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

Submission Identification Number (SID)			
Taxpayer's name	Social security	number	
FNU SHAIK MOHAMMED ANWAR	489-77-		
Spouse's name		al security number	
RESHMI SHAIK	991-91-	8857	
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you ar	e authorizing.)	
Enter whole dollars only on lines 1 through 5.		<u> </u>	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1 Adjusted gross income			916.
2 Total tax			787.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			930.
4 Amount you want refunded to you			143.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)			
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejet for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indic payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requ business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment confidential information necessary to answer inquiries and resolve issues related to the payersonal identification number (PIN) below is my signature for the income tax return (original or amended) I an Electronic Funds Withdrawal Consent.	ction of the tra S. Treasury and sated in the tax in to debit the of the authorizatests must be processing of ayment. I furth	Insmission, (b) the dist designated Fix preparation softwentry to this accoution. To revoke (careceived no later the electronic payler acknowledge to the distribution of the color of the section of the color of the distribution of the color of the distribution of the distribution of the color of the distribution of the distr	e reason inancial ware for int. This ancel) a than 2 ment of that the
Taxpayer's PIN: check one box only			
▼ I authorize GLOBAL TAXES LLC to enter or generate n	nv PIN [7]	6 3 5 8	as my
ERO firm name	Ente	er five digits, but 't enter all zeros	,
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 no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.			
Your signature ▶ Date ▶			
Spouse's PIN: check one box only			
▼ I authorize GLOBAL TAXES LLC to enter or generate n ■ ERO firm name	, –		as my
signature on the income tax return (original or amended) I am now authorizing.		er five digits, but 't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.			
Spouse's signature ▶ Date ▶			
Practitioner PIN Method Returns Only—continue below			
Part III 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 4 9 6 Don't ente		1
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Indicated	tting this retur	n in accordance v	
ERO's signature ▶ Date ▶			
ERO 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



1040		artment of the Treasury-Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	uple in this spar	ce.
For the year Jai	the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 20						See separate instructions.			 3.				
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	urity numbe	er
FNU			SHAI	к мон	IAMMED A	NWZ	AR				489	77	6358	
	pouse'	s first name and middle initial	Last na			THE THOUSE					Spouse's social security number			mber
RESHMI			SHAI	K					991 91 8857					
	(numb	er and street). If you have a P.O. box, see						A	pt. no.					aign
8201 MEI	MORT	AT, TANE									Check h	nere if y	ou, or your	Ŭ
		ice. If you have a foreign address, also co	mplete s	paces bel	low.	Sta	te				•	•		
PLANO						TX	ζ	750	2.4		•			g a
Foreign countr	y name		F	oreign pr	rovince/state/								•	
											-	Yo	u 🗌 Spo	ouse
Filing Status	s [Single					☐ Head of h	ouseh	old (HOI	 				
Check only		Married filing jointly (even if only o	ne had i	ncome)					•	,				
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spoi	use (0	QSS)			
	If	you checked the MFS box, enter the	name c	of your sp	oouse. If you	ı che	cked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	
		ıalifying person is a child but not you												
Distribut	Λ+ o	ny timo during 2022, did you: (a) roo	oivo (oc	o roware										
Digital Assets		nange, or otherwise dispose of a dig										ΠYε	es 🛛 No	,
		neone can claim: You as a de					a dependent	.,,,	20 111311 0	Otion	J.,		.5	
Standard Deduction	_	Spouse itemizes on a separate retur	•		•		•							
Deddollon			11 O1 you	-	duai Status	ancii		your social security number 489 77 6358 Spouse's social security number 991 91 8857 Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. You Spouse instructions.) Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. You Spouse household (HOH) In g surviving spouse (QSS) OH or QSS box, enter the child's name if the Poerty or services); or (b) sell, set)? (See instructions.) Child tax credit Credit for other dependents 1						
Age/Blindnes	s You	: Were born before January 2, 1	959 _	_ Are bl	ind Sp	ouse	: U Was bor							
Dependent	s (see	instructions):		(2) S	Social security	,	(3) Relationsh	ip (4	-					
If more	(1) F	(1) First name Last name			number to you				Child t	ax cre	edit	Credit fo	r other depend	dents
than four													_ <u>_</u>	wr ant \$3 king a ge Spouse No Ctions): bendents 312.
dependents, see instruction	s													
and check _	· —												ᆜ	
here L														
Income	1a	Total amount from Form(s) W-2, b	`		,								126,81	<u>2.</u>
Attach Form(s)	b	Household employee wages not re	•		. ,									
W-2 here. Also	С	Tip income not reported on line 1a	•		•									
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	ctions)							
1099-R if tax	е	Taxable dependent care benefits f				-						_		
was withheld.	f	Employer-provided adoption bene	fits from	n Form 8	839, line 29									f the Spouse Spouse f the Spouse Spou
If you did not get a Form	g	Wages from Form 8919, line 6 .												
W-2, see	h	Other earned income (see instruct	,					· ·			1h			0.
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)			<u>l 1i</u>						106 01	^
		Add lines 1a through 1h			· · i							_	120,81	∠ •
Attach Sch. B	2a		2a				axable interest					_		
if required.	3a		3a				-					_		
Standard	4a		4a									_		
Deduction for—	5a	-	5a				axable amoun					_		
Single or Married filing	6a	,	6a				axable amoun	t		٠ -	6b			
separately,	_ c	If you elect to use the lump-sum e				`	,							
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche								. L		+	12.00	
jointly or Qualifying	8	Additional income from Schedule									<u> </u>			
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•								+	112 , 91	ο.
\$27,700 • Head of	10	Adjustments to income from Sche									—		110 00	
household, \$20,800	11	Subtract line 10 from line 9. This is	•	-	-									
If you checked	12	Standard deduction or itemized											<u>27,70</u>	υ.
any box under Standard	13	Qualified business income deducti											07.77	
Deduction, see instructions.	14	Add lines 12 and 13												
	15	SUPERGOT UPO 1/1 trom lino 11 lt zor	O Or lee	CONTOR	II INICICA	OUR !	avania incom				1 4 5		×5 7	^

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	9,787.	
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	9,787.	
	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	9,787.	
	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 total tax					24	9,787.	
Payments	25	Federal income tax withheld	from:							
	а	Form(s) W-2				25a 19	,930.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	19,930.	
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20)22 return			26		
qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	e 15			31				
	32	Add lines 27, 28, 29, and 31.	. These are your	total other pa	ayments and refu	ndable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	19,930.	
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amour	t you overpaid		34	10,143.	
	35a	Amount of line 34 you want			3 is attached, chec	k here		35a	10,143.	
Direct deposit?	b	Routing number 0 4 3			c Type: 🛛	Checking	Savings			
See instructions.	d	Account number 6 0 1	0 8 3 3	0 6 2						
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24. For details on how to pay, go						37		
rou owe	38	Estimated tax penalty (see in	=	-		38		31		
Third Party		you want to allow another								
Designee		•	•				omplete	below.	⊠ No	
gc	De	signee's		Phone		Pers	onal ident	tification		
		me		no.			ber (PIN)			
Sign		der penalties of perjury, I declare th lief, they are true, correct, and com								
Here	Yo	ur signature		Date Your occupation				e IRS se	nt you an Identity	
		.							IN, enter it here	
Joint return?					SOFTWARE D	EVELOPER	OPER (see i			
See instructions. Keep a copy for your records.		Spouse's signature. If a joint return, both must sign.		Date Spouse's occupation HOME MAKER				If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	——Ph	one no. (814) 384-5763	3	Email address	ANWAR.EF42		1			
		eparer's name	Preparer's signat		111111111111111111111111111111111111111	Date Date	PTIN		Check if:	
Paid		' PRIYA RAM SAGAR GUPTA TALLAM			GUPTA TALLAM	01/22/2024	P0208	32703	Self-employed	
Preparer		m's name GLOBAL TAX				1 , , , , , , ,		one no. (678) 965-9522		
Use Only		m's address 245 ROONE		NSWICK N	J 08816			n's EIN	84-3171965	
		10101		22011 11			(4040	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

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.

Attachment Sequence No. 01 Your social security number

FNU	SHAIK MOHAMMED ANWAR & RESHMI SHAIK		489-77-	63	58
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes		1		
2a	Alimony received		2	а	
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C				
4	Other gains or (losses). Attach Form 4797		4		
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedul	eE . 5	5	-13,896.
6	Farm income or (loss). Attach Schedule F		6	i	
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			
q	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	Pension or annuity from a nonqualifed deferred compensation plan or				
	a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
Z	Other income. List type and amount:				
		8z			
9	Total other income. Add lines 8a through 8z				
10	Combine lines 1 through 7 and 9. This is your additional income. Enter	r here and o	n Form		
	1040, 1040-SR, or 1040-NR, line 8	<u> </u>	10)	-13,896.

Schedule 1 (Form 1040) 2023 Page **2**

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-				
	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	, , , , , , , , , , , , , , , , , , ,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals	04			
_1	· · · · · · · · · · · · · · · · · · ·	24c		_	
d		24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h			
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				
	-	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:	24z			
05					
25	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. ∟nter	nere and on		
	Form 1040, 1040-SR, or 1040-NR, line 10			26	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

OMB No. 1545-0074

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Attachment Sequence No. 13 Go to www.irs.gov/ScheduleE for instructions and the latest information. Your social security number

	SHAIK MOHAMMED ANWAR & RESHMI SHAIK						489-	77-6358	
Part									
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use	Schedul	e C. See	instru	ctions. If you a	are an ind	lividual, rep	ort farm
A [Did you make any payments in 2023 that would require you	to file	Form(s)	10002 5	Saa ing	etructions		\ \\ \ \ \ \ \ \ \ \ \ \ \ \	e X No
	f "Yes," did you or will you file required Form(s) 1099?								
					• •		· · ·		.5 <u> </u> 140
1a	Physical address of each property (street, city, state, ZII		<u> </u>						
Α	H.NO:12-344/1 PLOT NO:36 BANDLAGUDA, NA	AGOLI	E HYDE	RBAD,	rela	NGANA IN	50007	4	
В									
С									
1b	Type of Property 2 For each rental real estate property				Fa	ir Rental		nal Use	QJV
_	(from list below) above, report the number of fair personal use days. Check the Q					Days	D	ays	
_ <u>A</u> _	gersonal use days. Check the Quite if you meet the requirements to			A		355		0	
В	qualified joint venture. See instru			В					
C	<u> </u>			С					
	of Property: Single Family Residence 3 Vacation/Short-Term Ren	احد	<i>-</i> 1	-I	7	Calf Dantal			
	engle cannot be a	itai	5 Land			Self-Rental	د حان		
2	Multi-Family Residence 4 Commercial		6 Roy	aities	8	Other (descr	ribe)		
						Properti	es:		
ncon	ne:			Α		В			С
3	Rents received	3		6	10.				
4	Royalties received	4							
xper	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,0	52.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,8	59.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		3,0					
15	Supplies	15		3,7	48.				
16	Taxes	16		1 0	1.1				
17	Utilities	17		1,8 2,9					
18	Depreciation expense or depletion	18		2,9	51.				
19 20	Other (list) Total expenses. Add lines 5 through 19	19		14,5	0.6				
		20		14,3	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		-13,8	96.				
22	Deductible rental real estate loss after limitation, if any,				•				
	on Form 8582 (see instructions)	22	(13,89	6. N	()(
23a	Total of all amounts reported on line 3 for all rental prope				23a	\	610.	/ (
b	Total of all amounts reported on line 4 for all royalty prop				23b				
c	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	2	,951.		
e	Total of all amounts reported on line 20 for all properties				23e		,506.		
24	Income. Add positive amounts shown on line 21. Do not		de any lo	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estat		•		nter to	tal losses her		(13,896.
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no								
	Schedule 1 (Form 1040), line 5. Otherwise, include this at						. 26		-13.896