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

internal revenue Survice	
Submission Identification Number (SID)	
Taxpayer's name	Social security number
PRAMOD SINGH	878-25-0984
Spouse's name	Spouse's social security number
JUHI CHAUDHRY	971-99-4306
	20 (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	 3 16,320.
4 Amount you want refunded to you	
5 Amount you owe	5
Part II Taxpayer Declaration and Signature Authorization (Be sure you	get and keep a copy of your return)
return (original or amended) I am now authorizing. I consent to allow my intermediate service provides send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I aut Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial thorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent payment. I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cand business days prior to the payment (settlement) date. I also authorize the financial institutions invitaxes to receive confidential information necessary to answer inquiries and resolve issues relapersonal identification number (PIN) below is my signature for the income tax return (original or a	eason for rejection of the transmission. (b) the reason horize the U.S. Treasury and its designated Financial account indicated in the tax preparation software for initial institution to debit the entry to this account. This to terminate the authorization. To revoke (cancel) a cellation requests must be received no later than 2 rolved in the processing of the electronic payment of ted to the payment. I further acknowledge that the
Electronic Funds Withdrawal Consent.	
Taxpayer's PIN: check one box only	5 0 9 8 4
▼ I authorize GLOBAL TAXES LLC to enter o ■	r generate my PIN Enter five digits, but as my
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amend if you are entering your own PIN and your return is filed using the Practitione below. Your signature ►	r PIN method. The ERO must complete Part III
Your signature ►	Date ► 03/16/2021
Spouse's PIN: check one box only	
	ded) I am now authorizing. Check this box only
below.	
O his	No. 1
Spouse's signature ► \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Date ► 03 16 2021
Practitioner PIN Method Returns Only—conti	
Part III Certification and Authentication — Practitioner PIN Method On	ly
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN	5 8 7 2 7 8 6 1 9 8 9 Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file P	it I am submitting this return in accordance with the
ERO's signature ▶	Date >
ERO Must Retain This Form - See Instru	uctions
Don't Submit This Form to the IRS Unless Reque	ested To Do So
For Panenyork Reduction Act Notice, see your tay return instructions	Even 9970 Page 1990