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	yer's name	Social securi	ty number		
ATE	EEV GOYAL	664-85	-3307		
Spouse	e's name	Spouse's soo	pouse's social security number		
Par	Tax Return Information — Tax Year Ending December 31, 2022 (En	nter year you a	re authorizir	ng.)	
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 1	56,654.	
2	Total tax		2	5,237.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	9,970.	
4	Amount you want refunded to you		4	4,733.	
5	Amount you owe		5		
Par	t II Taxpayer Declaration and Signature Authorization (Be sure you get an	nd keep a cop	y of your re	turn)	
return to sen for an Agent payme author payme busine taxes persor Electro	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I at original or amended) I am now authorizing. I consent to allow my intermediate service provider, trained my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for y delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account ent 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 terminent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation ess days prior to the payment (settlement) date. I also authorize the financial institutions involved in to receive confidential information necessary to answer inquiries and resolve issues related to the nalidentification number (PIN) below is my signature for the income tax return (original or amended onic Funds Withdrawal Consent.	nsmitter, or electron rejection of the trace U.S. Treasury and indicated in the trace that the trace the authorization to dept the requests must be the processing of the payment. I further respectively.	onic return original return original return original return of the designation of the return of the received not the electronic or the recknowled received not the electronic or the recknowled recknowled return or the return or	inator (ERO) the reason ed Financial software for count. This e (cancel) a later than 2 payment of lige that the	
Taxp	ayer's PIN: check one box only	5	3 3 0 7	7	
	X I authorize GLOBAL TAXES LLC to enter or general ERO firm name	ate my PIN L	3 3 0 7 ter five digits, bun't enter all zero		
	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 aif you are entering your own PIN and your return is filed using the Practitioner PIN m below.				
Your	signature ATEEV GOYAL Date	3/30/20	23		
Spou	ise's PIN: check one box only				
Г	I authorize to enter or general	ate my PIN		as my	
	ERO firm name	_	ter five digits. bu		
	signature on the income tax return (original or amended) I am now authorizing.	do	n't enter all zero	s	
	I will enter my PIN as my signature on the income tax return (original or amended) I all if you are entering your own PIN and your return is filed using the Practitioner PIN m below.				
Spou	se's signature ▶ Date I	•			
	Practitioner PIN Method Returns Only—continue bel	low			
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. 5		2 3 1 9 er all zeros	8 9	
autho	fy that the above numeric entry is my PIN, which is my signature for the electronic individual incomprized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers	ubmitting this retu	ırn in accordar	nce with the	
FRO'	s signature ▶ Date I	•			
	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 separately	y (MFS)	☐ Head of	household (HOH)		lifying su use (QSS		
Check only one box.	•	u checked the MFS box, enter the nonis a child but not your dependen	,	our spouse. If you	u check	ed the HOH or	QSS box, enter th		•	,	lifying
Your first name	and mi	ddle initial	Last nar	me				Your so	cial secu	rity numl	ber
ATEEV			GOYA	L				664-85-3307			
If joint return, s	pouse's	first name and middle initial	Last nar					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 Elec	tion Carr	npaign
7700 WI	LLOW	CHASE BLVD					1621	1	heck here if you, or your		
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete spaces below. State Z			ZIP code	spouse if filing jointly, want \$3 to go to this fund. Checking a				
HOUSTON					T	ζ	77070	box bel	box below will not change		
Foreign countr	y name		F	Foreign province/sta	ite/count	ty	Foreign postal code	your tax	tax or refund. You Spouse		
 Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward, award,	or payr	nent for prope	rty or services); or	(b) sell,			
Assets	exch	ange, gift, or otherwise dispose of	a digital a	asset (or a financ	al intere	est in a digital	asset)? (See instru	uctions.)	Yes	× ⊠ N	10
Standard Deduction		eone can claim:	•	•		a dependent					
Age/Blindnes	s You:	☐ Were born before January 2, 1	958	Are blind	Spouse	: Was bor	n before January	2, 1958	_ ls	blind	
Dependent	s (see	instructions):		(2) Social secu	ırity	(3) Relationsh	ip (4) Check the b	ox if quali	fies for (se	e instruc	tions):
If more	(1) Fi	rst name Last name		number		to you	Child tax c	redit	Credit for	other depe	endents
than four											
dependents, see instruction	s ——										
and check	·										
here]										
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .				. 1a		62,4	04.
	b	Household employee wages not r		, ,				. 1b			
Attach Form(s) W-2 here. Also	С	c 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	,									
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	` '									0.
instructions.	i	Nontaxable combat pay election (see instr	fuctions)		<u>li</u>				CO 1	0.4
	<u>z</u>	Add lines 1a through 1h						. 1z		62,4	04.
Attach Sch. B if required.	2a	Tax-exempt interest	2a			axable interes		. 2b			
	3a	Qualified dividends	3a			ordinary divide axable amoun		. 3b			
24	4a 5a		4a 5a			axable amoun		. 5b			
Standard Deduction for—	6a		6a			axable amoun		. 6b			
Single or Married filing	C	-	_	method check he				. 05			
separately,	7	If you elect to use the lump-sum election method, check here (see instructions) L Capital gain or (loss). Attach Schedule D if required. If not required, check here									
\$12,950 Married filing	8	Other income from Schedule 1, lir								-5, 7	50
jointly or	9	•						. 8		56,6	
Qualifying surviving spouse,	10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								<u> </u>	<u> </u>
\$25,900 • Head of	11	Subtract line 10 from line 9. This is						. 10		56,6	54.
household, \$19,400	12	Standard deduction or itemized	-					. 12		12,9	
If you checked	13	Qualified business income deduct		`	,			. 13		,	
any box under Standard	14									12,9	50.
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze								43,7	
220 111011101101101											

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	5,237.
Credits	17	Amount from Schedule 2, lir	-				[17	
0.000	18	Add lines 16 and 17					[18	5,237.
	19	Child tax credit or credit for	other dependen	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	I. If zero or less,	enter -0			[22	5,237.
	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	5,237.
Payments	25	Federal income tax withheld							<u> </u>
•	а	Form(s) W-2				25a 9	,970.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	9,970.
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	2		28			
	29	American opportunity credit	from Form 8863	3, 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 pa	ayments and refu	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	9,970.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	4,733.
riorana	35a	Amount of line 34 you want			is attached, che	ck here	. 🗆 📗	35a	4,733.
Direct deposit?	b	Routing number 1 1 1		2 5	c Type: 🛛	Checking S	Savings		
See instructions.	d	Account number 4 8 8	1 0 6	4 1 (6 1 2 3				
-	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 Designee		you want to allow another structions	•		rn with the IRS?		mplete be	low.	⊠ No
•		signee's		Phone			nal identific	ation	
		ne		no.			er (PIN)		
Sign Here		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							
11010	Yo	ur signature		Date	Your occupation				nt you an Identity
Joint return?	SOFTWARE DEVELOPER					DEVELOPER	(see in:		N, enter it here
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupation			RS ser	nt your spouse an
Keep a copy for your records.		,	, and the second				Identity (see in:	, ,	ection PIN, enter it here
	Ph	one no. (346) 818-776	0	Email address	GOYAL.ATE	EV@GMAIL.CO	М		
Paid	Pre	eparer's name	Preparer's signat	ture		Date	PTIN		Check if:
	SYAN	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/31/2023	P02082	703	Self-employed
Preparer Use Only	Fin	m's name GLOBAL TA	XES LLC				Phone	no. (678) 965-9522
————	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's	EIN	84-3171965
Go to www.irs.g	ov/Form	n1040 for instructions and the late	est information.		BAA	REV 03/22/23 PRO			Form 1040 (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

ATEEV GOYAL

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Attach to Form 1040, 1040-SR, or 1040-NR.

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

	Sequence No. 01
Your soc	ial security number
664-85	-3307

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		5	-5 , 750.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see	_		
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80	-	
р	Section 461(I) excess business loss adjustment	8p	-	
_	Taxable distributions from an ABLE account (see instructions)	8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()		
t				
	a nongovernmental section 457 plan	8t	-	
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	0-		
•	Total ather income. Add lines On three the On	8z		
9	Total other income. Add lines 8a through 8z		9	E 750
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR,	or 1040-INH, line 8	10	-5 , 750.

Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-base			
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903 .		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	1		
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit)		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses	i e		
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g	1		
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	1		
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
Z	Other adjustments. List type and amount:			
05	Tatal athous diseases and Add lines Of a three will Of		05	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . En		00	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. 13

Your social security number

ATE	EV GOYAL						664-8	5-3307		
Par	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	ty, use	Schedule							
	Did you make any payments in 2022 that would require you								s 🛚 No	
В	If "Yes," did you or will you file required Form(s) 1099? .							. <u> </u>	s 🗌 No	
1a	Physical address of each property (street, city, state, ZIF	ode	e)							
Α	H.N.O - 262, SECTOR - 51-A CHANDIGARH F	PUNJA	AB IN 3	160047	7					
В	,									
С										
1b	(from list below) above, report the number of fair	above, report the number of fair rental			Fair Rental Days		Personal Use Days		QJV	
Α	personal use days. Check the Q			Α		365		0		
В	if you meet the requirements to f qualified joint venture. See instru			В						
С	qualified joint venture. Occ institu	iotionic	,.	С						
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (desc				
						Properti	es:			
Incor				Α		В			С	
3	Rents received	3		4.	50.					
4 ====================================	Royalties received	4								
⊏xpe 5	nses:	5								
6	Advertising	6								
7	Cleaning and maintenance	7		6	50.					
8	Commissions	8		0.	30.					
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		9	50.					
12	Mortgage interest paid to banks, etc. (see instructions)	12			30.					
13	Other interest	13								
14	Repairs	14		1,8	00.					
15	Supplies	15		1,5						
16	Taxes	16		,						
17	Utilities	17		1,2	50.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		6,2	00.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21		-5, 7	50.					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(5 , 75	0.)()	(
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		450.			
b	Total of all amounts reported on line 4 for all royalty prop				23b					
С	Total of all amounts reported on line 12 for all properties			[23c					
d	Total of all amounts reported on line 18 for all properties			[23d					
е	Total of all amounts reported on line 20 for all properties				23e	6	,200.			
24	Income. Add positive amounts shown on line 21. Do no		-				. 24			
25	Losses. Add royalty losses from line 21 and rental real estat	te loss	es from li	ne 22. E	nter to	tal losses he	re 25	(5 , 750.	
26	Total rental real estate and royalty income or (loss). (here. If Parts II, III, IV, and line 40 on page 2 do not school to 1 (Form 1040) line 5. Otherwise, include this are	apply	to you,	also en	ter thi	s amount o	on		E 750	
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar	HOUNT	. m me to	iai on III	16 4 I (on page 2	. 26	1	-5,750.	