## 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

Subm	nission Identification Number (SID)				
Taxpay	ver's name	Social securit	y numbe	r	
MAI	OHUR ARUN JAGTAP	669-25-	-5014		
Spouse	e's name	Spouse's soc	ocial security number		
Par	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	r year you a	re auth	orizing.)	
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	89,	129.
2	Total tax		2	12,	376.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12,	979.
4	Amount you want refunded to you		4	·	603.
5	Amount you owe		5		
Par		кеер а сор	y of yo	ur retur	n)
to sen for an Agent payme author payme busine taxes persor Electro	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejuy delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indigent 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 ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the phal identification number (PIN) below is my signature for the income tax return (original or amended) I approve a payer's PIN: check one box only  I authorize GLOBAL TAXES LLC to enter or generate 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.	ection of the tr. S. Treasury aricated in the taon to debit the e the authorizauests must be processing of payment. I furt m now authori	ansmiss and its de ax prepa entry to attion. To receive the electher ack zing and 5 0 er five di 't enter ack	ion, (b) the signated Foration soft this according to the saccording paymowledge and the saccording to	e reason Financial ware for unt. This cancel) a rethan 2 yment of that the able, my
L	if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN metholow.				
Your	signature ▶ Date ▶ _				
Spou	se's PIN: check one box only				
Γ	I authorize to enter or generate	mv PIN			as my
	ERO firm name		er five di	igits, but	,
	signature on the income tax return (original or amended) I am now authorizing.	dor	n't enter	all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.				
Spou	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part	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 Don't ente	-   -	1 9 8 os	9
autho	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income to rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submarrate above for the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of In	itting this retu	rn in ac	cordance	
ERO'	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. 1545-007

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) [		lifying sur		
Check only one box.	•	u checked the MFS box, enter the nation is a child but not your dependent	,	our spouse. If you cl	necke	ed the HOH or	QSS box, en	er the	•	use (QSS) name if tl		
Your first name			Last nar	me					Your so	cial securi	ty number	
			JAGT								-	
			Last nar						669-25-5014  Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.		Preside	ntial Electi	on Campaign	
1455 NE	BRAI	NDI WAY								nere if you,	•	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete sp	paces below.	Stat	е	ZIP code		•	0,	ntly, want \$3 Checking a	
PULLMAN					WA		99163		box belo	ow will not	change	
Foreign countr	y name		F	Foreign province/state/o	county	/	Foreign postal	code	your tax	or refund		
Digital	۸+ or	ny time during 2022, did you: (a) rec	oivo (ac	a roward award or	navm	ont for propo	rty or convice	3): or (	h) coll	You	Spouse	
Digital Assets		ange, gift, or otherwise dispose of a	,		. ,		•	,.	,	Yes	⊠ No	
Standard		eone can claim:  You as a de		<u>_</u>			. (000)		7			
Deduction	_	Spouse itemizes on a separate retur		•								
Age/Blindness	s You:	Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before Janu	arv 2	1958	☐ Is b	lind	
Dependent			_	(2) Social security		(3) Relationsh	(4) Ob I				instructions):	
If more		irst name Last name		number		to you	. 1	tax cre	edit	Credit for ot	ther 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		89,129.	
	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	(see ins	structions)					1c			
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) W-2 (see ir	nstru	ctions)			1d			
W-2G and	е	Taxable dependent care benefits f	rom For	m 2441, line 26 .	V-2 (see instructions)       1c         Dec 26       1e         9, line 29       1f							
1099-R if tax 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	h	Other earned income (see instruction	ons) .						1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>1</u> i						
	z	Add lines 1a through 1h							1z		89 <b>,</b> 129.	
Attach Sch. B	2a	Tax-exempt interest	2a			xable interes			2b			
if required.	<u>3a</u>	Qualified dividends	3a		<b>b</b> Or	dinary divide	nds		3b			
	4a		4a			xable amoun			4b			
Standard Deduction for—	5a		5a			xable amoun			5b			
Single or	6a	,	6a			xable amoun	t	٠ _	6b			
Married filing separately,	C	If you elect to use the lump-sum e			•	,						
\$12,950	7	Capital gain or (loss). Attach Sche						. L	7			
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin							8			
Qualifying 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							9		89 <b>,</b> 129.			
\$25,900	10	Adjustments to income from Sche							10			
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is	•	-					11		89 <b>,</b> 129.	
\$19,400	12	Standard deduction or itemized  Qualified business income deduction		•	,				12		12 <b>,</b> 950.	
If you checked any box under	13								13		12 050	
Standard Deduction,	14 15	Subtract line 14 from line 11. If zer							14 15		12 <b>,</b> 950.	
see instructions.	13	Gubtiact line 14 HOITI line 11. II Zel	0 01 1653	5, GIRGI -0 IIIIS IS Y	our <b>t</b> i	avanie ilicoli			15		76,179.	

Tax and Credits	16 17 18	<b>Tax</b> (see instructions). Check Amount from Schedule 2, lin	•	• • —	· <del></del>				12,376.
Credits	18		- 0						
			es					. 17	
	40	Add lines 16 and 17						. 18	12,376.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			. 19	
	20	Amount from Schedule 3, lin	e8					. 20	
	21	Add lines 19 and 20						. 21	
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				. 22	12,376.
	23	Other taxes, including self-er	mployment tax,	from Schedule	e 2, line 21 .			. 23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					. 24	12,376.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				25a	12,97	79.	
	b	Form(s) 1099				25b			
	С	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	,					. 25d	12,979.
	26	2022 estimated tax payment							,
If you have a ualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit				29			
	30	Reserved for future use .		•		30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31.	. 32						
	33	Add lines 25d, 26, and 32. The state of the		12,979.					
	34	If line 33 is more than line 24							603.
Refund	35a	Amount of line 34 you want				•			603.
Direct deposit?	b	Routing number 2 7 2					_		000:
See instructions.	d								
	36	Amount of line 34 you want a							
Amount		· · · · · · · · · · · · · · · · · · ·	• • •			36			
Amount You Owe	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .  For details on how to pay, go to www.irs.gov/Payments or see instructions							
Tou Owe	38	Estimated tax penalty (see instructions)							
Third Davis									
Third Party Designee		you want to allow another tructions	•				s. Compl	ete below.	× No
Designee		signee's		Phone				dentification	<del>_</del>
	nan			no.			number (P		
Sign	Und	der penalties of perjury, I declare the	hat I have examine	ed this return and	d accompanying sc	nedules and sta	itements, a	nd to the be	st of my knowledge an
Here	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							which prepar	rer has any knowledge.
Here	You								ent you an Identity
							Protection F (see inst.)	PIN, enter it here	
Joint return? See instructions.		supply signature. If a joint vature h	ADDOCTATE INCOECT ENGINEE .						
Keep a copy for	Spo	ouse's signature. If a joint return, b	otn must sign.						ent your spouse an tection PIN, enter it her
your records.							(see inst.)		
	Pho	one no. (906) 370-8562	2	Email address	MJAGTAP@M	TU.EDU			
	Pre	parer's name	Preparer's signat	ure		Date	PTII	V	Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALIAN	1 04/14/20	)23 P02	2082703	Self-employed
Preparer		n's name GLOBAL TAX				1, -,, 2			(678) 965-9522
Use Only		n's address 245 ROONE		NSWICK N	J 08816			Firm's EIN	84-3171965
Go to warm in an		11040 for instructions and the lates		22011	BAA	REV 03/22/23		5 =•	Form <b>1040</b> (2022