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)

T.....

Taxpayer's name	Social security number								
VENKATA GOPI KRISHNA TADIKONDA	813-91-0137								
Spouse's name	Spouse's social security number								
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.									
1 Adjusted gross income	1 1 1 1 1 1 1 1 1 1								
2 Total tax	. 2 15,274.								
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 17,252.								
4 Amount you want refunded to you	4 1,978.								
5 Amount you owe	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.

Taxpayer's PIN: check one box only

X	Lauthoriza	GLOBAL TAXES	LLC	to enter or generate my PIN	
	rautionze			to enter of generate my r in	Ente
			ERO firm name		don

	as my				
1	0	1	3	7	
					1 0 1 3 7 Enter five digits, but don't enter all zeros

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 > Gopi Krishna Tadikonda

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date

as mv Enter five digits, but don't enter all zeros

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 Returns Only—continue below												
Part III Certification and Authentication	 Practitioner PIN Method Only 											
ERO's EFIN/PIN. Enter your six-digit EFIN followed	2	2			_	6		_	9	8	9	
					Don	τer	nter al	i zero	JS			

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								
For Demonstrate Deduction Act N	ation and a second and well we have the		DE) (00/00/00 DBO	Form 8870 (Day, 01 0001)					

1040		rtment of the Treasury—Internal Revenue Servi S. Individual Income Tax		n 20 2 :	2	OMB No. 1545-	0074	IRS Use	Only	—Do not w	vrite or staple	in this space.
Check only		Single Married filing jointly	_	iling separately (N	,				,	spo	lifying surv use (QSS)	0
one box.		u checked the MFS box, enter the nation is a child but not your dependent		r spouse. If you ch	neck	ed the HOH or	QSS	box, ent	er th	e child's	s name if th	ne qualifying
Your first name	and mi	ddle initial	Last name							Your so	cial securi	ly number
VENKATA	GOP	I KRISHNA	TADIKO	NDA						813-	91-013	7
lf joint return, sp	ouse's	first name and middle initial	Last name							Spouse	's social see	curity number
Home address (numbe	r and street). If you have a P.O. box, see	instructions.				Α	pt. no.		Preside	ntial Election	on Campaign
20415 во	THE	LL EVERETT HWY					A	-205			here if you,	
City, town, or po	ost offi	ce. If you have a foreign address, also co	mplete space	es below.	Sta	te	ZIP co	ode				ntly, want \$3 Checking a
BOTHELL					WZ	1	980	12		0	ow will not	•
Foreign country	name		Fore	eign province/state/c	ount	.y	Foreig	n postal c	ode	your ta	k or refund.	
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a			-		-				Yes	X No
Standard		eone can claim: 🗌 You as a de	-	Your spouse			,			,		
Deduction		Spouse itemizes on a separate retur		•								
Age/Blindness	You:	Were born before January 2, 1	958 🗌 A	Are blind Spo	use	: 🗌 Was bor	n befc	ore Janu	ary 2	2, 1958	🗌 ls bl	ind
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	p (4) Check t	he bo	ox if quali	fies for (see	instructions):
If more	(1) Fi	rst name Last name		number		to you		Child t	ax cı	edit	Credit for ot	her dependents
than four											[
dependents, see instructions											[
and check												
here 🗌											[[
Income	1a	Total amount from Form(s) W-2, b	`	,						. 1a	1	13,086.
	b	Household employee wages not re					· ·		•	. 1b)	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a					· ·		•	. 10		
attach Forms	d	Medicaid waiver payments not rep			stru	ctions)	· ·		•	. 10		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f		-			· ·		•	. 1e		
was withheld.	f	Employer-provided adoption bene					· ·		•	. <u>1</u> f		
If you did not	g	Wages from Form 8919, line 6 .					• •	• •	•	. <u>1</u> g		
get a Form W-2, see	h	Other earned income (see instruct	,				· ·		•	. <u>1</u> h	1	0.
instructions.	i	Nontaxable combat pay election (s	see instruct	ions)	•	1 i					1.	10 000
							• •		·	. 1z		13,086.
Attach Sch. B if required.	2a	'	2a			axable interest		• •	•	. 2b		
	<u>3a</u>		3a 4a			rdinary divider axable amount		• •	•	. 3b		
a	4a 5a		4a 5a			axable amount			•	. 4b . 5b		
Standard Deduction for –			5a 6a			axable amount			•	. 6b		
Single or	6а с	Social security benefits					• •	• •	г		,	
Married filing separately,	7	Capital gain or (loss). Attach Scher					• •	• •	· L	7		
\$12,950Married filing	8	Other income from Schedule 1, lin					• •	• •	• -	. 8		10,819.
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		 s is vour total inc			• •	• •	•	. 9		02,267.
Qualifying surviving spouse,	9 10	Adjustments to income from Sche				· · · ·	• •	• •	•	. 10		<u>, 201.</u>
\$25,900 • Head of	11	Subtract line 10 from line 9. This is					• •	• •	•	. 11	-	02,267.
household,	12	Standard deduction or itemized	-							. 12		12,207. 12,950.
\$19,400 • If you checked	13	Qualified business income deduct				5-A				13		<u>.</u> .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
any box under	14	Add lines 12 and 13								. 14		12,950.
Standard Deduction,	15	Subtract line 14 from line 11. If zer				axable incom	 е			15		89,317.
see instructions.									•		·	<i>, , , , , , , , , , , , , , , , , , , </i>

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 if any from	Form(s): 1 🗌 881	4 2 4972	3		16	15,274.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	15 , 274.
	19	Child tax credit or credit for other depe	ndents from Sched	ule 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					22	15,274.
	23	Other taxes, including self-employment	tax, from Schedul	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your total	tax				24	15,274.
Payments	25	Federal income tax withheld from:						
. ayinonto	а	Form(s) W-2			25a 17	,252.		
	b	Form(s) 1099			25b	,		
	с	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	17,252.
	26	2022 estimated tax payments and amo					26	,
If you have a qualifying child,	27	Earned income credit (EIC)			27			
attach Sch. EIC.	28	Additional child tax credit from Schedule			28			
	29	American opportunity credit from Form			29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15			31			
	32	Add lines 27, 28, 29, and 31. These are					32	
	33	Add lines 25d, 26, and 32. These are yo		•			33	17,252.
	34	If line 33 is more than line 24, subtract					34	1,978.
Refund	35a	Amount of line 34 you want refunded t			•		35a	1,978.
Direct deposit?	b	Routing number 3 2 5 0 7 0	7 6 0			Savings		,
See instructions.			0 6 6			ournige		
	36	Amount of line 34 you want applied to		ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the	-					
You Owe	57	For details on how to pay, go to <i>www.ii</i>					37	
	38	Estimated tax penalty (see instructions)			38			
Third Party	Do	you want to allow another person to						
Designee		tructions				omplete b	elow.	× No
Ū	De	signee's	Phone			onal identif	cation	
	nai	ne	no.		numb	ber (PIN)		
Sign		der penalties of perjury, I declare that I have ex						
Here		ef, they are true, correct, and complete. Declar		1	ised on all informatio	1	• •	, ,
	Yo	ur signature	Date	Your occupation				nt you an Identity IN, enter it here
Joint return?				PROJECT MA	NAGER	(see i		
See instructions.	Sp	ouse's signature. If a joint return, both must si	gn. Date	Spouse's occupati		If the	IRS ser	nt your spouse an
Keep a copy for								ection PIN, enter it here
your records.						(see i	nst.)	
		one no. (925) 895-0019	Email address	VGKRISH007	@GMAIL.COM			
Paid	Pre	parer's name Preparer's	signature		Date	PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PR	IYA RAM SAGAR	GUPTA TALLAM	04/15/2023	P02082	2703	Self-employed
Use Only	Fir	n's name GLOBAL TAXES LLC				Phon	eno. (678)965-9522
	Fir	n's address 245 ROONEY CT E	BRUNSWICK N	J 08816		Firm'	s EIN	84-3171965
Go to www.irc.a	ov/Eorn	1040 for instructions and the latest informatio	n	D A A				Form 1040 (2022)

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

BAA REV 03/22/23 PRO

Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

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

2022 Attachment Sequence No. 01 Your social security number

813-91-0137

Name(s) she	own on	Form 1040,	1040-SR, or 1040-NR
VENKATA	GOPI	KRISHNA	TADIKONDA

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	ich Schedule E .	5	-10,819.
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		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	_		
		8m		
n		8n		
0	Section 951A(a) inclusion (see instructions)	80	-	
р	Section 461(I) excess business loss adjustment	8p	-	
-	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 8a through 8z	8z	0	
9 10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR		9 10	-10,819.
10	Combine lines i unough / and 9. Enter here and on Form 1040, 1040-SR			-10,019.

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 8I 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	
	BAA	REV	03/22/23 P	RO	Schedu	ile 1 (Form 1040) 2022

	Supplemental Income and Loss Form 1040) (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)										b. 1545-0074
	ent of the Treasury Revenue Service		Attach to Form 1040, Go to www.irs.gov/ScheduleE for					formation.	-	Attachm	nent ce No. 13
Name(s)	shown on return							Yo	ur socia	al security	
VENK	ATA GOPI K	RISHNA	TADIKONDA					8	13-9	1-0137	
Part		-	From Rental Real Estate an	d Ro	valties						
	Note: If yo	ou are in th	e business of renting personal proper s from Form 4835 on page 2, line 40.			C . See	instru	ctions. If you are a	an indiv	/idual, rep	ort farm
Α			nts in 2022 that would require you	to file	Form(s) 1	099? S	ee ins	structions		. 🗌 Ye	s 🛛 No
					. ,						
1a	Physical addr	ess of ea	ch property (street, city, state, ZIF								
					·	5000	4 -				
	MADHURA NA	AGAR I	OUSUFGUDA HYDERABAD,TEI	LANGA	ANA IN	50004	10				
<u>C</u>	Turner of Durane		<u> </u>				-				
1b	Type of Prope (from list below		For each rental real estate prope above, report the number of fair				Fa	ir Rental P Days	erson Da	al Use	QJV
A	3	~	personal use days. Check the Q			Α		365	Da	y 3 0	
	5		if you meet the requirements to f	file as	a	B				0	
			qualified joint venture. See instru	uctions	6.	C					
	of Property:					U					
	Single Family R	esidence	3 Vacation/Short-Term Ren	ital	5 Land	1	7	Self-Rental			
	Multi-Family Re		4 Commercial	itai	6 Roya	-		Other (describe	<i>)</i>		
		01001100			o noye		0				
								Properties:			
Incom						Α		В			С
3				3		6	87.				
4		ived		4							
Exper											
5	-			5							
6			tructions)	6							
7	•		nce	7		2,7	48.				
8				8							
9				9							
10	-	-	sional fees	10			- 0				
11	-			11		1,4	58.				
12			to banks, etc. (see instructions)	12							
13				13		2 4	<u></u>				
14				14		2,4					
15 16				15 16		2,4	41.				
17				17		2,3	96				
18			r depletion	18		2 , 3					
19	Other (list)	•		19							
20			es 5 through 19	20		11,5	06.				
21	-		ne 3 (rents) and/or 4 (royalties). If			, \	•				
			structions to find out if you must								
				21	.	-10,8	19.				
22	Deductible ren	ital real e	state loss after limitation, if any,								
			ructions)	22	(10,81	9.)	()	(
23a	Total of all amo	ounts rep	orted on line 3 for all rental prope	erties			23a		687.		
b		-	orted on line 4 for all royalty prop				23b				
с	Total of all am	ounts rep	orted on line 12 for all properties				23c				
d	Total of all am	ounts rep	orted on line 18 for all properties				23d				
е	Total of all am	ounts rep	orted on line 20 for all properties				23e	11,5	06.		
24			amounts shown on line 21. Do no		-				24		
25	Losses. Add ro	oyalty loss	ses from line 21 and rental real estat	te loss	es from lir	ne 22. E	nter to	otal losses here	25	(10,819.
26			e and royalty income or (loss).								
			and line 40 on page 2 do not								
	Schedule 1 (Fo	orm 1040), line 5. Otherwise, include this ar	mount	in the to	tal on li	ne 41	on page 2 .	26	-	-10,819.

Schedule E (Form 1040) 2022

-10,819.