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
ABDUL MUJEEB AHMED SHAIK	750-37-3984
Spouse's name	Spouse's social security number
FARHANA MOHAMMED	988-98-5407
Part I Tax Return Information — Tax Year Ending December 31,	2023 (Enter 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	
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization (Be sure Under penalties of perjury, I declare that I have examined a copy of the income tax return (o	
my knowledge and belief, it is true, correct, and complete. I further declare that the amo return (original or amended) I am now authorizing. I consent to allow my intermediate servic to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receip for any delay in processing the return or refund, and (c) the date of any refund. If applicable Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial instipayment of my federal taxes owed on this return and/or a payment of estimated tax, and the authorization is to remain in full force and effect until I notify the U.S. Treasury Financial payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment business days prior to the payment (settlement) date. I also authorize the financial institution taxes to receive confidential information necessary to answer inquiries and resolve issue personal identification number (PIN) below is my signature for the income tax return (origin Electronic Funds Withdrawal Consent.	the provider, transmitter, or electronic return originator (ERO of or reason for rejection of the transmission, (b) the reasone, I authorize the U.S. Treasury and its designated Financia litution account indicated in the tax preparation software for the financial institution to debit the entry to this account. This Agent to terminate the authorization. To revoke (cancel) at cancellation requests must be received no later than 2 cons involved in the processing of the electronic payment of the related to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
····	nter or generate my PIN 7 3 9 8 4 as my
ERO firm name signature on the income tax return (original or amended) I am now author	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or if you are entering your own PIN and your return is filed using the Practibelow.	amended) I am now authorizing. Check this box only
Your signature ►	Date ►
Spouse's PIN: check one box only	
	nter or generate my PIN 8 5 4 0 7 as my
ERO firm name signature on the income tax return (original or amended) I am now author	Enter five digits, but rizing don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or a if you are entering your own PIN and your return is filed using the Practibelow.	amended) I am now authorizing. Check this box only
Spouse's signature ▶	Date ►
Practitioner PIN Method Returns Only—	continue below
Part III Certification and Authentication — Practitioner PIN Method	d Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected	d PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic in authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirequirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS expressions are the practical transfer of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS expressions.	rm that I am submitting this return in accordance with the
ERO's signature ▶	Date ►
ERO Must Retain This Form — See	

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

2023

						ONID NO. 10 10	007 1	· · · · · ·	50	nto or otapio in tino opaco.	
For the year Jar	n. 1–De	c. 31, 2023, or other tax year beginning		, 2023, end	ding _		, 20		See sep	parate instructions.	
Your first name and middle initial Last name						Y	our so	cial security number			
ABDUL MU	ABDUL MUJEEB AHMED SHAIK							750	37 3984		
				ame				s	pouse'	s social security number	
FARHANA MOHAMMED							988	98 5407			
Home address	(numb	er and street). If you have a P.O. box, see	instruct	ions.			Apt. no.	F	Preside	ntial Election Campaign	
1270 WEST 70TH STREET							304		Check here if you, or your		
City, town, or p	ost off	ice. If you have a foreign address, also co	emplete spaces below. State ZIP			ZIP code			if filing jointly, want \$3 this fund. Checking a		
CLEVELA					OI		44102	b	ox belo	ow will not change	
Foreign country	y name			Foreign province/state/	coun	ty	Foreign postal	code y	your tax or refund.		
		7 o					1 11/110			You Spouse	
Filing Status	-	Single		•		☐ Head of he	ousehold (HO	H)			
Check only	<u>×</u>	_	ne nad	income)		Ovalificina			CC)		
one box.	L If ⋅	∫ Married filing separately (MFS) you checked the MFS box, enter the	nama	of vour enouge. If you	u ob		surviving spo			ld's name if the	
		ualifying person is a child but not you		, ,	u Cir	ecked the HOI	TOT QOO DOX,	enter	uie ciii	id 5 flattle if the	
		, , ,									
Digital		ny time during 2023, did you: (a) rece									
Assets		nange, or otherwise dispose of a digi					et)? (See instru	ictions	.)	Yes X No	
Standard	_	neone can claim:	•			•					
Deduction	Ш	Spouse itemizes on a separate retur	n or yo	u were a duai-status	aller	1					
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind Spo	ouse	: Was bor	n before Janu	ary 2,	1959	☐ Is blind	
Dependent	s (see	instructions):		(2) Social security	/	(3) Relationsh	iib I.,			fies for (see instructions):	
If more	(1) F	First name Last name	number			to you	Child	Child tax cred		Credit for other dependents	
than four dependents,								<u> </u>			
see instruction	s										
and check	1 —										
here L	10	Total amount from Form(s) W 2 h	ov 1 (or	o instructions)					10	62,202.	
Income	1a b	Total amount from Form(s) W-2, be	,	•					1a 1b		
Attach Form(s)	c	Household employee wages not reported on Form(s) W-2							1c		
W-2 here. Also 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 bene		·					1f		
If you did not	g	Wages from Form 8919, line 6 .							1g		
get a Form W-2, see	h	Other earned income (see instructi	ions)						1h	0.	
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		1i					
	Z	Add lines 1a through 1h							1z	62,202.	
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interest	t		2b		
if required.	3a	· · · ·	3a			Ordinary divider			3b		
Standard	4a		4a			axable amoun			4b		
Deduction for—	5a		5a			axable amoun			5b		
Single or Married filing	6a	,	6a			axable amoun	t		6b		
separately, \$13,850	c	If you elect to use the lump-sum e		•	`	,		. 📙	_		
Married filing	7 8	Capital gain or (loss). Attach Scheol Additional income from Schedule				•		. ⊔	8	-8,759.	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							9	53,443.	
surviving spouse, \$27,700	10	Add liftes 12, 25, 35, 45, 35, 65, 7, Adjustments to income from Sche							10		
Head of household,	11	Subtract line 10 from line 9. This is							11		
\$20,800	12	Standard deduction or itemized	-						12		
If you checked any box under	13	Qualified business income deducti				95-A			13		
Standard Deduction,	14								14		
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								25,743.	

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check	if any from Form	ı(s): 1 🗌 881	4 2 🗌 4972	з 🗌		16	2,647.	
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	2,647.	
	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	2,647.	
	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	2,647.	
Payments	25	Federal income tax withheld	from:							
-	а	Form(s) W-2				25a	6,776			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	6,776.	
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	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								
	32	Add lines 27, 28, 29, and 31	32							
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	6,776.	
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	4,129.	
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	3 is attached, ched	ck here	🗆	35a	4,129.	
Direct deposit?	b	Routing number 0 4 4			c Type: 🛛	Checking] Savings	s		
See instructions.	d	Account number 3 1 5	7 5 6 6	9 9						
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe						
You Owe		For details on how to pay, go	_	-				37		
	38	Estimated tax penalty (see in	structions) .			38				
Third Party		you want to allow another	•			_	_			
Designee							•	e below.	⊠ No	
		signee's me		Phone no.			rsonal ide nber (PIN)			
Sign		der penalties of perjury, I declare the	nat I have examined	d this return and	accompanying sche	dules and stateme	nts, and to	the best	of my knowledge and	
Here	be	lief, they are true, correct, and com	plete. Declaration	of preparer (othe	r than taxpayer) is ba	sed on all informa	tion of wh	ich prepar	er has any knowledge.	
пеге	Yo	Your signature		Date Your occupation				If the IRS sent you an Identity		
							Protection PIN, enter it here			
Joint return?				5.	NETWORK EN		`	(see inst.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupati	on			nt your spouse an ection PIN, enter it here	
your records.		HOME MAKER				2	(see inst.)			
	Ph	one no. (216)417-967	4	Email address	AB.MUJEEBSH		COM			
Daid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Paid	SYAM	SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/21/2024 P020					082703 Self-employed			
Preparer	Firm's name GLOBAL TAXES LLC							Phone no. (678)965-9522		
Use Only			Y CT E BRU	NSWICK N	J 08816			m's EIN	84-3171965	
_ · ·		10101							- 1010	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

Name	s) shown on Form 1040, 1040-SR, or 1040-NR		Your so	ocial se	curity number
ABDU	IL MUJEEB AHMED SHAIK & FARHANA MOHAMMED		750-3	37-398	34
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes			1	0.
2a	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	-8,759.
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			
I	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			

Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form

8u

8z

u Wages earned while incarcerated

9

10

z Other income. List type and amount:

-8,759.

9

10

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

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	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	· <u> </u>			
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)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	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				
_	tax law violations	24i			
j	Housing deduction from Form 2555	24j		_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k		-	
Z	Other adjustments. List type and amount:				
0 -		24z		0-	
25	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income				
	Form 1040, 1040-SR, or 1040-NR, line 10			26	
	BAA	REV 01/	12/24 PRO	Schedu	le 1 (Form 1040) 2023

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.

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s)) shown on return						Your socia	al security	number
ABDU	JL MUJEEB AHMED SHAIK & FARHANA MO	HAMMED					750-3	7-3984	
Part	Income or Loss From Rental Real Es Note: If you are in the business of renting persor rental income or loss from Form 4835 on page 2	nal property, u		e C . See	instruc	ctions. If you a	re an indiv	/idual, rep	ort farm
Α [Did you make any payments in 2023 that would rec	quire you to fi	le Form(s)	1099? 5	See ins	tructions .		. \(\subseteq \text{Y}\epsilon	es 🛛 No
B i	f "Yes," did you or will you file required Form(s) 10	099?						. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city,	state. ZIP co	de)						
	H.NO.16-7-387 FLAT 304 AZAMPURA,			C 7 NT 7	TNT E	20024			
_ <u>A</u>	H.NO.16-7-387 FLAT 304 AZAMPURA,	HIDERABA) IELAN	GANA	TIN 2	00024			
B									
<u>C</u>	Town of Donorsets O F				_				<u> </u>
1b		Programme Property list above, report the number of fair rental				ir Rental Days	Person Da		QJV
	2 personal use days. Chec			, anh,		-	Da	0	
B	if you meet the requirem			B	365				
C	qualified joint venture. S	See instructio	ns.	C					
	of Property:			U					
	Single Family Residence 3 Vacation/Short-T	orm Pontal	5 Lan	4	7	Self-Rental			
	Multi-Family Residence 4 Commercial	emi nemai	6 Roy				ribo)		
	Widiti-Family nesidence 4 Commercial		о поу	ailles	0	Other (descr	ibe)		
						Properti	es:		
Incom				Α		В			С
3	Rents received			5	40.				
4	Royalties received	4							
Exper	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance			1,3	20.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10)						
11	Management fees	11	l	1,0	50.				
12	Mortgage interest paid to banks, etc. (see instru-	ctions) 12	2						
13	Other interest	13	3						
14	Repairs	14	l l		40.				
15	Supplies	15	5	2,3	64.				
16	Taxes								
17	Utilities		7	2,6	25.				
18	Depreciation expense or depletion								
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20)	9,2	99.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royal								
	result is a (loss), see instructions to find out if yo			0 -	_				
	file Form 6198			-8,7	59.				
22	Deductible rental real estate loss after limitation					,		,	,
	on Form 8582 (see instructions)			8,75	9.))	(
23a	Total of all amounts reported on line 3 for all ren				23a		540.		
b	Total of all amounts reported on line 4 for all roys				23b				
C	Total of all amounts reported on line 12 for all pr	•			23c				
d	Total of all amounts reported on line 18 for all pr	-			23d				
е	Total of all amounts reported on line 20 for all pr	•			23e	9	,299.		
24	Income. Add positive amounts shown on line 21		-				. 24		0 ==
25	Losses. Add royalty losses from line 21 and rental							(8,759.
26	Total rental real estate and royalty income of								
	here. If Parts II, III, and IV, and line 40 on page Schedule 1 (Form 1040), line 5. Otherwise, include								-8,759.