## 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	ission Identification Number (SID)						
Taxpay	er's name	Social security number					
FAI	YAZ MOHAMMED	630-19	630-19-2826				
Spouse	's name	Spouse's social security number					
ASM	A SYED	961-98-7726					
Part		year you a	re aut	thorizing.)			
	whole dollars only on lines 1 through 5.						
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1	12,	240.		
2	Total tax		2		0.		
3 4	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		962.		
5	Amount you owe		5	⊥,	962.		
Part		een a con	- 1	our retur	<u>n)</u>		
my knownest return to send for any Agent payme authoring taxes in person Electro	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above (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 reject 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 indicent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution into finiting to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the I. I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises 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 properties of the payment (PIN) below is my signature for the income tax return (original or amended) I aminic Funds Withdrawal Consent.  **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.  I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing.  Date **Deate**  *	e are the ameter, or electroction of the treatment of the treatment of the treatment of the treatment of the authorizated in the treatment of the treatment	ounts find out of the control of the	rom the incourn originato ssion, (b) the designated Fi baration softwork to this accourd or evoke (caved no later ectronic paying knowledge that, if application applications of the course of the cou	ome tax or (ERO) reason inancial vare for int. This anncel) a than 2 ment of that the ble, my as my		
· -	se's PIN: check one box only	<b>-</b>					
×	J lauthorize GLOBAL TAXES LLC to enter or generate r	_			as my		
	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 if you are entering your own PIN and your return is filed using the Practitioner PIN method below.	do ow authorizi	n't ente ng. Ch		_		
Spous	se's signature ▶ Date ▶						
Do-t	Practitioner PIN Method Returns Only—continue below						
Part	Certification and Authentication — Practitioner PIN Method Only						
ERO's	<b>S EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't ent	6 6 er all ze	1 9 8 eros	9		
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual income ta zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submisments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of In	tting this retu	ırn in a	accordance v	am now with the		

ERO's signature ▶

ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

Date ▶

## E 1040 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 🗌 S	Single X Married filing jointly	Marrie	ed filing separately	(MFS)	Head of	household	(HOH)	Qu		g surviv	ing	
Check only	lf vo	u checked the MFS box, enter the n	omo of v	our angues. If you	obook	od tha U∩U a	OSS hav	ontor t		ouse (C		au alifyina	
one box.	-	son is a child but not your dependent	-	rour spouse. If you	CHECK	eu lile non oi	QSS DUX	, enter t	ne crilia	5 Halli	e II lile	qualifyirig	
Vour first name			Last nai	me .					Vours	ocial s	ocurity	number	
									Your social security number				
FAIYAZ MOHAI  If joint return, spouse's first name and middle initial Last name.									630-19-2826  Spouse's social security number			ritu numbor	
•	pouse s	s instructive and middle mittal							1			ity number	
ASMA	/numbe	er and street). If you have a P.O. box, see	SYED				Ant r		961-98-7726			<u> </u>	
	,		ristructio	ons.						Presidential Election Campaign			
		LVD, UNIT #54		anaga halaw Chata 70			710	er			Check here if you, or your spouse if filing jointly, want \$3		
		ce. If you have a foreign address, also co	ompiete s				ZIP code	_ to			fund. Ch	hecking a	
SAN ANTO			-	TX Foreign province/state/county			<del>                                     </del>		7		ill not ch	nange	
Foreign country name			Foreign province/state/			county		oreign postal code yo		your tax or refund.  You Spouse			
											Tou [	spouse	
Digital		ny time during 2022, did you: (a) rec	•				•	,	. ,		V 1	<b>▽</b> N -	
Assets		ange, gift, or otherwise dispose of a					asset)? (S	ee instr	uctions.	) ⊔	Yes	⊠ No	
Standard	_	eone can claim: You as a de		•		a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien								
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Sp	ouse	Was bo	rn before c	lanuary	2, 1958		Is bline	d	
Dependents	s (see	instructions):		(2) Social securi	tv	(3) Relationsh	nip (4) Ch	eck the l	ox if qua	lifies fo	r (see in	structions):	
If more		(1) First name Last name		number		to you		Child tax cre		Credit	for other	r dependents	
than four													
dependents,													
see instruction: and check	s —												
here $\square$													
Incomo	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .	<del></del>				. 1	a	12	2,240.	
Income	b	Household employee wages not re	`	,					. 1	b			
Attach Form(s)	С	Tip income not reported on line 1a (see instructions)								С			
W-2 here. Also attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								d			
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26								e			
1099-R if tax	f	Employer-provided adoption benefits from Form 8839, line 29								f			
was withheld.	g	Wages from Form 8919, line 6								g			
If you did not get a Form	9 h	,							. 1			0.	
W-2, see		Other earned income (see instructions)											
instructions.	z	Add lines 1a through 1h	300 11130	dotions)					1	z	10	2,240.	
Attach Sch. B	2a		2a		 b Та	axable interes	+		. 2			.,210.	
if required.	3a	· –	3a			rdinary divide							
	4a		4a			axable amoun			. 4				
Manual and			5a			axable amoun			_				
Standard Deduction for —	5a		6a			axable amoun axable amoun			. 6				
Single or	6a	,		mathad abaal bare			t			D			
Married filing separately,	C 7	If you elect to use the lump-sum election method, check here (see instructions)								,			
\$12,950	7												
Married filing jointly or	8	Other income from Schedule 1, line 10								3	1 0	240	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>								9		2,240.	
\$25,900	10	Adjustments to income from Schedule 1, line 26								0			
Head of household,	11	Subtract line 10 from line 9. This is	-	-					. 1			2,240.	
\$19,400	12	Standard deduction or itemized deductions (from Schedule A)								2	25	5,900.	
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A								3			
Standard Deduction,	14	Add lines 12 and 13							. 1		25	<u>,900.</u>	
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>							. 1	5		0.	

Form 1040 (2022	2)								Page <b>2</b>		
Tax and	16	Tax (see instructions). Check if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			16	0.		
Credits	17	Amount from Schedule 2, line 3						17			
	18	Add lines 16 and 17						18	0.		
	19	Child tax credit or credit for other dependent	ts from Sched	ule 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,						22	0.		
	23	Other taxes, including self-employment tax,						23	0.		
	24	Add lines 22 and 23. This is your <b>total tax</b>						24	0.		
Payments	25	Federal income tax withheld from:									
aymonto	а	Form(s) W-2			25a	1	,962				
	b	Form(s) 1099			25b		,				
	c	Other forms (see instructions)			25c						
	d	Add lines 25a through 25c						25d	1,962.		
	26	2022 estimated tax payments and amount a						26	1,302.		
you have a lualifying child,	27	Earned income credit (EIC)			27			20			
tach Sch. EIC.	28	Additional child tax credit from Schedule 8812			28			$\dashv$			
	29				29			-			
		American opportunity credit from Form 8863						_			
	30	Reserved for future use			30			-			
	31	Amount from Schedule 3, line 15			31						
	32	Add lines 27, 28, 29, and 31. These are your						32	1,962.		
	33	Add lines 25d, 26, and 32. These are your to						33			
Refund	34	If line 33 is more than line 24, subtract line 2			•	-		34	1,962.		
	35a	Amount of line 34 you want <b>refunded to you</b>							1,962.		
irect deposit? ee instructions.	b	Routing number 1 1 1 0 0 0 0 0		, , <u> </u>	Check	ing 📋 :	Savings	;			
	d	Account number 4 8 8 1 1 4 3									
	36	Amount of line 34 you want applied to your	2023 estimate	ed tax	36						
Amount	37	Subtract line 33 from line 24. This is the amo	•								
ou Owe		For details on how to pay, go to www.irs.gov	=		1 1			37			
	38	Estimated tax penalty (see instructions) .			38						
hird Party		you want to allow another person to disc	cuss this retu	rn with the IRS?	See						
Designee		instructions									
		Designee's Phone Personal ider name no. Personal ider									
N:		der penalties of perjury, I declare that I have examine		d accompanying ech	nodulos o		, ,	to the box	et of my knowledge and		
Sign		ef, they are true, correct, and complete. Declaration									
Here	You	ır signature	Date	Your occupation			If ti	ne IRS se	nt you an Identity		
							Pro	tection P	IN, enter it here		
oint return?			SENIOR TECH LEAD AT HCL			IT (se	e inst.)				
ee instructions.	Spo	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat	tion				nt your spouse an		
eep a copy for our records.			GO PERLADE					ntity Prot e inst.)	ection PIN, enter it here		
	JOI I WINCE						e 1113t.)				
		one no. (210) 803-7828	Email address	FAIYAZ.MHI		AIL.COM			Chook it.		
Paid		parer's name Preparer's signat			Date		PTIN	20000	Check if:		
-	SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/07/2023 P0208								Self-employed		
reparer									Phone no. (678) 965-9522 Firm's EIN 84-3171965		
Preparer Use Only	Firr	n's name GLOBAL TAXES LLC n's address 245 ROONEY CT E BRU									