### 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	securit	ty numb	er
KUM	ARASWAMY KANUKUNTLA		692	2-75-	-6356	5
Spouse	s's name		Spous	e's soc	ial secu	rity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2022 (E	Enter	vear	you a	re aut	horizing.)
Enter	whole dollars only on lines 1 through 5.					0,
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income				1	15,097.
2	Total tax				2	214.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099				3	1,288.
4	Amount you want refunded to you				4	1,074.
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 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

•••	1 ddthon20			EBO firm name	to enter of generate my rare	E
X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	

			gits, all ze		as
5	6	3	5	6	

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 ► D	ature 🕨 🛛 Date 🕨							
Practitioner PIN Method Returns Only—continue	bel	ow						
Part III Certification and Authentication – Practitioner PIN Method Only								
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 all zei	 9	8 9	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 >	ERO's signature Date Date									
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So										
For Paperwork Reduction Act Notice, see your tax return instru	ictions. BAA	REV 01/24/23 PRO	Form 8879 (Rev. 01-2021)							

<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		ı <b>rn</b>	202	2	OMB No. 1545	-0074	IRS Use (	Only—	Do not w	rite or staple	in this space.
Filing Status Check only			_	-			_			_	spou	use (QSS)	0
one box.				our spous	se. If you ch	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 nam	ne						1	Your so	cial securit	y number
KUMARASW	IAMY		KANUP	KUNTLA	4						692-	75-635	6
lf joint return, sp	oouse's	first name and middle initial	Last nam	ne						5	Spouse'	s social seo	urity number
			instructio	ns.									
8181 FAN			malata an			Cto	to		-				
	OSI OIIIG	ce. Il you flave a foreign address, also co	inpiete sp	aces below	w.					t	to go to	this fund.	Checking a
HOUSTON Foreign country	namo		E	oreign prov	vinco/stato/c								0
r oreign country	Tiame			oreigin pro-	VIIICE/State/C	Journ	.y	1 UIEIĘ	n postal co		your tus	You	_
Digital								-				Vos	
Assets				_				asseij	? (See in:	struc	10115.)	165	
Standard Deduction			•		•		•						
Age/Blindness	You:	Were born before January 2, 1	958	Are blin	id Spo	use	: 🗌 Was bor	n befo	ore Janua	ry 2,	1958	🗌 ls bl	ind
Dependents	s (see	instructions):		(2) So	cial security		(3) Relationsh	ip (4	) Check th	e box	if qualit	fies for (see	instructions):
If more		y time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, ange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes No eone can claim: You as a dependent Your spouse as a dependent pouse itemizes on a separate return or you were a dual-status alien Were born before January 2, 1958 Are blind Spouse: Was born before January 2, 1958 Is blind nstructions): (2) Social security number to you ret o you to you To you Child tax credit Credit for other dependents Credit for other dependents Credit for other dependents Dependent form Form(s) W-2, box 1 (see instructions)											
than four												[	
dependents, see instructions												[	
and check												[	
here 🗌													
Income	<b>1</b> a	Total amount from Form(s) W-2, be	ox 1 (see	instructi	ons)						1a	1	L5,097.
	b	Household employee wages not re	eported o	on Form(s	s) W-2						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see inst	tructions)	)						1c		
attach Forms	d	Medicaid waiver payments not rep	orted on	Form(s)	W-2 (see ir	nstru	ictions)		• •		1d		
W-2G and 1099-R if tax	е	•									1e		
was withheld.	f	Employer-provided adoption bene	fits from	Form 88	39, line 29						1f		
If you did not	g	6		· ·		•			• •				
get a Form W-2, see	h	l.	,				· · · · ·	· ·	• • •		1h	_	0.
instructions.	i		see instru	uctions)		•	<u>1</u> i						
	Z	-	· · ·			•		• •	• •				15,097.
									• •	• •			
If required.							-		• • •	• •			
									• • •	• •		-	
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<ul> <li>Single or</li> </ul>								τ	• •	· ·	60		
		•					,	• •	• •	· ⊔	-		
\$12,950		1 0 ( )		•				• •		· 🗆			
jointly or								• •		• •		-	15 007
Qualifying surviving spouse,								• •	• •	• •			13,09/.
\$25,900		Single       Married filing jointly       Married filing separately (MFS)       Head of household (HOH)       Qualifying surviving surviva surviving surviving surviving surviva surviving surviving surviving surviving surviva surviva surviving surviving surviving surviva surviving surviving surviving surviva survi surviva surviva survi surviva surviva sur											
household,			-					• •	• •	• •			
\$19,400								• •		• •		-	12,930.
Instructions.       z       Add lines 1a through 1h       1z         Attach Sch. B       2a       Tax-exempt interest       2a       b       Taxable interest       2b         if required.       3a       Qualified dividends       3a       b       Ordinary dividends       3b         4a       IRA distributions       4a       b       Ordinary dividends       3b         5a       Pensions and annuities       5a       5a       b       Taxable amount       4b         5a       Pensions and annuities       5a       6a       b       Taxable amount       7         6a       Social security benefits       6a       6a       b       Taxable amount       7         6b       Taxable amount       7       7       7       7       7         6a       Standard       0       7       7       7       8       7       7       8       7       7       8       7       7       8       7       8       7       8       9       9         12       9       10       11       11       10       10       10       10       10       10         13       9       14       10				-	12 050								
Standard Deduction,	15					our 1	axable incom	 Ie		• •			
								~ <b>/</b> _ ] / .					

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

Form **1040** (2022)

Form 1040 (2022	2)								Page
Tax and	16	Tax (see instructions). Check it	f any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	214
Credits	17	Amount from Schedule 2, line						17	
	18	Add lines 16 and 17						18	214
	19	Child tax credit or credit for o	ther dependent	ts 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 less,	enter -0				22	214
	23	Other taxes, including self-en	ployment tax,	from Schedule	e 2, line 21 .			23	0
	24	Add lines 22 and 23. This is y	our <b>total tax</b>					24	214
Payments	25	Federal income tax withheld f							
2	а	Form(s) W-2				<b>25a</b> 1	,288.		
	b	Form(s) 1099				25b		1	
	с	Other forms (see instructions)				25c		1	
	d	Add lines 25a through 25c						25d	1,288
	26	2022 estimated tax payments						26	
If you have a l qualifying child,	27	Earned income credit (EIC) .				27			
attach Sch. EIC.	28	Additional child tax credit from				28		1	
	29	American opportunity credit f	rom Form 8863	3, line 8		29		1	
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line				31		1	
	32	Add lines 27, 28, 29, and 31.						32	
	33	Add lines 25d, 26, and 32. Th	-					33	1,288
	34	If line 33 is more than line 24,						34	1,074
Refund	35a	Amount of line 34 you want re						35a	1,074
Direct deposit?	b	Routing number 1 1 1					Savings		
See instructions.	d	Account number 8 9 5							
	36	Amount of line 34 you want a			edtax	36			
Amount	37	Subtract line 33 from line 24.							
You Owe	57	For details on how to pay, go						37	
	38	Estimated tax penalty (see ins	-	-		38		•.	
Third Party		you want to allow another							
Designee		1					omplete b	below.	X No
200.9.000	De	signee's		Phone			onal identif		
	nai	ne		no.		num	oer (PIN)		
Sign		der penalties of perjury, I declare th							
Here		ief, they are true, correct, and comp	lete. Declaration of			ased on all information			, ,
	Yo	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE	ENGINEER	(see i		
See instructions.	Sp	ouse's signature. If a joint return, bo	oth must sign.	SOFTWARE ENGINEER         (see           Date         Spouse's occupation         If the					nt your spouse an
Keep a copy for	op		Part index orgin	Duit					ection PIN, enter it h
your records.							(see i	inst.)	
	Ph	one no. (469) 412-1667		Email address	KUMARSWAM	YK@GMAIL.CC	M		
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM 🗄	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	01/28/2023	P02082	2703	Self-employed
Use Only	Fir	m's name GLOBAL TAX	ES LLC				Phon	ne no. (	(678)965-952
	Fir	m's address 245 ROONEY	CT E BRU	NSWICK N	J 08816		Firm'	's EIN	88-214548
Go to www.irs.go	ov/Forn	n1040 for instructions and the lates	t information.		BAA	REV 01/24/23 PRO			Form <b>1040</b> (20

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