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)

Taxpayer's name	Social security number
SUPRIYA GADDAM	799-91-1750
Spouse's name	Spouse's social security number
Part I 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 filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1 Adjusted gross income	1 2,650.
2 Total tax	2 0.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3
4 Amount you want refunded to you	4
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and ke	eep 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 my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abov return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reje for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U	e are the amounts from the income tax tter, or electronic return originator (ERO) ction of the transmission, (b) the reason

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	l authorize	GLOBAL	TAXES	LLC		to enter or generation	ate my PIN		as my
				ERO firm name		-		Enter five digits, but don't enter all zeros	2
	I will enter i	ny PIN as r	ny signatu	n (original or amende re on the income tax I and your return is f	return (origir	al or amended) I a			
Your sig	nature 🕨 Sup	riyagoud_				Date	• 02/21/202	23	
Spouse	's PIN: check I authorize	one box	only	ERO firm name		to enter or gener	ate my PIN	Enter five digits, but	as my
	signature on	the income	e tax retur	n (original or amende	ed) I am now a	uthorizing.		don't enter all zeros	
				re on the income tax I and your return is f					
Spouse'	's signature 🕨	•				Date			
			Prac	titioner PIN Metho	d Returns O	nly—continue bel	ow		
Part II	Certific	ation and	Authen	tication — Practiti	oner PIN Me	thod Only			

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

6 6 Don't enter all zeros

9

4

9

9 8

2

2 2 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 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	instructions. BAA	REV 02/14/23 PRO	Form 8879 (Rev. 01-2021)						

1040)-N	VR Department of U.S. No	of the Treasury— nresident	nternal Rev Alien I	venue Service ncome Tax	k Return	2022	OMB No. 154		e Only—Do not write staple in this space.
For the year Ja	n. 1-D	ec. 31, 2022, or oth	er tax year beg	ginning		, 2022, en	ding	, 2	20	See separate instructions.
Filing Status Check only one box.	lf	Single you checked the QS	Married filing S box, enter th	•	- · ·	- , ,	surviving spot is a child but i	(=)	Estate dent:	Trust
Your first name	and r	niddle initial		Last	name				Your identif (see instruct	ying number ions)
SUPRIYA				GAI	DDAM				799-91-	-1750
Home address (1528 3RD		er and street). If yo EET	ou have a P.O.	box, see i	nstructions.			A		Apt. no.
City, town, or p		ffice. If you have a	foreign addres	s, also cor	nplete spaces be	elow.		State IL		code 920
Foreign country	y name	е		Fore	eign province/sta	ite/county		Foreign p	ostal code	
Digital Asse Dependents (see instructions)	othe	any time during 202 erwise dispose of a (1) First name		or a financ		a digital asset)? ndent's		tions.) (4) Cheo Chilo		ange, gift, or Yes No alifies for (see inst.): Credit for other dependents
If more than four dependents, see instructions and check here Income Effectively Connected	2	Total amount fror Household employ Tip income not rej	yee wages not	reported	on Form(s) W-2				1b	2,650.
With U.S. Trade or Business Attach Form(s) W-2, 1042-S, SSA-1042-S, RRB-1042-S, and 8288-A here. Also	d e f h i j k	Medicaid waiver p Taxable depender Employer-provide Wages from Form Other earned inco Reserved for futur Reserved for futur Total income exer line 1(e)	t care benefit: d adoption ber 8919, line 6 me (see instru e use e use npt by a treaty	s from For nefits fron ctions)	m 2441, line 26 n Form 8839, line	e 29 • • • • • 1040-NR), item	. 1i L,		1e 1f 1g 1h	
Form(s) 1099-R if tax was withheld. If you did not get a Form W-2, see		Add lines 1a throu Tax-exempt intero Qualified dividends distributions Pensions and annu Reserved for futur	ngh 1h est s 4a uities	2a 3a 4a 5a		b Taxabl b Ordina b Taxabl b Taxabl	le interest ny dividends . le amount		2b 3b 4b 5b	2,650.
instructions.	7 8 9 10 a b c d 11	Capital gain or (lo Other income from Add lines 1z, 2b, 3 Adjustments to ind From Schedule 1 (Reserved for futur Reserved for futur Enter the amount Subtract line 10d	Schedule 1 (Fo Bb, 4b, 5b, 7, a come: Form 1040), li e use from line 10a.	orm 1040), Ind 8. This ne 26 These are	, line 10 s is your total ef	fectively conr ustments to in	nected incom 		7 8 9 10d 11	2,650.

	12	Itemized deductions (from Schedu deduction (see instructions)	le A (Foi	rm 1040-NR)) or, for cert	tain resid	dents of	f India, s d Dedn US/I n	tandard dia Trea ty	12		12,950.
	13a	Qualified business income deduction					a ,29aii,00,2,.		12		12,000.
		Exemptions for estates and trusts on									
		Add lines 13a and 13b	• •		• •			• •	13c		
									14		12,950.
	15	Subtract line 14 from line 11. If zero	or less, o	enter -0 This is your tax	able inc	ome	• • •		15		0.
										1.0	
For Disclosure,	Privad	cy Act, and Paperwork Reduction Act	Notice,	see separate instructions		BAA	REV 0	2/14/23 PR	J ⊦	orm IC	040-NR (2022)
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