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.

Submission Identification Number (SID)

Taxpayer's name		Social security number		
SIVA RAMA KRISHNA GHANTA 597-97-2706				
Spouse's name	Spouse's social security number		ty number	
Part I Tax Return Information – Tax Year Ending December 31,	(Enter y	year you ai	re auth	orizing.)
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	70,409.
2 Total tax			2	8,556.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	9,593.
4 Amount you want refunded to you			4	1,237.
5 Amount you owe			5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get	t and ke	eep a copy	y of yo	ur return)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or an my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authoriz Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution acco payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial is authorized after the tax of and the remaining in full force and offect until L patific the U.S. Traceum, Einancial Agent to the	rt I above , transmitt n for rejec ze the U.S ount indic institution	are the amo ter, or electro ction of the tra S. Treasury ar ated in the ta to debit the	ounts fro onic retur ansmissi nd its de ax prepar entry to	m the income tax m originator (ERO) ion, (b) the reason signated Financial ration software for this account. This

authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's	PIN:	check	one	box	only
------------	------	-------	-----	-----	------

lauthorize GLOBAL TAXES LLC to enter or generate my PIN

7	2	7	0	6	
Enter five digits, but don't enter all zeros					as my

ERO firm name 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 now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature GSivaRam

X

Date > 03/01/2021

Spouse's PIN: check one box

I authorize

to enter or generate my PIN

Enter five digits, but don't enter all zeros

as my

ERO firm name 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 now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►	Date ►				
Practitioner PIN Method Returns Only—continue below					
Part III Certification and Authentication – Practit	ioner PIN Method Only				
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your fi	ve-digit self-selected PIN. 5 8 7 2 7 8 6 1 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 e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨			
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So					
For Dependent Reduction Act Nation and your to	v return instructions	REV 02/15/21 RRO	Earm 8879 (Pov. 01 2021)		

For Paperwork Reduction Act Notice, see your tax return instructions. BAA