## 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

- Internal n	levelide del vice						
Submis	ssion Identification Number (SID)						
Taxpayer's name			Social security number				
RAJESH BHUPATHIRAJU			739-04-7348				
Spouse's name			Spouse's social security number				
Part		nter year you	are au	thoriz	zing.)		
	whole dollars only on lines 1 through 5.  Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
	Adjusted gross income		1 1		102	408.	
	Total tax		2			686.	
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			090.	
	Amount you want refunded to you		4			404.	
	Amount you owe		5				
Part I		nd keep a co	py of y	our	retur	n)	
my know return (o to send for any o Agent to payment authorize payment business taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amen wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I a original or amended) I am now authorizing. I consent to allow my intermediate service provider, trainly my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of 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 term t, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation is days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the lidentification number (PIN) below is my signature for the income tax return (original or amended in Erunds Withdrawal Consent.	above are the arnsmitter, or elector rejection of the le U.S. Treasury indicated in the itution to debit thinate the authority requests must be the processing the payment. If the	nounts fronic ret transmis and its c tax prep e entry to zation. To be received the el- orther ac	curn of sion, design paratic to this or revved nectron	he incorriginator (b) the nated Fon software oke (care object) and the nated for the n	ome tax or (ERO) e reason inancial ware for int. This ancel) a than 2 ment of that the	
	yer's PIN: check one box only						
X	l authorize GLOBAL TAXES LLC to enter or general	ate mv PIN	1 7 3	3   4	8	as my	
•••	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	· E	nter five on't ente		but	ao my	
	I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.						
Your si	gnature ▶ Date I	<b>-</b>					
Spouse	e's PIN: check one box only	_					
	I authorize to enter or gener	ate my PIN				as my	
	ERO firm name		nter five	digits,		ao my	
	signature on the income tax return (original or amended) I am now authorizing.	d	on't ente	r all ze	eros		
	I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.						
Spouse	e's signature ▶ Date I	•					
	Practitioner PIN Method Returns Only—continue be	ow					
Part II	Certification and Authentication — Practitioner PIN Method Only						
ERO's	<b>EFIN/PIN.</b> 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 er	nter all ze	ros			
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual inconced to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am something of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers	ubmitting this re	turn in a	accord	lanće v		
ERO's	signature ▶ Date I	•					
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested 1						