## **IRS e-file Signature Authorization**

OMB No. 1545-0074

Social security number

Department of the Treasury Internal Revenue Service 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

ranpay		ocolar coounty nambol							
SAH	IT KATTA	867-98-9996							
Spouse	's name	Spouse's social security number							
RASHMINI REDDY DAMMANNA 131-35-1970									
Par	Tax Return Information – Tax Year Ending December 31, 2020 (Ente	r 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	<b>1</b> 44,669.							
2		<b>2</b> 0.							
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>. 3</b> 4,508.							
4	Amount you want refunded to you	4 8,108.							
5	Amount you owe	5							

## Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to 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

X	l authorize	GLOBAL TAXES LLC	to enter or generate my PIN
	I ddunonzo	energine manual and	

8	9	9	9	6	as mv
Ent don					

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 🕨

k.Sahit

Date > 03/22/2021

Spouse's PIN:	check one box	only									
🗙 I autho	rize GLOBAL	TAXES	LLC	to enter or generate my PIN	5	1	9	7	0	as my	
ERO firm name								Enter five digits, but			
signature on the income tax return (original or amended) I am now authorizing.									ros		

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 🕨	D Rashming K	Di	ate 🕨	• 0	)3/22	/202	21							
Practitioner PIN Method Returns Only—continue below															
Part III	Certification	and Authenticatio	n – Practitioner PIN Method Only												
ERO's EF	IN/PIN. Enter you	ur six-digit EFIN follow	ed by your five-digit self-selected PIN.	5	8							9	8	9	
							Don	t en	ter a	II zei	ros				

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 signatu	re 🕨					Date 🕨			
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So									
								0070 /=	04.0004

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