## 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

IIIGIIIai	nevelue Service						
Subm	ission Identification Number (SID)						
Taxpaye	er's name	Social secur	Social security number				
MAI'	TE BIZCARGUENAGA DOUCET	374-57	374-57-9189				
Spouse	's name	Spouse's so	cial secu	rity number	•		
	<u> </u>						
Part	, , ,	r year you a	are aut	horizing.	)		
	whole dollars only on lines 1 through 5.						
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		اما	0.7	F 4 0		
1	Adjusted gross income		1		,540.		
2	Total tax		2		,024.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		<u>,798.</u>		
4 5	Amount you want refunded to you		5	2	<u>,774.</u>		
Part		keen a cor		our retu	rn)		
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended						
to send for any Agent i payme authori payme busines taxes t person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transfer my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for received provider, transfer delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the lost initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account induction 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 transfer of the payment (settlement) date. I also authorize the financial institutions involved in the oreceive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) I applied to the payment of the payment (settlement) and the payment and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) I applied to the payment (settlement) and the payment (settlement) and the payment (settlement) are settlement or the income tax return (original or amended) I applied to the payment (settlement) and the payment (settlement) and the payment of th	jection of the t J.S. Treasury a dicated in the to ion to debit the te the authorized quests must be processing of payment. I fur	ransmis and its deax prepare entry to ation. To e receive the electrical the control of the electrical receives action and the electrical receives action ac	sion, (b) the esignated aration sofo this according revoke (red no late ectronic parknowledge	ne reason Financial tware for bunt. This cancel) a er than 2 syment of that the		
	nic Funds Withdrawal Consent.  Nyer's PIN: check one box only						
X		my DIN 7	9 1	8 9	ac my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Er		ligits, but all zeros	as my		
	,			ما منطفيام			
L	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methodow.						
Your s	signature ▶ Date ▶						
Spous	se's PIN: check one box only						
	I authorize to enter or generate	my PIN			as my		
	ERO firm name	_	ter five o	digits, but	ao my		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't enter	all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methodow.						
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue belov	V					
Part	III Certification and Authentication — Practitioner PIN Method Only						
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 1	8 9 5 Don't en	2 3	1 9 8	9		
		Don ten	.J. an 201	. 50			
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am substants of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of the Practic PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practic PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practic PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practic PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practic PIN method Pub. 1345, Handbook for Authorized IRS e-file Providers of the Pinch Pub. 1345, Handbook for Authorized IRS e-file Providers of the Pinch Pub. 1345, Handbook for Authorized IRS e-file Providers of the Pinch Pub. 1345, Handbook for Authorized IRS e-file Providers of the Pinch Pub. 1345, Handbook for Authorized IRS e-file Providers of the Pinch Pub. 1345, Handbook for Pub. 1345, Handbook for Authorized IRS e-file Providers of the Pinch Pub. 1345, Handbook for Pub. 1345, Handbook f	nitting this ret	urn in a	ccordance			
FRO's	s signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To	Do So					

## E1040 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 🔀 S	Single Married filing jointly	Marrie	ed filing separatel	y (MFS)	☐ Head of	household (HOH)			survivi	ing
Check only one box.	If vo	u checked the MFS box, enter the n	ame of v	our spouse If vo	ı check	ed the HOH or	OSS box enter the		use (Q: name	,	aualifyina
0110 00%	-	on is a child but not your dependen	-	our opouco. Il yo	a 0110011	.00 110 11011 01	QOO DOX, OHIOI II	io oring o	riarrio		quamymig
Your first name	Your first name and middle initial Last name				Your so	Your social security number					
			BIZC	ARGUENAGA	DOUCE	ΞT		374-57-9189			
If joint return, spouse's first name and middle initial			Last nar	me				Spouse's social security number			
	, ,										
	,	er and street). If you have a P.O. box, see	einstructio	ons.			Apt. no.	Presidential Election Ca			
		K TERRACE				710	1	Check here if you, or your spouse if filing jointly, want \$3			
	OST OTTI	ce. If you have a foreign address, also co				ZIP code	to go to this fund. Checking a				
AUSTIN			TX Foreign province/state/county			78744		box below will not change your tax or refund.			
Foreign country	y name			oreign province/sta	ite/coun	ounty Foreign postal code			You Spous		
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward, award,	or payr	nent for prope	rty or services); o	r (b) sell,			
Assets	exch	ange, gift, or otherwise dispose of	a digital a	asset (or a financ	ial intere	est in a digital	asset)? (See instru	uctions.)	□ Y	es [	X No
Standard	Som	eone can claim:	ependent	Your spo	use as	a dependent					
Deduction		Spouse itemizes on a separate retu	n or you	were a dual-stat	us alien	1					
Age/Blindness	s You:	☐ Were born before January 2, 1	958	Are blind	Spouse	: Was bor	n before January	2, 1958	I	s blind	Ł
Dependent	s (see	instructions):		(2) Social secu	ırity	(3) Relationsh	ip (4) Check the b	ox if quali	fies for	(see ins	structions):
If more		rst name Last name		number		to you	Child tax of	redit	Credit f	or other	dependents
than four											
dependents, see instruction											
and check	5 —										
here	]										
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .				. 1a		87	,540.
	b	Household employee wages not reported on Form(s) W-2									
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)									
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26									
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29									
If you did not	g	Wages from Form 8919, line 6 .						. 1g			
get a Form W-2, see	h	Other earned income (see instruct							-		0.
instructions.	i										
	Z	Add lines 1a through 1h						. 1z		8.7	,540.
Attach Sch. B	2a	Tax-exempt interest	2a			axable interes		. 2b			
if required.	<u>3a</u>	Qualified dividends	3a			ordinary divide		. 3b			
	4a	IRA distributions	4a			axable amoun					
Standard Deduction for—	5a	_	5a			axable amoun		. 5b			
Single or	6a	,	6a			axable amoun	t	. 6b			
Married filing separately,	_ C	If you elect to use the lump-sum election method, check here (see instructions)									
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here									
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, line 10							+		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-				. 9 . 10		8./	,540.
\$25,900	10	Adjustments to income from Schedule 1, line 26									
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is						. 11			,540.
\$19,400	12	Standard deduction or itemized		•	,			. 12		12	<u>,950.</u>
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A									050
Standard Deduction,	14	Add lines 12 and 13									,950.
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>								/4	,590.

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	12,024.
Credits	17	Amount from Schedule 2, lin	ne 3					17	
	18	Add lines 16 and 17						18	12,024.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ie 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	12,024.
	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 <b>total tax</b>					24	12,024.
Payments	25	Federal income tax withheld from:							
-	а	Form(s) W-2							
	b	Form(s) 1099							
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	14,798.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return			26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits							
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>							14,798.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	ınt you <b>overpaid</b>		34	2,774.
neiuna	35a	Amount of line 34 you want			is attached, che	eck here	. 🗆	35a	2,774.
Direct deposit?	b	Routing number 1 1 1			c Type:	Checking	Savings		
See instructions.	d	Account number 2 4 1 5 6 6 3 5 7 0							
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24						37	
	38	For details on how to pay, go to www.irs.gov/Payments or see instructions							
Third Party		you want to allow another							
Designee		structions	•				omplete b	elow.	X No
	De	signee's		Phone			onal identifi		
	naı	me		no.		num	ber (PIN)		
Sign		der penalties of perjury, I declare tief, they are true, correct, and com			1 , 0		,		, ,
Here	Yo	Your signature [			Your occupation				nt you an Identity N, enter it here
Joint return?							(see in		
See instructions.	Sp	ouse's signature. If a joint return, I	Date Spouse's occupation					t your spouse an	
Keep a copy for your records.								, ,	ection PIN, enter it here
your rooordo.							(see ir	151.)	
		one no. (210) 623-081		Email address	MAITEBIZC	AR@GMAIL.CO			01 1 16
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAN	1 04/05/2023	P02082		Self-employed
Use Only		m's name GLOBAL TA					Phone		678) 965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's	EIN_	84-3171965
Go to www.irs.g	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/22/23 PRO			Form 1040 (2022)