IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name	Social security number					
JYOTHSNA KAVERI	850-55-3710					
Spouse's name	Spouse's social security number					
Part I Tax Return Information – Tax Year Ending December 31, 2022 (Enter	r 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 74,796.					
2 Total tax						
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	. 3 11,439.					
4 Amount you want refunded to you	4 2,220.					
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

				FBO firm name		Ę
X	l authorize	GLOBAL	TAXES	ГГС	to enter or generate my PIN	_
-						5

5 Ent	3 er fiv	7 (e di	1 nite	0 but	as my
don	i't er	iter a	all ze	ros	

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 my
er fiv n't er		

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 si	ignature 🕨 Da	ate 🕨									
Practitioner PIN Method Returns Only—continue below									_		
Part III	Certification and Authentication – Practitioner PIN Method Only										
ERO's EFI	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 nter a		 9	8	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 🕨			
	lust Retain This Form — See This Form to the IRS Unless		
For Paperwork Reduction Act Notice, see your tax	return instructions.	REV 01/02/23 PRO	Form 8879 (Rev. 01-2021)

1040		rtment of the Treasury–Internal Revenue Serv 5. Individual Income Ta 2		urn	202	2	OMB No. 1545-	0074	IRS Use	Only-	–Do not w	rite or staple	in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly	ame of y	0	separately (N use. If you ch	,			,	<i>,</i> .	spou	lifying surv use (QSS) name if th	U
		on is a child but not your dependent											
Your first name		ddle initial	Last na									cial securit	-
JYOTHSNA		first some and middle initial	KAVE									55-371	
if joint return, sp	ouse s	first name and middle initial	Last na	me							Spouse	s social sec	curity number
	(n	r and streat) If you have a D.O. have an	inotruoti						pt. no.	_	.		
		r and street). If you have a P.O. box, see	Instructio	ons.				1	. no.			ntial Election nere if you,	on Campaign
-		<u>LVD_UNIT#_54</u> ce. If you have a foreign address, also co	malata a	nacco hol	0.11	Sta	to	ZIP co	ada	_			itly, want \$3
		ce. Il you have a loreign address, also co	sinplete s	paces bei	Ow.			782			0		Checking a
SAN ANTC Foreign country				Eoroian pr	ovince/state/o				n postal co			ow will not or refund.	0
i oreigin country	name		'	oreigin pi	Ovince/state/t	Journ	Ly	i uleig	n postal ot		your tu		Spouse
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward	l, award, or	payr	nent for prope	ty or :	services)	; or (b) sell,		
Assets	exch	ange, gift, or otherwise dispose of a	a digital	asset (or	a financial i	nter	est in a digital a	asset)	? (See in	struc	ctions.)	Yes	🗙 No
Standard	Som	eone can claim: 🗌 You as a de	pendent	t 🗌	Your spouse	e as	a dependent						
Deduction		Spouse itemizes on a separate retur	m or you	were a	dual-status a	alien	I						
Age/Blindness	You:	Were born before January 2, 1	958	Are bl	ind Spo	ouse	: 🗌 Was bor	n befc	ore Janua	ary 2	, 1958	🗌 ls bl	ind
Dependents				(2) 5	ocial security		(3) Relationshi					fies for (see	instructions):
If more		rst name Last name		(_) (number		to you		Child ta	ax cre	edit	Credit for ot	her dependents
than four												[
dependents,									[[
see instructions and check	;								[[
here												[
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruc	tions)						1a	8	32,826.
meome	b	Household employee wages not re	eported	on Form	(s) W-2						1b		
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	a (see ins	struction	s)						1c		
attach Forms	d	Medicaid waiver payments not rep	oorted o	n Form(s) W-2 (see ir	nstru	ictions)				1d		
W-2G and	е	Taxable dependent care benefits	from For	m 2441,	line 26 .						1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene	efits from	n Form 8	839, line 29						1f		
lf 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)		• •	1 i				_		
	Z				· · · ·			· ·			1z		32,826.
Attach Sch. B	2a	'	2a				axable interest		• •		2b		
if required.	<u>3a</u>		3a				ordinary divider			• •	3b		
	4a -		4a				axable amount				4b		
Standard Deduction for –	5a		5a				axable amount		• •		5b		
Single or	6a	, _	6a				axable amount	[• •	· .	6b		
Married filing separately,	c 7	If you elect to use the lump-sum e						• •	• •	· _			
\$12,950	7	Capital gain or (loss). Attach Sche Other income from Schedule 1, lin						• •	• •	• ∟	8		0 0 2 0
 Married filing jointly or 	8 9	,					· · · ·	• •	• •	• •	9		<u>-8,030.</u>
Qualifying spouse,	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7 Adjustments to income from Sche						• •		• •	9 10		74,796.
\$25,900	11	Subtract line 10 from line 9. This is						• •	• •	• •	11		71 706
 Head of household, 	12	Standard deduction or itemized	-					• •	• •	• •	12		74,796. 12,950.
\$19,400 • If you checked	13	Qualified business income deduct					5-A	• •	• •	• •	13		<u>.</u> ∠ , JJU.
any box under	14	Add lines 12 and 13				000					14		12,950.
Standard Deduction,	15	Subtract line 14 from line 11. If zer				our f	taxable incom	е.			15		51,846.
see instructions.				.,									

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

Form **1040** (2022)

Form 1040 (2022	2)								F	Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	9,23	19.
Credits	17	Amount from Schedule 2, lin	ie3					17		
	18	Add lines 16 and 17						18	9,23	19.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	ie8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	9,23	19.
	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 total tax					24	9,21	19.
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				25a 11	,439.			
	b	Form(s) 1099				25b				
	с	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	11,43	39.
If	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return			26		
If you have a 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				
	31	Amount from Schedule 3, lin				31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	undable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	11,43	39.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	2,22	20.
neiuliu	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	is attached, che	ckhere		35a	2,22	20.
Direct deposit?	b	Routing number 1 1 1	0 0 0 0	2 5	c Type: 🛛 🗙	Checking	Savings			
See instructions.	d	Account number 4 8 8	0 7 8 7	3 4 9 4	1 6		-			
	36	Amount of line 34 you want a	applied to your	2023 estimate	edtax	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe.						
You Owe		For details on how to pay, g	o to <i>www.irs.go</i> v	//Payments or	see instructions			37		
	38	Estimated tax penalty (see ir	nstructions) .			38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	n with the IRS?	See				
Designee	ins	structions				. 🗌 Yes. C	omplete b	elow.	🗙 No	
		signee's		Phone			onal identi	ication		
	nai			no.			per (PIN)			
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com								
Here		ur signature		Date	Your occupation				nt you an Identity	
	10	ul signature		Date	rour occupation				N, enter it here	,
Joint return?					SOFTWARE I	DEVELOPER	(see	inst.)		
See instructions.	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse ar	
Keep a copy for your records.							Ident (see		ection PIN, enter	it here
5			<u></u>	Fue elle el due e e						
		one no. (626) 265-480 eparer's name	0 Preparer's signat	Email address	KAVERIJYOTH	SNA@GMAIL.CO	PTIN		Check if:	
Paid					רידעשע איי			2702	Self-emplo	h
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	01/12/2023	P02082			
Use Only		m's name GLOBAL TAX			T 0001C				678)965-9	
			Y CT E BRU	NSWICK N			Firm	s EIN	88-2145	
Linto WWW ire a	OV/FOrn	n1040 for instructions and the late	st intormation			DEV/ 01/02/22 DDO			Form 114	(2022)

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

BAA REV 01/02/23 PRO Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074 2 2

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
JYOTHSNA KAVER	I	850-55	-3710
		-	

Par	t 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. Att	ach Schedule E .	5	-8,030.
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		
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	-	
	Wages earned while incarcerated	8u	-	
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	0.000
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF	t, or 1040-NK, line 8	10	-8,030.

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	01/02/23 P	RO	Schedu	ile 1 (Form 1040) 2022

SCHEDULE E (Form 1040)		Supplemental Income and Loss										OMB No. 1545-0074			
		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)								2022					
Department of the Treasury		Attach to Form 1040, 1040-SR, 1040-NR, or 1041.								Attachment					
Internal Revenue Service Go to www.irs.gov/ScheduleE for		r instr	uctions an		Sequence No. 13										
										ial security number					
	HSNA KAVER								850-5	5-3710					
Part	Note: If yo	ou are in t	S From Rental Real Estate an the business of renting personal proper ss from Form 4835 on page 2, line 40.			e C. See	e instruc	tions. If you	are an indi	vidual, rep	ort fai	rm			
A [ents in 2022 that would require you	to file	Form(s) 1	10992 5	See ins	tructions		Y∈	as 🛛	No			
	•											No			
1a		rou or will you file required Form(s) 1099?													
 	METPALLI	KARIMN	NAGAR TELANGANA IN 50550	54											
 1b	Type of Prope	urtu 0	For each reptal real estate prope	orty lie	tod		Fa	r Rental	Doroor						
10	(from list below			and		Days		Personal Use Days		QJV					
Α	3		personal use days. Check the Q	JV bo	x only	Α	365			0					
В			if you meet the requirements to f			B						\Box			
С			qualified joint venture. See instru	lons	5.	С									
Туре	of Property:	•							1						
1	Single Family R	esidenc	e 3 Vacation/Short-Term Ren	ntal	5 Lanc	ł	7	Self-Rental							
2	Multi-Family Re	sidence	4 Commercial		6 Roya	alties	8	Other (desc	ribe)						
								Propert							
Incom	ne:					Α		B			С				
3		1		3			10.								
4				-		-									
Exper															
5				5											
6			structions)	6											
7	Cleaning and r	eaning and maintenance				910.									
8	Commissions			8											
9	Insurance			9											
10	Legal and othe	10													
11	Management fees					1,3	67.								
12			to banks, etc. (see instructions)	12											
13	Other interest			13						<u> </u>					
14	•			14			73.								
15	Supplies .			15		2,5	67.			<u> </u>					
16 17				16 17		1 0	23.								
18			or depletion	18		1,0	23.								
19	Other (list)	•		19											
20			nes 5 through 19	20		8.5	40.								
21			ine 3 (rents) and/or 4 (royalties). If												
	result is a (los	s), see ir	nstructions to find out if you must	21		-8,0	30.								
22			estate loss after limitation, if any, structions)	22	(30.)()	(
23a		-	ported on line 3 for all rental prope				23a		510.	X					
b			ported on line 4 for all royalty prop				23b								
с			ported on line 12 for all properties				23c								
d			ported on line 18 for all properties				23d								

е

24

25

26

Total of all amounts reported on line 20 for all properties

Income. Add positive amounts shown on line 21. **Do not** include any losses

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

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 .

SCHEDULE E

23e

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-8,030.

.

8,030.)

-8,030.

8,540.

24

25

26

OMB No. 1545-0074