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.

Submission Identification Number (SID)

Taxpay	er's name	Social security number					
SRE	E KAVYA VATTIKUTI	709-96-4420					
Spouse	s's name	Spouse's social security number					
Part	Tax Return Information – Tax Year Ending December 31, 2022 (Enter	er 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	1 72,311.					
2	Total tax	2 8,680.					
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 13,640.					
4	Amount you want refunded to you	. 4 4,960.					
5		5					

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your 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.

Taxpay	er's PIN: che	eck one box only		
X	I authorize	GLOBAL TAXES LLC	to enter or generate m	y PIN 6 4 4 2 0 as my
	signature or	ERO firm in the income tax return (original	name al or amended) I am now authorizing.	Enter five digits, but don't enter all zeros
			e income tax return (original or amended) I am nov Ir return is filed using the Practitioner PIN method	
Your sig	below. Inature ►	M-f-1.	Date ► 02	/14/2023
Spouse	's PIN: chec	k one box only		
	I authorize		to enter or generate m	y PIN as my
	signature or	ERO firm in the income tax return (original	name al or amended) I am now authorizing.	Enter five digits, but don't enter all zeros
			e income tax return (original or amended) I am nov ir return is filed using the Practitioner PIN method	
Spouse	s signature	•	Date ►	
			PIN Method Returns Only—continue below	
Part II	Certific	ation 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 4 9 6 6 1 9 8 9 Don't enter all zeros

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 🕨								
ERO Must Retain This F Don't Submit This Form to the I									
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 02/05/23 PRO	Form 8879 (Rev. 01-2021)						

1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		n 20 2	2	OMB No. 1545	-0074	IRS Use (Only—	Do not w	rite or staple	in this space.
Filing Status Check only			-	filing separately (N	,				, _	spou	use (QSS)	U
one box.	-	u checked the MFS box, enter the na on is a child but not your dependent	•	ır spouse. If you cl	neck	ed the HOH or	QSS	box, ente	r the	child's	name if th	ie qualifying
Your first name	and mi	ddle initial	Last name						1	our so	cial securit	y number
SREE KAV	ΥA		VATTI	KUTI					-	709-9	96-442	0
lf joint return, sp	ouse's	first name and middle initial	Last name						5	Spouse'	s social see	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instructions	3.			A	pt. no.	F	Preside	ntial Election	on Campaigr
8625 HIC	KORY	Y ST					1	.317			here if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete spac	ces below.	Sta	te	ZIP co	ode			0,	tly, want \$3 Checking a
FRISCO					TΣ	ζ	750	34		0	ow will not	0
Foreign country	name		For	eign province/state/o	coun	ty	Foreig	n postal co	de y	our tax	or refund.	Spouse
Digital		ny time during 2022, did you: (a) rece	•					,		,		
Assets		ange, gift, or otherwise dispose of a	-			-	asset)	? (See ins	struci	tions.)	Yes	X No
Standard Deduction		eone can claim:	•	Your spouse ere a dual-status		•						
Age/Blindness	You:	Were born before January 2, 1	958 🗌 /	Are blind Spo	ouse	: 🗌 Was bor	n befo	ore Janua	ry 2,	1958	🗌 ls bl	ind
Dependents	(see	instructions):		(2) Social security		(3) Relationsh	ip (4	Check th	e box	if qualif	fies for (see	instructions):
If more	(1) Fi	rst name Last name		number	to you			Child ta	x credit		Credit for ot	her dependents
than four											[
dependents, see instructions	;										[<u> </u>
and check								L	<u> </u>		[<u> </u>
here											[
Income	1a	Total amount from Form(s) W-2, b		,						1a		31,923.
Attach Form(s)	b	Household employee wages not re					• •	• • •	• •	1b		
W-2 here. Also	C d	Tip income not reported on line 1a				· · · ·	• •		• •	1c 1d		
attach Forms W-2G and	d e	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							10			
1099-R if tax	f	Taxable dependent care benefits from Form 2441, line 26 .								1f		
was withheld.	g	Wages from Form 8919, line 6.					• •	• • •	• •	1g		
If you did not get a Form	9 h	Other earned income (see instructi			•••		• •		• •	1h		0.
W-2, see	 i	Nontaxable combat pay election (see	,		•••	· · · · ·	· ·		• •			
instructions.	z	Add lines 1a through 1h			•••		_			1z	5	31,923.
Attach Sch. B		U U	2a		ь т	axable interest				2b		
if required.	3a	· · –	3a			rdinary divider				3b		
	4a		4a			axable amount				4b		
Standard	5a	-	5a			axable amount				5b		
Deduction for –	6a	Social security benefits	6a		bТ	axable amouni	t			6b		
 Single or Married filing 	с	If you elect to use the lump-sum e	lection me	thod, check here ((see	instructions)			. 🗆			
separately, \$12,950	7	Capital gain or (loss). Attach Schee	dule D if re	quired. If not requ	iired	, check here				7		
 Married filing 	8	Other income from Schedule 1, lin									-	-9,612.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8. Th	is is your total inc	om	ə				9		72,311.
surviving spouse, \$25,900	10	Adjustments to income from Sche	dule 1, line	26						10		
Head of	11	Subtract line 10 from line 9. This is	s your adju	isted gross incon	ne					11	-	72,311.
household, \$19,400	12	Standard deduction or itemized	deduction	ns (from Schedule	A)					12		12,950.
 If you checked 	13	Qualified business income deduction	ion from Fo	orm 8995 or Form	899	5-A				13		
any box under Standard	14	Add lines 12 and 13								14		12,950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less, e	enter -0 This is y	our	taxable incom	е.			15		59,361.
)												

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 i	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	8	,680.
Credits	17	Amount from Schedule 2, line	e3					17		
	18	Add lines 16 and 17						18	8	,680.
	19	Child tax credit or credit for o	other dependent	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	8	,680.
	23	Other taxes, including self-er	nployment tax,	from Schedule	e 2, line 21 .			23		0.
	24	Add lines 22 and 23. This is y	our total tax					24	8	,680.
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				25a 13	,640.			
	b	Form(s) 1099				25b				
	с	Other forms (see instructions				25c				
	d	Add lines 25a through 25c .	· · · · ·					25d	13	,640.
If you have a	26	2022 estimated tax payments	s and amount a	pplied from 20	21 return .			26		
If you have a l qualifying child,	27	Earned income credit (EIC) .				27				
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use				30		1		
	31	Amount from Schedule 3, line				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	13	,640.
Refund	34	If line 33 is more than line 24						34	4	,960.
neiuliu	35a	Amount of line 34 you want r	efunded to you	J. If Form 8888	3 is attached, che	ck here	. 🗆	35a	4	,960.
Direct deposit?	b	Routing number 0 7 4								
See instructions.	d	Account number 3 6 5	9 2 3 5	1 2			0			
	36	Amount of line 34 you want a	pplied to your	2023 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24.	This is the amo	ount vou owe						
You Owe		For details on how to pay, go						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?	See				
Designee		tructions	•				omplete b	elow.	X No	
		signee's		Phone			onal identif	ication		
	nai			no.			oer (PIN)			
Sign		der penalties of perjury, I declare the ief, they are true, correct, and comp								
Here		ur signature		Date	Vour occupation		1		nt you an Ide	0
	10		0		Four occupation				IN, enter it he	
Joint return?		M-J-J-U	(02/14/2023	SOFTWARE 1	ENGINEER	(see	nst.)		
See instructions.	Sp	Spouse's signature. If a joint refurn, both must sign.		Date	Spouse's occupat	ion			nt your spous	
Keep a copy for your records.							Ident (see i		ection PIN, e	nter it here
					-		,	1151.)		
		one no. (317) 699-3338		Email address	SREEKAVYA.VAT	TIKUTI@GMAIL.CO			Charle !!	
Paid		parer's name	Preparer's signat			Date	PTIN		Check if:	
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	02/13/2023	P02082		Self-er	
Use Only		m's name GLOBAL TAX			- 00011				678)965	
		m's address 245 ROONEY		NSWICK N			Firm	s EIN		71965
Go to www.irs.ge	ov/Forn	n1040 for instructions and the lates	st information.		BAA	REV 02/05/23 PRO			Form 1	040 (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

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 20 2

Attachment Sequence No. **01** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SREE KAVYA VATTIKUTI 709-96-4420

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	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		5	-9,612.
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		
	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-SR	l, or 1040-NR, line 8	10	-9,612.
D .	and the second			

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	e-basi	s gov	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	Jury duty pay (see instructions)	24a				
b	Deductible expenses related to income reported on line 8l from the					
	rental of personal property engaged in for profit	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				
h	Attorney fees and court costs for actions involving certain unlawful					
	discrimination claims (see instructions)	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					
	1041)	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	e. Ente	er here	and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	ВАА	REV	02/05/23 P	RO	Schedu	le 1 (Form 1040) 2022

SCHE	CHEDULE E Supplemental Income and Loss									OMB No	OMB No. 1545-0074			
(Form	orm 1040) (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)										20 2 2			
Departm	Attach to Form 1040, 1040-SR, 1040-NR, or 1041.										Attachm			
	Go to www.irs.gov/ScheduleE for instructions and the latest information.										Sequen	ce No. 13		
Name(s)	me(s) shown on return Your social											number		
	KAVYA VAT									709-9	6-4420			
Part				ental Real Estate an										
	Note: If yo rental inco	ou are ir me or l	n the business of the business of the business from Form	of renting personal proper 4835 on page 2, line 40.	ty, use	Schedule	C . See	instru	ictions. If you a	are an indi	vidual, rep	ort farm		
Α											. 🗌 Ye	s 🛛 No		
1a				y (street, city, state, ZIF										
	,					,			0.004					
<u>A</u>	AR INFRA (GREEN	N VALLEY P	KONDAPUR, HYDERAE	BAD 'I	ELANGA	ANA I	N 50	0084					
B C														
	Turner of Durane							-		P				
1b	Type of Prope (from list below			rental real estate prope port the number of fair				Fa	air Rental Days	Person	ial Use	QJV		
Α	3	~		use days. Check the Qu			Α		365	Da	0			
B	5		if you mee	et the requirements to f	ile as	a	B		505		0			
C			qualified j	oint venture. See instru	ictions	i.	C							
-	of Property:						Ŭ							
	Single Family R	esiden	ce 3. Va	cation/Short-Term Ren	tal	5 Land		7	Self-Rental					
	Multi-Family Re			mmercial	tui -	6 Roya			Other (desc	ribe)				
_								0						
									Propert	es:				
Incom							Α		В			С		
3					3		6	32.						
4		ived .			4									
Exper					-									
5					5									
6					6		2 6	25						
7 8	-				8		2,6	25.						
9					9									
10					10									
11					11		1,5	89						
12				tc. (see instructions)	12		±, 5	0.2.						
13														
14	Repairs				14		1.7	18.						
15	<u> </u>				15		2,4							
16					16		,							
17					17		1,8	34.						
18					18									
19	Other (list)				19									
20	Total expenses			jh 19	20		10,2	44.						
21	Subtract line 2	0 from	line 3 (rents)	and/or 4 (royalties). If										
	result is a (loss	s), see	instructions t	o find out if you must										
					21		-9,6	12.						
22				after limitation, if any,										
					22	(9,61		()	()		
23a				ne 3 for all rental prope				23a		632.				
b				ne 4 for all royalty prop				23b						
c				ne 12 for all properties			• •	23c						
d														
e								23e		,244.				
24		•		nown on line 21. Do no						. 24	/	0 (10)		
25				e 21 and rental real estat							(9,612.)		
26				l ity income or (loss). (10 on page 2 do not a										

For Paperwork Reduction	Act Notice, se	e the separate	instructions.
		to allo oopallato	

SCHEDULE E

Schedule E (Form 1040) 2022

26

-9,612.

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

-9,612.