 Commercial6 Royalties8 Other (describe)											
2	wutti-Family Re	sidence	4 Commercial		6 Roya	atties	8	Other (desci	nbe)			
								Properti	es:			
Income:								В			С	
3			3									
4	Royalties rece	4										
Expenses:         5         Advertising         5         5												
5	0	5										
6	Auto and travel (see instructions)<					1 1	0.0					
7 8	Cleaning and r	7		1,100.								
9	Insurance .	9										
10	Legal and othe	10										
11	Management f	11		900.								
12	Mortgage inter	12										
13	Other interest	13										
14	Repairs	14		2,650.								
15	Supplies .	15	2,210.									
16	Taxes	16										
17	Utilities	17 18		3,9	40.							
18		xpense c	r depletion									
19	Other (list)			19		10.0						
20			es 5 through 19	20		10,8	00.					
21			ne 3 (rents) and/or 4 (royalties). If structions to find out if you must									
				21		-10,3	20.					
22	Deductible rental real estate loss after limitation, if any,											
	on <b>Form 8582</b> (see instructions)				(	10,32	0.)	r	)	(		
23a	Total of all am		<b>23</b> a				480.					
b		orted on line 4 for all royalty prop				23b						
С		Total of all amounts reported on line 12 for all properties										
d	Total of all amounts reported on line 18 for all properties											
е	Total of all am				23e		,800.					
24		•	amounts shown on line 21. <b>Do no</b>		-					/		
25			ses from line 21 and rental real esta							(	10,320.	
26	<b>Total rental real estate and royalty income or (loss).</b> 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											

NPA

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2022

26

-10,320.

-10,320.