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

Submi	ssion Identification Number (SID)											
Taxpayer's name Social secur						rity number						
VINAY RUDRANGI 82					825-61-5176							
Spouse'	s name	Spouse	's so	cial security number								
SHRU	JTI RAVISHANKAR BUREWAR	APP	LIE	D FC	O FOR							
Part	are au	thor	izing.)								
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			,202.							
2	Total tax	2	2 10,6 3 15,5									
	 Federal income tax withheld from Form(s) W-2 and Form(s) 1099											
4	4 4,880											
5 Doub	_	5										
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and keep penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)											
to send for any Agent t paymer authoriz paymer busines taxes to persona	original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejecteday in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated for my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised as a square to the payment (settlement) date. I also authorize the financial institutions involved in the payment cancellation necessary to answer inquiries and resolve issues related to the pay identification number (PIN) below is my signature for the income tax return (original or amended) I are financial formation in the payment (PIN) below is my signature for the income tax return (original or amended) I are Funds Withdrawal Consent.	ction of S. Treas cated in n to deb the aut lests mu process ayment.	the to the	ransminand its cax preduced entry cation. The recent of the eather actions and the eather actions are called the eather actions.	ssion desig parati to thi To re ived i lectro cknov	, (b) the nated on soft sacconvoke (contraction) and the particular particu	e reason Financial tware for bunt. This cancel) a er than 2 yment of that the					
	yer's PIN: check one box only					\Box						
×		nv PIN		5	1 7	6	as my					
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	,		nter five on't ent			,					
	I will enter my PIN as my signature on the income tax return (original or amended) I am notify you are entering your own PIN and your return is filed using the Practitioner PIN methology.											
Your s	ignature ▶ Date ▶											
Spaul	o's DIN, shock one hay only											
· —	e's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate I	mı DINI					00 1001					
×	I authorize GLOBAL TAXES LLC to enter or generate I	ny Pin	E	ter five	digits	but	as my					
	signature on the income tax return (original or amended) I am now authorizing.			n't ent								
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN and your return is filed using the Practitioner PIN methology.											
Spous	e'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 Dor	9 n't en	6 6 ter all z	1 eros	9 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 <i>e-file</i> Providers of Individual Income Tax Returns.												
ERO's	signature ▶ Date ▶											
	FRO Must Retain This Form — See Instructions											

Don't Submit This Form to the IRS Unless Requested To Do So

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

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 separately	(MFS)	Head of	househ	old (HOI	H)		, ,	surviv	ing
Check only one box.	If vo	u checked the MFS box, enter the n	name of w	your engues. If you	chook	od tha ∐∩∐ ar	r 000 l	oov onto	or the	•	ıse (Q	,	auglifyina
one box.		on is a child but not your dependen		our spouse. If you	CHECK	ed the HOH of	I QOO I	JOX, EIII	SI LIIK	e Cillia S	паппе	II LIIE	qualifying
Your first name and middle initial Last name							Your social security number						
VINAY								825-61-5176					
	s first name and middle initial	RANGI ame					Spouse's social security number						
	'									APPLIED FOR			
									Presidential Election Campaign				
								Check here if you, or your					
		CREEK ce. If you have a foreign address, also co	nmnlete sr	naces helow	Sta	te	ZIP co	nde.					, want \$3
PLANO	ost om	oc. If you have a foreign address, also oc	omplete of	•			750			to go to this fund. Checking a box below will not change			
Foreign country						n postal c	nde	your tax			nange		
r oreign country					loroigi	g p ,			You Spouse				
Dimital	۸+ or	ov time during 2022, did your (a) rea	voivo (oo	o roward award a	N DOV (D	ant for propo	rty or o	on iooo	. 0.	(b) coll			
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a									ПΥ	es	X No
		eone can claim: You as a de					abbotij	(000111	otra	3110110.)			
Standard Deduction		Spouse itemizes on a separate retur	•			а перепает							
Deddellon			iii oi you		3 alleri								
Age/Blindness	You:	Were born before January 2, 1	1958	Are blind S	pouse	: Was bor						s blind	
Dependents	s (see	instructions):		(2) Social secur	ity	(3) Relationsh	nip (4)	Check tl	ne bo	x if qualif	ies for	(see ins	structions):
If more	(1) Fi	rst name Last name		number		to you		Child tax ci		edit	Credit for	or other	r dependents
than four								[<u> </u>
dependents, see instructions	s —							[<u> </u>
and check													<u> </u>
here													<u> </u>
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .						1a		114	1,202.
	b	Household employee wages not reported on Form(s) W-2								1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)								1c			
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26								1e			
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29								1f			
If you did not	g	Wages from Form 8919, line 6								1g			
get a Form W-2, see	h	Other earned income (see instructions)							1h			0.	
instructions.	i	Nontaxable combat pay election (see instr	uctions)		<u>li</u>	i						
	Z	Add lines 1a through 1h								1z		_114	1,202.
Attach Sch. B	2a	Tax-exempt interest	2a			axable interest				2b			
if required.	3a		3a			rdinary divide				3b			
	4a		4a			axable amoun				4b			
Standard Deduction for—	5a	_	5a			axable amoun				5b			
Single or	6a	, _	6a			axable amoun	ıt		٠ _	6b			
Married filing separately,	С	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								J <u>7</u>			
Married filing jointly or	8	Other income from Schedule 1, line 10							8				
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9	_	114	1,202.	
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26								10	+		
Head of household,	11	Subtract line 10 from line 9. This is your adjusted gross income								11	_		1,202.
\$19,400	12	Standard deduction or itemized deductions (from Schedule A)							12		25	5,900.	
If you checked any box under	13	Qualified business income deduction from Form 8995 or Form 8995-A								13			
Standard	14	Add lines 12 and 13								14			5,900.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15		88	3,302.

Form 1040 (2022	2)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	10,666.	
Credits	17	Amount from Schedule 2, lir	ne 3					17		
	18	Add lines 16 and 17		18	10,666.					
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lir	ne 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	10,666.	
	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 total tax					24	10,666.	
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25a 1.	5,546.			
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	15,546.	
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	121 return			26		
qualifying child,	27	Earned income credit (EIC)				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. T	hese are your to	tal payments				33	15,546.	
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	4,880.	
	35a								4,880.	
Direct deposit?	b	Routing number 0 7 1			c Type: 🛛	Checking	Savings			
See instructions.	d	Account number 6 5 9	3 7 9 2	1 5						
	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 For details on how to pay, g						37		
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party		you want to allow another	•							
Designee	ins	structions					•		X No	
		signee's me	Phone no.		sonal identi ber (PIN)	Il identification (PIN)				
Sign		der penalties of perjury, I declare t								
Here		ur signature	,p. 6. 6. 7. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.	Date	Your occupation				nt vou an Identity	
	10	ui signature	Date	Tour occupation				IN, enter it here		
Joint return?			JAVA FULL STACK DEVELOPE				(see inst.)			
See instructions. Keep a copy for	Spouse's signature. If a joint return, both must sign.			Date	ion			e IRS sent your spouse an tity Protection PIN, enter it here		
your records.					HOME MAKE	(see	inst.)			
		one no.		Email address	VINAYRUDRAN	GI21@GMAIL.C	OM			
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/20/2023	P0208	2703	Self-employed	
Use Only	Fir	m's name GLOBAL TA	XES LLC				Phor	ne no. (678)965-9522	
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm	s EIN	84-3171965	