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

Tacquer's name NAVERN SCRYADEVARA 726-58-35-14 726-78-35-35-14 726-78-35-35-35-35 726-78-35	Subm	ssion Identification Number (SID)		-			
Space's same Part II 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 filters use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income	Taxpaye	pr's name	Social securit	y numbe	er		
Spouse's social security number				-			
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS files use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1							
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income 2 700 for 122, 245. 2 70 tal tax	Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	∣ r year you a	re auth	norizing.)		
Adjusted gross income Adjusted gross income Total tax Total tax Amount you want refunded to you Amount you want refunded to you Amount you want refunded to you Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Tudes penalities of perjury, Ideodare that I have examined a copy of the income tax return (original or amended) I am now authorizand 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 chick or transmitter, or and or amended in am now authorizing. I consent to allow my intermediate service provider, transmitter, or and the income tax for our yelder. If lapplicable, I authorize the U.S. Treasing and its designation (ER) 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 or any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasing 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 yourself of the payment of the declaration and/or a payment of estimated tax, and the financial institution account indicated in the tax preparation software for the payment 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 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 on the income tax return (original or amended) I am now authorizing. Check this box only if you a	Enter	whole dollars only on lines 1 through 5.					
2 10tal tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 . 3 25, 548. 4 Amount you want refunded to you . 4 5, 492_5 5 Amount you owe . 4 5, 492_5 5 Amount you want refunded to your own your your your your your your your your	Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
Amount you want refunded to you	1	Adjusted gross income		1	122,245.		
Amount you want refunded to you 5 Amount you owe Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjun; 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 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 for 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 interial an ACH electronic funds withorizand (lifered tebel) entry to the financial institution account indications software for apparent, I must contact the U.S. Treasury Financial Agent at 1888-353-457. 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 I authorize Lobat TaxEs Liz Lobat Taxes Liz Lobat Taxes Lo	2			2	20,066.		
Amount you owe Part III Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) 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, 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 IRS (a) an acknowledgement of recipitation or amounts from the income tax return for amounts of the IRS (a) an acknowledgement of recipitation to rejection of the transmission, (b) the reason for any delay in processing the return or return, and (c) the date of any return I applicable, I authorize the U.S. Treasury and its designated Financial Agent of the IRS (a) an acknowledgement of residual tax, and the financial institutions 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 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. 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 Paractitioner PIN Method Returns Only—continue be	3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	25,548.		
Date penalties of prayin, I declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of prayin, I declare that I have examed a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and helid; it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return for original or amended). I am now authorizing, and to the best of 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 deferal taxes owned on this return and/or a payment of estimated tax, and the financial institution account indicated in the tax preparation software for payment of the original or amended at an account in the contract that the contract tha	4			4	5,482.		
Under penalties of perjuy, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the less to review (original or amended) I am now authorizing, and to the less to review (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 authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termination 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 account and authorizate the fundamental transmission. (b) the reason to receive the control of the transmission, (b) the reason for any delay in processing the return of revoke (cancel) a payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution for between 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 (estiment) 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 presonal identification number (PIN) below in my signature for 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				- 1			
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 original or general provider. Transmitter, or electronic return original or amount of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any return (if applicable, Lauthorize 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 gayment of the processing the 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 to terminate the authorization. To revoke (cancel) a class to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further active does the certain of the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of 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 Ectronic Fund withdrawal Consent. **Taxpayer's PIN: check one box only** I authorize	Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of yo	our return)		
I authorize GLOBAL TAXES LLC 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. Your signature ▶ Date ▶ Spouse's PIN: check one box only □ I authorize 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. □ 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 by your five-digit self-selected PIN. 2 2 2 4 4 9 6 6 1 9 8 9 Don't enter all zeros 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 ▶	to send for any Agent to payme authori payme busines taxes to person	I my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rej delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Lo initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income of my 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 terminate the Institution of the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requires a days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the lated indentification number (PIN) below is my signature for the income tax return (original or amended) I as	ection of the tr I.S. Treasury and icated in the ta on to debit the ethe authorizates uests must be processing of payment. I furt	ansmiss and its de ax preparent to attorn. To be received the electron and the ack	sion, (b) the reason esignated Financial aration software for this account. This or revoke (cancel) a ed no later than 2 ctronic payment of thowledge that the		
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 PIN: check one box only □ I authorize	Тахра	yer's PIN: check one box only		2 -	1 4		
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	×	ERO firm name	my PIN ☐	ter five d	igits, but		
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 ▶	_	, , , , , , , , , , , , , , , , , , , ,		01			
Spouse's PIN: check one box only authorize		if you are entering your own PIN and your return is filed using the Practitioner PIN meth					
I authorize	Yours	ignature ▶ Date ▶ _					
I authorize	Cnauc	olo DINI, cheek and hay ank					
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 by your five-digit self-selected PIN. 2 2 2 4 9 6 6 1 9 8 9 Don't enter all zeros 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 ▶	Spous		may DINI				
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 ▶ 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 by your five-digit self-selected PIN. 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 ▶		·	,	or five d			
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 by your five-digit self-selected PIN. 2 2 2 2 4 9 6 6 1 9 8 9 Don't enter all zeros 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 ▶							
Part III Certification and Authentication — Practitioner PIN Method Only ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. Don't enter all zeros 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 ▶		I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN methods.					
Part III Certification and Authentication — Practitioner PIN Method Only ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. Don't enter all zeros 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 ▶	Spous	e's signature ▶ Date ▶					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2 2 4 9 6 6 1 9 8 9 Don't enter all zeros 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		Practitioner PIN Method Returns Only—continue below					
Don't enter all zeros 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	Part	Certification and Authentication — Practitioner PIN Method Only					
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 <i>e-file</i> Providers of Individual Income Tax Returns. ERO's signature ▶ Date ▶	ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2					
-	authori	zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subn	nitting this retu	ırn in ac	cordance with the		
-	EBO'a	cignatura • Data •					
		· ·					

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. 1545-0074

IRS Use Only-Do not write or staple in this space.

Filing Status	s X	Single Married filing jointly	Marrie	ed filing separately (N	/IFS)	☐ Head of	household (HC	H) [ifying sun	viving	
Check only one box.	If yo	u checked the MFS box, enter the n	ame of y	our spouse. If you cl	necke	ed the HOH or	QSS box, ent	er the	•	ise (QSS) name if th	ne qualifying	
	pers	on is a child but not your dependent	:									
Your first name	and mi	ddle initial	Last nar	me				١	Your social security number			
NAVEEN SUF				ADEVARA					726-5	8-351	4	
If joint return, s	pouse's	s first name and middle initial	Last nar	me				8	spouse's	s social se	curity number	
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			Apt. no.	F	resider	ntial Election	on Campaign	
811 COM	AL DI	RIVE								ere if you,	•	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	Stat	е	ZIP code			0,	ntly, want \$3 Checking a	
MANSFIEI	LD				TX		75051		_	w will not	•	
Foreign country	y name		F	oreign province/state/o	county	/	Foreign postal of	ode)	our tax	or refund.		
										You	Spouse	
Digital		ny time during 2022, did you: (a) rec	,		. ,		•	,	,		S	
Assets		ange, gift, or otherwise dispose of a		<u>_</u>			asset)? (See ii	nstruc	ions.)	∐ Yes	⊠ No	
Standard	_	eone can claim:		•		a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien							
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before Janu	ary 2,	1958	☐ Is bl	ind	
Dependents	s (see	instructions):		(2) Social security	.	(3) Relationsh	ip (4) Check	he box	if qualif	ies for (see	instructions):	
If more	(1) Fi	rst name Last name		number		to you	Child ·	ax cre	dit	Credit for ot	her dependents	
than four												
dependents, see instructions	s ——											
and check												
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)					1a	13	31,929.	
	b	Household employee wages not re	•	, ,					1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	(see ins	structions)					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	e Taxable dependent care benefits from Form 2441, line 26										
was withheld.	f	Employer-provided adoption bene	fits 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	i Nontaxable combat pay election (see instructions)										
	Z	Add lines 1a through 1h							1z	1	31,929.	
Attach Sch. B	2a	· -	2a			xable interest			2b			
if required.	<u>3a</u>		3a			dinary divide			3b			
	4a	-	4a			xable amoun			4b			
Standard Deduction for—	5a	-	5a			xable amoun			5b			
Single or	6a	,	6a			xable amoun	t		6b	-		
Married filing separately,	_C	If you elect to use the lump-sum e		*	`	,		.				
\$12,950	7	Capital gain or (loss). Attach Sche						. Ц	7			
 Married filing jointly or 	8	Other income from Schedule 1, lin		This is a second at a 1.00 at a					8		<u>-9,684.</u>	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							9	+ 12	22,245.	
\$25,900	10	Adjustments to income from Sche	-						10	+		
 Head of household, 	11	Subtract line 10 from line 9. This is							11	1	22,245.	
\$19,400	12	Standard deduction or itemized		,	,	· · · ·			12	 	12 , 950.	
If you checked any box under	13	Qualified business income deduct							13	+	10 050	
Standard Deduction,	14								14		12 , 950.	
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -u This is y	our t a	axable incom	ie		15	1	09,295.	

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from For	m(s): 1 881	4 2 4972	3 🗌		16	20,066.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	20,066.
	19	Child tax credit or credit for other depende	ents from Sched	lule 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	s, enter -0				22	20,066.
	23	Other taxes, including self-employment tax					23	0.
	24	Add lines 22 and 23. This is your total tax					24	20,066.
Payments	25	Federal income tax withheld from:			1 1			
	а	Form(s) W-2			25a 25	5,548.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	25,548.
If you have a	26	2022 estimated tax payments and amount					26	
qualifying child, attach Sch. EIC. [27	Earned income credit (EIC)			27			
attaci och. Elo.	28	Additional child tax credit from Schedule 88			28			
	29	American opportunity credit from Form 886	-		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 you	-	•			32	05 540
	33	Add lines 25d, 26, and 32. These are your					33	25,548.
Refund	34	If line 33 is more than line 24, subtract line					34	5,482.
5	35a	Amount of line 34 you want refunded to ye					35a	5,482.
Direct deposit? See instructions.	b	Routing number 0 1 1 0 0 0 1			Checking	Savings		
	d	Account number 0 0 4 6 6 6 8			1 1			
	36	Amount of line 34 you want applied to you			36			
Amount You Owe	37	Subtract line 33 from line 24. This is the an For details on how to pay, go to <i>www.irs.g</i>	•				37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to distructions				omplete b	elow.	X No
		signee's	Phone			onal identifi	cation _г	
		me	no.			ber (PIN)		
Sign Here		der penalties of perjury, I declare that I have exami lief, they are true, correct, and complete. Declaration						
TICIC	Yo	ur signature	Date	Your occupation				t you an Identity
				COEMMADE	NCTNEED	Prote		N, enter it here
Joint return? See instructions.	Sn	ouse's signature. If a joint return, both must sign.	Date	SOFTWARE E				t your spouse an
Keep a copy for your records.	Ор	ouse's signature. If a joint return, both must sign.	Date	Date Spouse's occupation				ction PIN, enter it here
	Ph	one no. (703) 717-8998	Email address	SURYADEVARA.NA	VEEN127@GMAIL.C	OM		
Deid	Pre	eparer's name Preparer's sign	ature		Date	PTIN		Check if:
Paid	SYAN	1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/03/2023	P02082	703	Self-employed
Preparer		m's name GLOBAL TAXES LLC						678) 965-9522
Use Only	Fir	m's address 245 ROONEY CT E BR	UNSWICK N	J 08816		Firm's		88-2145487
								1010

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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.

NAVE	EN SURYADEVARA		726-58-3	514
Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received			
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	ach Schedule	E . 5	-9,684.
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		
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		
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 Nontaxable amount of Medicaid waiver payments included on Form	8r		
S	1040, line 1a or 1d	8s ()	
	Pension or annuity from a nonqualifed deferred compensation plan or	05 (
·	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount:	- Ju		
~	outer moonie. Liet type and amount.	8z		
9	Total other income. Add lines 8a through 8z		9	

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

-9,684.

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-basin		
	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 8I 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 24g		
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	-	
İ	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		
	En En		
j	Housing deduction from Form 2555	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
_	1041)	-	
Z	Other adjustments. List type and amount:		
25		25	
25 26	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Ent	00	
	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.)

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number NAVEEN SURYADEVARA 726-58-3514 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 . В If "Yes," did you or will you file required Form(s) 1099? ☐ Yes Physical address of each property (street, city, state, ZIP code) 1a

P NO 7, HNO 9-2/5, NAGARAM PMR ENCLAVE, HYDERABAD TELANGANA IN 500083 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 **Days Days** 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. C C

Type of Property:

1 Single Family Residence	3 Vacation/Short-Term Rental	5 Land	7 Self-Rental
2 Multi-Family Residence	4 Commercial	6 Royalties	8 Other (describe)

			Properties:							
ncoı	ne:		Α	В		С				
3	Rents received	3	658	· .						
4	Royalties received	4								
фе	nses:									
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7	2,687							
8	Commissions	8								
9	Insurance	9								
0	Legal and other professional fees	10								
1	Management fees	11	2,065							
2	Mortgage interest paid to banks, etc. (see instructions)	12								
3	Other interest	13								
4	Repairs	14	1,924							
5	Supplies	15	1,742							
6	Taxes	16								
7	Utilities	17	1,924							
8	Depreciation expense or depletion	18								
9	Other (list)	19								
0	Total expenses. Add lines 5 through 19	20	10,342	2.						
1	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	-9,684							
2	Deductible rental real estate loss after limitation, if any,									
	on Form 8582 (see instructions)	22	9,684.	.) ()	(
3a	Total of all amounts reported on line 3 for all rental proper	ties	23	3a (558.					
b	Total of all amounts reported on line 4 for all royalty prope	erties	23	3b						
С	Total of all amounts reported on line 12 for all properties		23	3c						
d	Total of all amounts reported on line 18 for all properties		23	3d						
е	Total of all amounts reported on line 20 for all properties		23	3e 10,3	342.					
4	Income. Add positive amounts shown on line 21. Do not	: inclu	ide any losses .		24					
5	Losses. Add royalty losses from line 21 and rental real estate		•		25	(9,684				
6	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, IV, and line 40 on page 2 do not a									
	Schedule 1 (Form 1040), line 5. Otherwise, include this an	าดเมา	in the total on line	41 on page 2	26	-9,68				

Passive Activity Loss Limitations

See separate instructions.

Attach to Form 1040, 1040-SR, or 1041.

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 Attachment Sequence No. **858**

726-58-3514

Department of the Treasury Internal Revenue Service

NAVEEN SURYADEVARA

Identifying number

Par	t I 2022 Passive Activity Loss	S			•		
	Caution: Complete Parts IV ar	nd V before comple	eting Part I.				
	l Real Estate Activities With Active Pa ance for Rental Real Estate Activities			ive participation, s	ee Special		
1a	Activities with net income (enter the a	mount from Part I\	/, column (a)) .	1a			
b	Activities with net loss (enter the amount	unt from Part IV, c	olumn (b))	1b ()		
С	Prior years' unallowed losses (enter th	ne amount from Pa	rt IV, column (c))	1c ()		
d	Combine lines 1a, 1b, and 1c					1d	
All Ot	her Passive Activities						
2a	Activities with net income (enter the a	mount from Part V	column (a))	2a	0.		
b	Activities with net loss (enter the amount				0.)		
С	Prior years' unallowed losses (enter th				-880.)		
d	Combine lines 2a, 2b, and 2c					2d	-880.
3	Combine lines 1d and 2d. If this line i						
	all losses are allowed, including any p		•	•			
	losses on the forms and schedules no	ormally used .			[3	-880.
	If line 3 is a loss and: • Line 1d is a l	oss do to Part II					
		oss (and line 1d is	zero or more), ski	ip Part II and go to	line 10.		
		,	,,				
	on: If your filing status is married filing. Instead, go to line 10.	separately and yo	ou lived with your	spouse at any tim	e during the	year,	do not complete
Par		stal Boal Estato	Activities With	Active Particing	ation		
r ai	Note: Enter all numbers in Par			-			
4	Enter the smaller of the loss on line 1	<u> </u>				4	
5	Enter \$150,000. If married filing separ			5		-	
6	Enter modified adjusted gross income	•					
	Note: If line 6 is greater than or equal						
	on line 9. Otherwise, go to line 7.	•					
7	Subtract line 6 from line 5			7			
8	Multiply line 7 by 50% (0.50). Do not en					8	
9	Enter the smaller of line 4 or line 8					9	0.
Part							
10	Add the income, if any, on lines 1a an				-	10	0.
11	Total losses allowed from all passiv		22. Add lines 9 an	id 10. See instructi	ons to find		0
Doub	out how to report the losses on your t					11	0.
Part	IV Complete This Part Before	e Part I, Lines I	a, ib, and ic. 5	ee instructions.			
		Currer	nt year	Prior years	Over	all ga	in or loss
	Name of activity			(c) Unallowed loss (line 1c)	(d) Gain		(e) Loss

BAA

Total. Enter on Part I, lines 1a, 1b, and 1c

Page **2**

e Part I, Lines	2a, 2b,	and 2c. S	ee instruc	ctions.				
Curr		Prior years		Overa	ain or loss			
(a) Net income (line 2a)	e (b)	Net loss ne 2b)	(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss	
0.		0.		880.			880.	
	+							
		0.		880.				
		, Line 9. S	ee instruc	ctions.	I			
and line number to be reported of	r n (a) Loss (b) Ra		(b) Ratio			(d) Subtract column (c) from column (a).	
			1.00	0				
osses. See ins	truction	S.			I			
and line n to be repo	umber rted on	(a) l	_OSS	((b) Ratio	(c)) Unallowed loss	
E Ln	22	2		1.0000000			880.	
			880.		1.00		880.	
	hedule							
and line n to be repo	umber rted on	(a) Loss		(b) Unallowed loss		(c) Allowed loss	
E Ln	22		880.		880.		0.	
<u>.</u> .			880.		880.		0.	
	Curr (a) Net income (line 2a) 0. t Is Shown or Form or schedul and line numbe to be reported o (see instructions Form or sc and line n to be repo (see instru	Current year (a) Net income (line 2a) (line 2a) (line 2a) 0. t Is Shown on Part II, Form or schedule and line number to be reported on (see instructions) Form or schedule and line number to be reported on (see instructions) E Ln 22	Current year (a) Net income (line 2a) 0. 0. 0. t Is Shown on Part II, Line 9. S Form or schedule and line number to be reported on (see instructions) Form or schedule and line number to be reported on (see instructions) E In 22 Cotions. Form or schedule and line number to be reported on (see instructions) (a) I in the control of the control	Current year Prior year (a) Net income (line 2a) (b) Net loss (line 2b) (c) Unall loss (line 2b) 0. 0. 1 Is Shown on Part II, Line 9. See instruction of see instructions. Form or schedule and line number to be reported on (see instructions) Form or schedule and line number to be reported on (see instructions) E In 22 880. Ictions. Form or schedule and line number to be reported on (see instructions) E In 22 880.	(a) Net income (line 2a) (c) Unallowed loss (line 2c) 0. 0. 880. 1.00	Current year Prior years Overa (a) Net income (line 2a) (b) Net loss (line 2c) (d) Gain 0. 0. 880. 1.00	Current year Prior years Overall gas (a) Net income (line 2a) (b) Net loss (line 2b) (c) Unallowed loss (line 2c) (d) Gain 0. 0. 880. 0. 0. 880. t Is Shown on Part II, Line 9. See instructions. Form or schedule and line number to be reported on (see instructions) E Ln 22 880. 1.00 Ctions. Form or schedule and line number to be reported on (see instructions) E Ln 22 880. 1.00 Ctions. Form or schedule and line number to be reported on (see instructions) E Ln 22 880. 1.00 Ctions. Form or schedule and line number to be reported on (see instructions) E Ln 22 880. 1.00 (b) Unallowed loss (see instructions) E Ln 22 880. 880. 880.	