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.

Submission Identification Number (SID)

Taxpay	ver's name	Social security number	
BLA	NCA RAMIREZ	460-83-0828	
Spouse	s's name	Spouse's social security number	_
Par	t I Tax Return Information – Tax Year Ending December 31, 2022 (Enter	er 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 92,617.	
2	Total tax	2 3,584.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 9,636.	
4	Amount you want refunded to you	4 6,052.	
5	Amount you owe		_

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. 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. 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 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.

Taxpay	er's PIN: che	eck one bo	x only								3		8	2	8		
X	I authorize GLOBAL TAXES LLC to enter or generate my PIN ERO firm name signature on the income tax return (original or amended) I am now authorizing.							Ent dor	my								
U Your sig	I will enter n	ny PIN as r	ny signat	ture on the ind	come tax return (origin eturn is filed using the	nal or amended)					ERC) mi	ust c	om	plete	e Par	
Spouse	's PIN: chec	k one box	only	\bigcirc									,,				
	l authorize					to enter or ge	enera	ate n	ny F	PIN						as r	ny
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										-							
	below.	itering you	rown Pi	in and your re	eturn is filed using the	Practitioner Pi		etho	a.	me	ERC	, mu	ISLC	;0111	piete	e Par	L 111
Spouse	's signature 🕨	•				Da	ate 🕨	•									
			Pra	ctitioner PIN	Method Returns O	nly—continue	bel	ow									
Part II	Certific	ation and	J Auther	ntication –	Practitioner PIN M	ethod Only											
ERO's I	EFIN/PIN. En	ter your six	<-digit EF	IN followed b	y your five-digit self-se	elected PIN.	2	2	2	4	9	6	3 1		8	9	

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										
Fee Demonstrale Deduction Act Nation	and the second second to a first second to a second		Farm 8870 (Day, 01 0001)							

For Paperwork Reduction Act Notice, see your tax return instructions. BAA Don't enter all zeros

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		, 20 2	2	OMB No. 1545	-0074	IRS Use Only	—Do not w	rite or staple in this space.
Filing Status Check only one box.	lf yo	u checked the MFS box, enter the na	ame of your	iling separately (N r spouse. If you ch	,			hold (HOH) box, enter th	spoi	lifying surviving use (QSS) name if the qualifying
Vour first some	· ·	on is a child but not your dependent							Vauraa	
Your first name	and m	ladie mitiai	Last name	-						cial security number
BLANCA		first name and middle initial	RAMIRE	Z						83-0828 s social security number
if joint return, sp	ouse s	s first name and middle initial	Last name						Spouse	s social security number
Home address	(numbe	er and street). If you have a P.O. box, see	instructions.				ļ	Apt. no.	Preside	ntial Election Campaigr
_15804 LA	NGSI	DALE ST								here if you, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete space	es below.	Sta	te	ZIP c	ode	•	if filing jointly, want \$3 this fund. Checking a
FRISCO					TΣ	ζ	750	36	0	ow will not change
Foreign country	name		Fore	ign province/state/c	coun	ty	Foreig	n postal code	your tax	or refund.
Divitel	At or	ny time during 2022, did you: (a) rece		word oword or	001/	nont for propo	rtu or	aariiaaa); ar		You Spouse
Digital Assets		ange, gift, or otherwise dispose of a	•		-			,	. ,	🗌 Yes 🛛 No
Standard	Som	eone can claim: 🗌 You as a de	pendent	Your spouse	e as	a dependent				
Deduction		Spouse itemizes on a separate return	n or you we	ere a dual-status a	alien	1				
Age/Blindness	You:	Were born before January 2, 1	958 🗌 A	re blind Spo	use	: 🗌 Was bor	n befo	ore January 2	2, 1958	Is blind
Dependents	•	,		(2) Social security		(3) Relationsh	ip (4		· ·	fies for (see instructions):
If more	(1) Fi	irst name Last name		number		to you		Child tax c	redit	Credit for other dependents
than four dependents,										
see instructions	;									
and check										
here										
Income	1a	Total amount from Form(s) W-2, be		,						,
Attach Form(s)	b	Household employee wages not re					• •		. 1b	
W-2 here. Also	C d	Tip income not reported on line 1a					• •		. <u>1c</u> . 1d	
attach Forms W-2G and	d e	Medicaid waiver payments not rep Taxable dependent care benefits f					• •		. 1e	
1099-R if tax	f	Employer-provided adoption bene					• •		. 1f	
was withheld.		Wages from Form 8919, line 6 .					• •		. 1g	
If you did not get a Form	g h	Other earned income (see instructi					• •		· <u> </u>	-
W-2, see	i	Nontaxable combat pay election (s	,		•	· · · · ·	· ·			0.
instructions.	z	Add lines to through th		,	•	11			. 1z	90,029.
Attach Sch. B	2a	· · · · · · · · · · · · · · · · · · ·	2a		ьт	axable interest			. 12	
if required.	3a		3a			Ordinary divider			. 25	
	4a		4a			axable amount			. 4b	
Standard	5a		5a			axable amount			. 5b	
Deduction for-	6a		6a			axable amount			. 6b	
 Single or Married filing 	c	If you elect to use the lump-sum el						· · · Γ		
separately,	7	Capital gain or (loss). Attach Schee						· · · [7	
\$12,950Married filing	8	Other income from Schedule 1, line							. 8	
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							. 9	92,617.
Qualifying spouse,	10	Adjustments to income from Sche		-					. 10	
\$25,900 • Head of	11	Subtract line 10 from line 9. This is							. 11	
household,	12	Standard deduction or itemized	-						. 12	
\$19,400 • If you checked	13	Qualified business income deducti				5-A .			. 13	
any box under	14	Add lines 12 and 13							. 14	
Standard Deduction,	15	Subtract line 14 from line 11. If zer					e		. 15	
see instructions.										51,500.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)									Pa	ge 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3			16	3 , 584	
Credits	17	Amount from Schedule 2, lir	ne3						17		
	18	Add lines 16 and 17							18	3,584	ι.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812				19		
	20	Amount from Schedule 3, lir	ne8						20		
	21	Add lines 19 and 20							21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	3,584	ι.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21				23	().
	24	Add lines 22 and 23. This is	your total tax						24	3,584	Ι.
Payments	25	Federal income tax withheld									
	а	Form(s) W-2				25a	9,	636.			
	b	Form(s) 1099				25b					
	с	Other forms (see instruction	s)			25c					
	d	Add lines 25a through 25c	<i>.</i>						25d	9,636	s.
	26	2022 estimated tax payment							26		
If you have a qualifying 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, lir				31					
	32	Add lines 27, 28, 29, and 31					credits		32		
	33	Add lines 25d, 26, and 32. T			-				33	9,636	5.
Defined	34	If line 33 is more than line 24							34	6,052	
Refund	35a	Amount of line 34 you want	-				-	. 🗆	35a	6,052	
Direct deposit?	b	Routing number 2 5 6				Checki		avings			
See instructions.		Account number 7 1 1									
	36	Amount of line 34 you want			ed tax	36	-				
Amount	37	Subtract line 33 from line 24				1					
You Owe	07	For details on how to pay, g							37		
	38	Estimated tax penalty (see in				38					
Third Party		you want to allow another	,								
Designee		structions					Yes. Cor	nplete b	elow.	× No	
Ū	De	signee's		Phone				nal identifi	cation		
	nai	ne		no.			numbe	er (PIN)			
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com									
Here		, , , ,	ipiete. Declaration (ased on a	Information			,	je.
	Yo	ur signature		Date	Your occupation					nt you an Identity IN, enter it here	
Joint return?					ELECTRIFICA	TION H	ENGINEER				
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupati		-	If the		nt your spouse an	
Keep a copy for your records.										ection PIN, enter it	here
your records.								(see i	nst.)		
		one no. (469) 535-026		Email address	BLANCARAMIREZGA						
Paid		eparer's name	Preparer's signat			Date		PTIN		Check if:	
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	04/18	3/2023 E	202082	2703	Self-employe	d
Use Only	Fin	m's name GLOBAL TA						Phon	eno. (678)965-95	22
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816			Firm's	s EIN	84-31719	55
Go to www.irc.a	ov/Form	n1040 for instructions and the late	et information		DAA					Earm 1040 (

Go to www.irs.gov/Form1040 for instructions and the latest information.

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Form **1040** (2022)

SCHEI	DULE	A
(Form	1040)	

Itemized Deductions

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

Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074 2

Department of the Treasury Internal Revenue Service Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Attachment Sequence No. 07

Name(s) shown on	Form	1040 or 1040-SR			Υοι	ır so	cial security number
BLANCA RAI	MIR	EZ			46	0-8	83-0828
Medical and Dental Expenses	2 3	Caution: Do not include expenses reimbursed or paid by others. Medical and dental expenses (see instructions) Enter amount from Form 1040 or 1040-SR, line 11 Multiply line 2 by 7.5% (0.075) Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	1			4	
Taxes You		State and local taxes.			·		
Paid	a t c	A State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box	5a 5b 5c 5d	91 4,00 4,91	5.		
	e	Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)	5e	4,91	<u> </u>		
	6	Other taxes. List type and amount:		4,91	<u> </u>		
			6				
	7	Add lines 5e and 6	<u> </u>			7	4,919.
Interest You Paid Caution: Your mortgage interest deduction may be limited. See instructions.	2 k 0 0 9	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box	8a 8b 8c 8d 8e 9	55,81	8.	10	55,818.
Gifts to		Add lines 8e and 9			·	10	
Charity Caution: If you made a gift and got a benefit for it, see instructions.	12 13	instructions	11 12 13	300		14	300.
Casualty and Theft Losses	15	Casualty and theft loss(es) from a federally declared disaster (othe disaster losses). Attach Form 4684 and enter the amount from line 1 instructions	r tha 8 of 	n net qualifie that form. Se	ed ee	15	
Other Itemized Deductions	16	Other-from list in instructions. List type and amount:				16	
Total Itemized Deductions		Add the amounts in the far right column for lines 4 through 16. Also, e Form 1040 or 1040-SR, line 12	 stand	lard deduction		17	61,037.
		check this box		••••			

For Paperwork Reduction Act Notice, see the Instructions for Form 1040.

Schedule A (Form 1040) 2022

SCHEDULE B (Form 1040)

Department of the Treasury Internal Revenue Service

Interest and Ordinary Dividends

Go to www.irs.gov/ScheduleB for instructions and the latest information. Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074 20 Attachment Sequence No. 08

Name(s) shown on r	return		Your	social securi	ty numl	ber			
BLANCA RAM	IIREZ		460)-83-082	8				
Part I Interest	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:		Am	ount				
(See instructions and the Instructions for Form 1040,		DISCOVER BANK			2,5	88.			
line 2b.) Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.			1						
	2 3 4	Add the amounts on line 1 .<	2 3 4		2,5				
	Note:	If line 4 is over \$1,500, you must complete Part III.		Am	ount				
Part II	5	List name of payer:							
Ordinary Dividends (See instructions and the Instructions for Form 1040, line 3b.)			5						
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6						
on that form.	Note:	If line 6 is over \$1,500, you must complete Part III.							
Part III Foreign Accounts		nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary div nt; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreigr							
Accounts and Trusts Caution: If required, failure to file FinCEN Form	1 d	At any time during 2022, did you have a financial interest in or signature authority of account (such as a bank account, securities account, or brokerage account) locat country? See instructions	ed in 	a foreign	Yes	No X			
114 may result in substantial penalties. Additionally, you may be required	b	If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See FinC and its instructions for filing requirements and exceptions to those requirements . If you are required to file FinCEN Form 114, list the name(s) of the foreign country(CEN F	Form 114					
to file Form 8938, Statement of Specified Foreign Financial Assets. 8 financial account(s) are located: During 2022, did you receive a distribution from, or were you the grantor of, or transferor to, a									

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

foreign trust? If "Yes," you may have to file Form 3520. See instructions .

See instructions.

. . . . Schedule B (Form 1040) 2022

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