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 securi	ty numb	ber
SHA	NTHAN GAMPA	153-65	-0153	3
Spouse	's name	Spouse's so	cial secu	urity number
Par	Tax Return Information – Tax Year Ending December 31, 2022 (Enter	er year you a	are aut	thorizina.)
	whole dollars only on lines 1 through 5.	, jeu jeu e		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1	20,324.
2	Total tax		2	738.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	3,213.
4	Amount you want refunded to you		4	2,475.
5	Amount you owe		5	

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

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

5	0	1	5	3	
Ent don	er fiv n't er	ve di nter a	gits, all ze	but ros	as my

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

Date

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

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 >	Da	te 🕨					 		
Practitioner PIN Method Returns Only—con	tinue	bel	ow						
Part III Certification and Authentication – Practitioner PIN Method O	nly								
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected Pl	N.	2	2	2		6 all zei	 9	8 9	Э

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 Fo Don't Submit This Form to the II			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 02/14/23 PRO	Form 8879 (Rev. 01-2021)

For the year Jan. 1– Filing Status Check only one box. Your first name and SHANTHAN Home address (num 2323 N WOOD:	nber and street). If you have a P.O. box, LAWN BLVD office. If you have a foreign address, als	ing irately (M id's name Last name GAMP <i>I</i> see inst	FS) Gualifying person perso	g surviving spouse is a child but not y	, (QSS) our depen	20 Es dent: Your id (see ins	See separate instructions. tate Trust entifying number tructions) 65–0153
Status If Check only If one box. Your first name and SHANTHAN Home address (num 2323 N WOOD) City, town, or post of WICHITA	f you checked the QSS box, enter the chi I middle initial Inber and street). If you have a P.O. box, LAWN BLVD office. If you have a foreign address, als	Id's name Last nar GAMP <i>I</i> see inst	e if the qualifying person 	is a child but not y	our depen	dent: Your id (see ins	tate Trust
SHANTHAN Home address (nun 2323 N WOOD City, town, or post of WICHITA	nber and street). If you have a P.O. box, LAWN BLVD office. If you have a foreign address, als ne	GAMP <i>I</i> see inst	A ructions.	20		(see ins	tructions)
Home address (nun 2323 N WOOD) City, town, or post of WICHITA	LAWN BLVD office. If you have a foreign address, als ne	see inst	ructions.	2(,
Home address (nun 2323 N WOOD) City, town, or post of WICHITA	LAWN BLVD office. If you have a foreign address, als ne	see inst	ructions.	20		153-	65-0153
2323 N WOOD City, town, or post of WICHITA	LAWN BLVD office. If you have a foreign address, als ne	o comple		20			
City, town, or post of WICHITA	office. If you have a foreign address, als ne		ete spaces below.	20	11		Apt. no.
WICHITA	ne				State		ZIP code
		Foreign			KS		67220
	any time during 2022, did you: (a) receiv	-	province/state/county		Foreign	postal co	
0 ,	any time during 2022 did you: (a) receiv						
	nerwise dispose of a digital asset (or a fi						
Dependents					(4) Ch	eck the box	if qualifies for (see inst.):
(see instructions):	(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to	Chil	d tax cred	t Credit for other dependents
	(i) Histilane Easthane		identifying nameer				
If more than four							
dependents, see							
check here							
Income 1a	Total amount from Form(s) W-2, box	1 (see in	structions)			. 1a	22,824.
Effectively b	Household employee wages not repo	orted on	Form(s) W-2....			. 1b	
Connected c							
With U.S. d				,			
Trade or e							
Business f	Employer-provided adoption benefits						
Attach h							
Form(s) W-2, 1042-S, i	Reserved for future use						
SSA-1042-S, j	Reserved for future use					. 1j	
RRB-1042-S, k				1 1			
and 8288-A here. Also	line 1(e)		():				
attach z	Add lines 1a through 1h	· ·				. 1z	22,824.
Form(s) 2a 1099-R if	Tax-exempt interest 2a		b Tax	able interest		. 2b	
tax was 3a				inary dividends .			
withheld. 4a		_		able amount			
If you did not 5a get a Form 6				able amount			
W-2, see 7	Reserved for future use						
instructions. 7	Other income from Schedule 1 (Form			•			
9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8					i	22,824.
10	Adjustments to income:		,				22,0211
а	From Schedule 1 (Form 1040), line 26	6		. 10a	2,50	0.	
b	Reserved for future use			. 10b			
c							
d		-	-				=/0001
11	Subtract line 10d from line 9. This is						20,324.
12	Itemized deductions (from Schedul deduction (see instructions) .			Std Ded	dia, standa n_US/India_Tre		12,950.
13a							
b	1		,				
с							
14							12,950.
15	Subtract line 14 from line 11. If zero or racy Act, and Paperwork Reduction Act			_	 REV 02/14/23		7,374. Form 1040-NR (2022

Form 1040-NR (2022)					Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 28814 2 497	2 3		16	738.
Credits	17	Amount from Schedule 2 (Form 1040), line 3			17	0.
	18	Add lines 16 and 17			18	738.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 10	40)		19	
	20	Amount from Schedule 3 (Form 1040), line 8			20	
	21	Add lines 19 and 20			21	
	22	Subtract line 21 from line 18. If zero or less, enter -0			22	738.
	23a	Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15	23a			
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040), line 21	23b			
	с	Transportation tax (see instructions)	23c			
	d	Add lines 23a through 23c			23d	
	24	Add lines 22 and 23d. This is your total tax			24	738.
Payments	25	Federal income tax withheld from:				
	а	Form(s) W-2	25a	3,213.		
	b	Form(s) 1099	25b			
	с	Other forms (see instructions)	25c			
	d	Add lines 25a through 25c			25d	3,213.
	е	Form(s) 8805			25e	
	f	Form(s) 8288-A			25f	
	g	Form(s) 1042-S			25g	
	26	2022 estimated tax payments and amount applied from 2021 return			26	
	27	Reserved for future use	27			
	28	Additional child tax credit from Schedule 8812 (Form 1040)	28			
	29	Credit for amount paid with Form 1040-C	29			
	30	Reserved for future use	30			
	31	Amount from Schedule 3 (Form 1040), line 15	31			
	32	Add lines 28, 29, and 31. These are your total other payments and refundation	ble credits .		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments .			33	3,213.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amour	nt you overpaid		34	2,475.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check	k here	🗆	35a	2,475.
Direct deposit?	b	Routing number 2 7 2 4 7 7 5 7 1 c Type:	Checking	Savings		
See instructions.	d	Account number 1 0 1 0 0 7 1 8 0 3 1 0 8		-		
	е	If you want your refund check mailed to an address outside the United State	es not shown o	n page 1,		
		enter it here.				
	36	Amount of line 34 you want applied to your 2023 estimated tax	36			
Amount	37	Subtract line 33 from line 24. This is the amount you owe .				
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions .			37	
	38	Estimated tax penalty (see instructions)	38			
Third	Do yo	ou want to allow another person to discuss this return with the IRS? See instru	ctions.	es. Compl	ete below.	🛛 No
Party	Desig			onal identifi	ication	
Designee	name			per (PIN)		
		penalties of perjury, I declare that I have examined this return and accompanying schedu they are true, correct, and complete. Declaration of preparer (other than taxpayer) is base				
Sign		signature Date Your occupation				you an Identity
Here	TOUL					enter it here
TICIC		SOFTWARE D	EVELOPER		inst.)	
	Phone	e no. Email address				
Paid	Prepa	arer's name Preparer's signature	Date	PTIN	Ch	eck if:
		SYAM PRIYA RAM SAGAR GUPTA TALLAM	02/19/2023	P02082	2703 🗆 🗆	Self-employed
Preparer	Firm's	s name SYANT REPAIR AN ASTAR GUILTE TALLAM		Phone n	o. (678 [°]	965-9522
Use Only		s address 245 ROONEY CT E BRUNSWICK NJ 08816		Firm's El		3171965
Go to www.irs.	gov/Foi	rm1040NR for instructions and the latest information.	REV 02/14/23 P			1040-NR (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 2 Attachment

Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Sequence No. 01
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
SHANTHAN GAMPA		153-65	-0153
Part I Additio	onal Income		

1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2 a	
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. Att		5	
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b	-	
C	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
e	Income from Form 8853	8e	_	
f	Income from Form 8889	8f		
q	Alaska Permanent Fund dividends	8g		
h		8h		
i	Prizes and awards	8i		
i	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	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	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF		10	

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

Schedule 1 (Form 1040) 2022

11 Educator expenses 11 12 Certain business expenses of reservists, performing artists, and fee-basis government 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 17 Self-employed health insurance deduction 17 17 Benalty on early withdrawal of savings 18 19a 18 Alimony paid 19a 19a b Recipient's SSN 12 2,500 21 21 Student loan interest deduction 21 2,500 22 Archer MSA deduction 22 23 23 Archer MSA deduction 22 23 24 Other adjustments: 24c 24c 24c 24 Deductible expenses related to income reported on line 81 from the rental of personal property engaged in for profit 24c 24d 24 Christians (see instructions) 24c 24d 24d 24 Christians (see instructions) 24c 24d	Par	t II Adjustments to Income					
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 e Repayment of supplemental unemployment benefits under the Trade Act of 1974							
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from the IRS for information you provided that helped the IRS detect tax law violations		discrimination claims (see instructions)	24h				
from the IRS for information you provided that helped the IRS detect tax law violations	i	Attorney fees and court costs you paid in connection with an award					
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 k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) z Other adjustments. List type and amount:	i						
1041)	k						
z Other adjustments. List type and amount:			24k				
	z						
242	-	2	24z				
25 Total other adjustments. Add lines 24a through 24z	25					25	
26 Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on							
	_•					26	2,500.
BAA REV 02/14/23 PRO Schedule 1 (Form 1040) 202							

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form1040NR for instructions and the latest information.

Attach to Form 1040-NR.



Name shown on Form 1040-NR SHANTHAN GAMPA

153-65-0153

|--|

Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)				
			(a) 1070	(b) 1370	(c) 30 / 0	%	%			
1	Dividends and divide	end eq	uivalents:							
а			1a							
b	Dividends paid by fo	reign	corporations		1b					
с	Dividend equivalent p	avmei	nts received with respect to section 871(m)	transactions	1c					
2	Interest:									
а	Mortgage				2a					
b			ns		2b					
c					2c				-	
3			s, trademarks, etc.)		3				-	
4			right royalties		4					
5			, recording, publishing, etc.)		5					
6	• • • • •	-	natural resources royalties		6					
7					7					
8					8					
9					9					
10	Capital gain from line 18 below									
а										
b	Losses									
11	Gambling winnings—Residents of countries other than Canada. Note: Losses not allowed									
12										
					12					
13										
14	Multiply line 13 by r	ate of	f tax at top of each column		14					
15	Tax on income not e	ffectiv	ely connected with a U.S. trade or busines	ss. Add colum	nns (a)	through (d) of line 14	4. Enter the total here	e and on Form 1040	-NR, line 23a 15	
			Capital Gains an	d Losses F	rom	Sales or Excha	inges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
	vely connected with a U.S.									
or loss on disposing of a U.S. real property interest; report these										
gains and losses on Schedule D										
(Form 1										
	Report property sales or exchanges that are effectively									
connec	ted with a U.S. business	17	Add columns (f) and (g) of line 16 .					17	()	
on Schedule D (Form 1040), Form 4797, or both.		18	Capital gain. Combine columns (f) and	(g) of line 17	7. Ente	r the net gain her	e and on line 9 abo	ove. If a loss, ente	r-0 18	

SCHE	DULE	ΟΙ
(Form	1040-N	IR)

Department of the Treasury Internal Revenue Service

Other Information

OMB No. 1545-0074

Go to www.irs.gov/Form1040NR for ins	structions and the	latest information
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Attach to Form 1040-NR. Answer all questions.

	2022				
	Attachment Sequence No. 7C				
r identifying number					
3-65	3-65-0153				

Name sł	e shown on Form 1040-NR Your identifying number						
SHAN	HANTHAN GAMPA 153-65-0153						
Α	Of what country or countries were you a citizen or national during the tax year? INDIA						
в	In what country did you claim residence for tax purposes during the tax year? United States						
С	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?						
D	Were you ever:						
1.	A U.S. citizen?				🗌 Yes	🛛 No	
2.	A green card holder (lawful per	rmanent resident) of the Ur	ited States?		🗌 Yes	🛛 No	
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation rules	that apply to you.			
Е	If you had a visa on the last of immigration status on the last of	day of the tax year, enter y day of the tax year <u>F1</u>	your visa type. If you	ı didn't have a visa, enter	your U.S.		
F	Have you ever changed your v If you answered "Yes," indicat	'isa type (nonimmigrant sta	tus) or U.S. immigrati	ion status?	🗌 Yes	X No	
G	List all dates you entered and	left the United States durin	g 2022. See instruction	ons.			
	Note: If you're a resident of C check the box for Canada or				t intervals,		
	Date entered United States	Date departed United Stat	es D	ate entered United States	Date departed Unite	d States	
	mm/dd/yy	mm/dd/yy		mm/dd/yy	mm/dd/yy		
			\square				
			\square				
			, L				
н	Give number of days (including 2020	, 2021	, and 20	365	· · ·		
I	Did you file a U.S. income tax If "Yes," give the latest year ar	return for any prior year? . Ind form number you filed:			🗌 Yes	🛛 No	
J	Are you filing a return for a true	st?			🗌 Yes	🗙 No	
	If "Yes," did the trust have a UU.S. person, or receive a control					🗌 No	
Κ	Did you receive total compens	ation of \$250,000 or more	during the tax year?		🗌 Yes	🗙 No	
	If "Yes," did you use an alterna	ative method to determine	the source of this cor	mpensation?	🗌 Yes	🗌 No	
L	Income Exempt From Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country complete (1) through (3) below. See Pub. 901 for more information on tax treaties.						
1.	Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.						
	(a) Cou	ntry	(b) Tax treaty article	(c) Number of months claimed in prior tax years	(d) Amount of ex income in current t		
	(e) Total. Enter this amount of	n Form 1040-NR line 1k Γ	l)o not enter it anvwhe	ere else on line 1			
2.	(e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1						
	Are you claiming treaty benefits pursuant to a Competent Authority determination?						
	If "Yes," attach a copy of the Competent Authority determination letter to your return.						
М	Check the applicable box if:						
	 This is the first year you are making an election to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions 						
2.	You have made an election in States as effectively connected	n a previous year that has	not been revoked, t	o treat income from real	property located in t	ne United	
	States as enectively connected	u with a 0.5. trade of busin	less under section or	r(u). See instructions		· · 🗆	

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 02/14/23 PRO Schedule OI (Form 1040-NR) 2022