## 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

- Internal	The vertice Set vice						
Submi	ssion Identification Number (SID)						
Taxpaye	er's name	Social securi	ty numbe	r			
ASM	ITA KUMARI	697-88	697-88-4594				
Spouse'	s name	Spouse's soo	ial securi	ty number			
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	 er year you a	re auth	orizina `	<u> </u>		
	whole dollars only on lines 1 through 5.	or your you o	ii C datii	onzing.	<u>'</u>		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1 1	43	,688.		
2	Total tax		2	3,	,482.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	8	,315.		
4	Amount you want refunded to you		4		,833.		
5	Amount you owe		5				
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of yo	ur retu	rn)		
return ( to send for any Agent t paymen authori paymen busines taxes t person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I absorbed an action or amended) I am now authorizing. I consent to allow my intermediate service provider, trans if my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the ionitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account into finy 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 terminant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation ress days prior to the payment (settlement) date. I also authorize the financial institutions involved in the oreceive confidential information necessary to answer inquiries and resolve issues related to the alidentification number (PIN) below is my signature for the income tax return (original or amended) I nic Funds Withdrawal Consent.	mitter, or electro- pjection of the to U.S. Treasury a dicated in the to tion to debit the tiet the authoriza quests must be e processing or payment. I fur	onic retuing ransmiss and its de ax prepa entry to ation. To be received ther acknown the received ther acknown and the second the second received r	rn origination, (b) the signated ration soft this accorded no late ctronic panowledge	or (ERO) e reason Financial tware for unt. This cancel) a r than 2 yment of that the		
	nic Funds Withdrawai Consent.  Nyer's PIN: check one box only						
X		e mv PIN	4 5	9 4	as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En	ter five di n't enter		ao,		
	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 <b>and</b> your return is filed using the Practitioner PIN met below.						
Your s	signature ▶ Date ▶						
Spous	se's PIN: check one box only						
Г	I authorize to enter or generate	my PIN			as my		
	ERO firm name	_	ter five di	gits, but	ao my		
	signature on the income tax return (original or amended) I am now authorizing.	do	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 <b>and</b> your return is filed using the Practitioner PIN met below.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below	N					
Part	Certification and Authentication — Practitioner PIN Method Only						
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 9 Don't ent	6 3 er all zero	1 9 8 os	9		
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of	mitting this retu	urn in ac	cordance			
ERO's	signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	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 Check only one box.	If yo	Single Married filing jointly uchecked the MFS box, enter the noon is a child but not your dependent	ame of y	ed filing separately (	,	_		nold (HOH	,	spou	ifying survise (QSS) name if th	Ü
Your first name	and mi	ddle initial	Last na	me					Y	our so	cial securit	y number
ASMITA			KUMA	RI					6	697-88-4594		
If joint return, spouse's first name and middle initial			Last nai						-	Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			A	pt. no.	P	Presidential Election Campaign		
2434 N N	и АСАІ	RTHUR BLVD					1	418			ere if you, or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete spaces below. State ZII				ZIP c	ode		spouse if filing jointly, want \$3 to go to this fund. Checking a		
IRVING			TX 7				750	62		box below will not change		
Foreign country	y name		F	oreign province/state	/count	у	Foreig	n postal co	de y			
 Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward award or	navn	nent for prope	erty or	services):	or (b)	sell	You	Spouse
Assets		ange, gift, or otherwise dispose of	,				•	, .	` '		Yes	⊠ No
Standard		eone can claim: You as a de		<u></u>		a dependent	,	(		/		
Deduction		Spouse itemizes on a separate retur		•								
Age/Blindness	s You:	☐ Were born before January 2, 1	958	Are blind Sp	ouse:	: Was bor	rn befo	re Janua	ry 2, 1	958	☐ Is bl	ind
Dependent	s (see	instructions):		(2) Social securit	у	(3) Relationsh	nip (4	) Check the	e box	f qualif	ies for (see	instructions):
If more	•	(1) First name Last name		number		to you	.	Child ta	x cred	it	Credit for oth	her dependents
than four												
dependents, see instruction	9										[	
and check											[	
here	]										[	<u> </u>
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .						1a		50,040.
	b	<b>b</b> Household employee wages not reported on Form(s) W-2							1b			
Attach Form(s) W-2 here. Also	С	c Tip income not reported on line 1a (see instructions)								1c		
attach Forms	d	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							1e			
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29								1f		
If you did not	g	Wages from Form 8919, line 6 .								1g		
get a Form W-2, see	h	Other earned income (see instruct	ions) .				· ·			1h	_	0.
instructions.	i	Nontaxable combat pay election (	see instr	ructions)		<u>1</u> i	i					
	Z	Add lines 1a through 1h								1z	5	50,040.
Attach Sch. B	<b>2</b> a	Tax-exempt interest	2a			axable interes				2b		
if required.	<u>3a</u>	Qualified dividends	3a			rdinary divide				3b		
	4a		4a			axable amoun				4b		
Standard Deduction for—	5a	<del>-</del>	5a			axable amoun				5b		
Single or	6a	, _	6a			axable amoun				6b	-	
Married filing separately,	С	If you elect to use the lump-sum e		·	•	,				_	4	
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						Ш	7			
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin							•	8		<u>-6,352.</u>
Qualifying surviving spouse,	9		dd lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>						•	9	4	13,688.
\$25,900	10	Adjustments to income from Sche	,							10		
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is Standard deduction or itemized							•	11		43,688.
\$19,400	12			`	,					12	-	12,950.
If you checked any box under	13 14	Qualified business income deduct Add lines 12 and 13								13	1	12 050
Standard Deduction,	14 15	Subtract line 14 from line 11. If zer								15		12,950. 30,738.
see instructions.	13	Subtract line 14 HOIII line 11. II Zel	0 01 168	o, onitor -U IIIIS IS	your <b>t</b>	avanie ilicoli			•	13		,0,130.

Form 1040 (2022	2)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): <b>1</b> 881	4 <b>2</b> 7 4972	3 🗍		16	3,482.
Credits	17	Amount from Schedule 2, lir	-					17	·
3134113	18	Add lines 16 and 17					🗆	18	3,482.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812		🗆	19	<u> </u>
	20	Amount from Schedule 3, lin	ne 8				🗆	20	
	21	Add lines 19 and 20					🗆	21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			🗆	22	3,482.
	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	3,482.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				<b>25a</b> 8	,315.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction:	s)			25c			
	d	Add lines 25a through 25c					2	25d	8,315.
If	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return		🗆	26	·
If you have a qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	2		28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ındable credits		32	
	33	Add lines 25d, 26, and 32. T						33	8,315.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amour	nt you <b>overpaid</b>		34	4,833.
neiulia	35a	Amount of line 34 you want	refunded to you	u. If Form 8888	is attached, chec	ck here	. 🗆 🖫	35a	4,833.
Direct deposit?	b	Routing number 0 7 1	9 2 1 8	9 1	c Type: 🛛	Checking S	Savings		
See instructions.	d	Account number 4 7 2	8 9 5 6	0 5 4					
	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	•		rn with the IRS?		mplete bel	ow.	⊠ No
Ü	De	signee's		Phone			nal identifica	tion _	
	naı	ne		no.		numb	er (PIN)		
Sign Here		der penalties of perjury, I declare tief, they are true, correct, and com							
TICIC	Yo	ur signature		Date	Your occupation				t you an Identity
Latinat waste was O						(see ins		N, enter it here	
Joint return? See instructions.						If the IR	S sent	your spouse an	
Keep a copy for your records.	op.	ouco o olginaruloi il a joille rotuiri, i	oour maar alg		opened a coupen	<b></b>		Protec	ction PIN, enter it here
	Ph	one no. (469) 894-975	0	Email address	ASMIRISHU@	GMAIL.COM			
Doid	Pre	eparer's name	Preparer's signat	ture		Date	PTIN		Check if:
Paid	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	04/07/2023	P020827	03	Self-employed
Preparer	Fire	m's name GLOBAL TA	XES LLC				Phone r	10. (6	678) 965-9522
Use Only	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's E	IN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/22/23 PRO			Form <b>1040</b> (2022)

#### SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2022

Attachment

Department of the Treasury Internal Revenue Service

ASMITA KUMARI

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.

۱.		Sequence	No. <b>01</b>
	Your soc	ial security	number
	607-88	_1501	

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		5	-6,352.
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 ( )		
t	Pension or annuity from a nonqualifed deferred compensation plan or	01		
	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 the	8z		
9 10	Total other income. Add lines 8a through 8z		9	-6,352.
IU	Combine lines i unough $r$ and $\theta$ . Enter here and on Form 1040, 1040-5K	OI TOHOTING, IIITE O	IU	-0,352.

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 gov		
	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)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m	-	
d	Reforestation amortization and expenses	-	
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974	-	
f	Contributions to section 501(c)(18)(D) pension plans	-	
g	Contributions by certain chaplains to section 403(b) plans	-	
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	-	
- 1	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		
		-	
J		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)		
-	Other adjustments. List type and amount:	-	
Z	04-		
25	Total other adjustments. Add lines 24a through 24z	25	
25 26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here	23	
20	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, Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number ASMITA KUMARI 697-88-4594 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. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . . . . . 1a Physical address of each property (street, city, state, ZIP code) AT-PO-NAGDAHA, VIA-MALAHI EAST CHAMPARAN BIHAR IN 845425 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 427. 4 Royalties received . 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,241. 8 Commissions 8 9 9 Insurance . . 10 Legal and other professional fees 10 11 Management fees . . . . . . . . 11 1,008. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 1,422. 14 14 Repairs . . . . 15 Supplies 15 1,787. 16 16 Taxes 17 Utilities . . . . . . . 17 1,321. 18 18 Depreciation expense or depletion . . . . . . . . Other (list) 19 19 20 20 6,779. Total expenses. Add lines 5 through 19 . . . . . . 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 -6,352. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . 6,352.) 427. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 6,779. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 6,352. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .

-6,352.