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

Submission Identification Number (SID)							
Taxpayer's name	Soc	Social security number					
SAMPATH KUMAR BASHAMONI	6	684-06-7024					
Spouse's name	Spo	Spouse's social security number					
Part I Tax Return Information — Tax Year Ending December 31,	 2021 (Enter yea	r you are	authorizino				
Enter whole dollars only on lines 1 through 5.		,		,,			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1 Adjusted gross income			1 1	9,201.			
2 Total tax			2	638.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		:	3	2,761.			
4 Amount you want refunded to you			4	2,123.			
5 Amount you owe			5				
Part II Taxpayer Declaration and Signature Authorization (Be sure yo	ou get and keep	a copy o	of your ret	urn)			
return (original or amended) I am now authorizing. I consent to allow my intermediate service poto send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I applicable, I applies to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institute payment of my federal taxes owed on this return and/or a payment of estimated tax, and the finauthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Age payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cabusiness days prior to the payment (settlement) date. I also authorize the financial institutions taxes to receive confidential information necessary to answer inquiries and resolve issues repersonal identification number (PIN) below is my signature for the income tax return (original of Electronic Eurole Withdrawal Consent.	r reason for rejection authorize the U.S. Tron account indicated nancial institution to the ent to terminate the ancellation requests involved in the paymelated to the paymelated to the paymelated.	of the trans easury and I in the tax p debit the en authorizatio must be re essing of the ent. I further	smission, (b) its designate oreparation stry to this acon. To revoke eceived no late electronic pracknowledge	the reason of th			
Electronic Funds Withdrawal Consent.				1			
Taxpayer's PIN: check one box only X authorize GLOBAL TAXES LLC to enter		6 7	0 2 4				
X I authorize GLOBAL TAXES LLC to enter	r or generate my P	Enter 1	five digits, but				
signature on the income tax return (original or amended) I am now authorizing	ng.	dont	enter an zeros				
I will enter my PIN as my signature on the income tax return (original or ame if you are entering your own PIN and your return is filed using the Practitio below.	ner PÍN method. 1						
Your signature ►	Date ►						
Spouse's PIN: check one box only				1			
I authorize to enter	r or generate my P	'IN		as my			
ERO firm name	,		five digits, but				
signature on the income tax return (original or amended) I am now authorizing	ng.	don't	enter all zeros				
I will enter my PIN as my signature on the income tax return (original or ame if you are entering your own PIN and your return is filed using the Practitio below.							
Spouse's signature ▶	Date ►						
Practitioner PIN Method Returns Only—con	tinue below						
Part III Certification and Authentication — Practitioner PIN Method C	Only						
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected P		2 7 8 Don't enter a		8 9			
I certify that the above numeric entry is my PIN, which is my signature for the electronic indiv authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm t requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file	that I am submitting	this return	in accordance				
ERO's signature ▶	Date ►						
ERO Must Retain This Form — See Ins							
Don't Submit This Form to the IRS Unless Req		0					

£1040

Department of the Treasury—Internal Revenue Service (99) **U.S. Individual Income Tax Return**

2021

OMB No. 1545-007

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

Filing Status Check only one box.	If yo	Single Married filing jointly [bu checked the MFS box, enter the reson is a child but not your depender	— name of	ied filing separately your spouse. If you	,	_		, ,	_	, ,	` , ` ,
Your first name	and m	iddle initial	Last na	ame					Your so	cial securi	ity number
SAMPATH	KUM	AR	BASHAMONI			684-06-7024					
If joint return, spouse's first name and middle initial Last name							Spouse's social security numbe				
	•	er and street). If you have a P.O. box, see	e instruct	ions.				Apt. no.		ntial Electi	ion Campaigr
		CREEK DR			104-	4-	710	132 code			ntly, want \$3
City, town, or post office. If you have a foreign address, also comp			ompiete :	inplete spaces below.		State TX			to go to this fund. Checking a box below will not change		
	IRVING						_	038			
Foreign countr	y name			Foreign province/stat	e/coun	ty	Fore	eign postal code	You Spo		
At any time du	ring 20	021, did you receive, sell, exchange	, or oth	erwise dispose of a	ıny fina	ancial intere	st in an	y virtual curre	ncy?	Yes	⊠ No
Standard Deduction		neone can claim:				'	nt				
Age/Blindnes	You	: Were born before January 2, 1	1957	Are blind S	pouse	: Was I	born be	efore January 2	2, 1957	☐ Is b	lind
Dependent	s (see	instructions):		(2) Social secu	rity	(3) Relation	nship	(4) 🗸 if q	ualifies for	(see instru	uctions):
If more	(1) F	st name Last name		number to you		ı	Child tax ci	redit	Credit for of	ther dependents	
than four											
dependents, see instruction	e										
and check											
here ▶ 🗌											
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1		19,201.
Attach	2a	Tax-exempt interest	2a		b Taxable interest		est		. 2b		
Sch. B if required.	3a	Qualified dividends	3a	b Ordinary divide		dends		. 3b			
required.	4a	IRA distributions	4a	b Taxable amount .			unt .		. 4b		
	5a	Pensions and annuities	5a		b Taxable amount .				. 5b		
Standard	6a	Social security benefits	6a		b T	axable amo	unt .		. 6b		
Deduction for—	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							_ _ 7		
 Single or Married filing 	8	Other income from Schedule 1, line 10							. 8		
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							▶ 9		19,201.
Married filing	10	Adjustments to income from Schedule 1, line 26							. 10		
jointly or Qualifying	11	Subtract line 10 from line 9. This is your adjusted gross income						▶ 11		19,201.	
widow(er), \$25,100	12a	Standard deduction or itemized deductions (from Schedule A) 12a 12,550							0.		·
Head of	b	Charitable contributions if you take the standard deduction (see instructions) 12b 300							0.		
household, \$18,800	С	Add lines 12a and 12b							. 12c	:	12,850.
If you checked	13	Qualified business income deduct	tion fror	n Form 8995 or Foi	m 899	95-A			. 13		
any box under Standard	14	Add lines 12c and 13							. 14		12,850.
Deduction,	15	Taxable income. Subtract line 14	from li	ne 11. If zero or les	s, ente	er -0			. 15		6,351.

	16	Tax (see instructions). Check if any from Form	(s): 1 🗌 8814	4 2 🗌 4972	3 🗌			16	638.
	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	638.
	19	Nonrefundable child tax credit or credit for o	ther depender	nts from Schedule	e 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	638.
	23	Other taxes, including self-employment tax,	from Schedule	2, line 21 .				23	0.
	24	Add lines 22 and 23. This is your total tax					. ▶	24	638.
	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a	2	761.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c				1		25d	2,761.
	26	2021 estimated tax payments and amount a						26	, , , ,
If you have a lqualifying child,	27a	Earned income credit (EIC)	•	No	27a				
attach Sch. EIC.		Check here if you were born after Janua							
		January 2, 2004, and you satisfy all the	e other requir	rements for					
		taxpayers who are at least age 18, to claim to	1 1	structions 🕨 🗌					
	b	Nontaxable combat pay election							
	С	Prior year (2019) earned income	. 27c						
	28	Refundable child tax credit or additional child	tax credit from	Schedule 8812	28				
	29	American opportunity credit from Form 8863			29				
	30	Recovery rebate credit. See instructions .			30				
	31	Amount from Schedule 3, line 15			31				
	32	Add lines 27a and 28 through 31. These are						32	
	33	Add lines 25d, 26, and 32. These are your to	tal payments				. ▶	33	2,761.
Refund	34	If line 33 is more than line 24, subtract line 24			-	-		34	2,123.
	35a	Amount of line 34 you want refunded to you	35a	2,123.					
Direct deposit? See instructions.	►b	Routing number 3 2 2 2 7 1 6		▶ c Type: 🔀	Chec	king 🗌 S	avings		
See instructions.	►d	Account number 5 3 9 2 6 6 3	3 3						
	36	Amount of line 34 you want applied to your	2022 estimate	dtax▶	36				
Amount	37	Amount you owe. Subtract line 33 from line			see ins	tructions	. ▶	37	
You Owe	38	Estimated tax penalty (see instructions) .		►	38				
Third Party		you want to allow another person to disc							
Designee instructions							X No		
		signee's ne ▶	Phone no. ▶				nal identif er (PIN) ▶		
Sign		der penalties of perjury, I declare that I have examine		accompanying sch	nedules				t of my knowledge and
Sign		ief, they are true, correct, and complete. Declaration of							
Here	You	ur signature	Date	Your occupation			If the	IRS ser	nt you an Identity
	k							Protection PIN, enter it here	
Joint return?			SOFTWEAR DEVELOPER				nst.) 🕨		
See instructions. Keep a copy for	Spo	ouse's signature. If a joint return, both must sign.	Date Spouse's occupation					nt your spouse an ection PIN, enter it here	
your records.							I .	nst.) ▶	
	Pho	one no. (682)231-1682	Email address	SAMPATHROI	RD@GI	MAIL.COM	1		
		eparer's name Preparer's signat			Date		PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/	13/2022	202082	2703	Self-employed
Preparer									678)965-9522
Use Only								s EIN ▶	
Go to www irs a		n1040 for instructions and the latest information.		BAA	BEV 0	2/05/22 PRO	1		Form 1040 (2021)
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