(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

Submissi	on Identification Number (SID)					
Taxpayer's name			Social security number			
ASHOK NEELAM			712-28-7708			
Spouse's name			Spouse's social security number			
Part I Tax Return Information — Tax Year Ending December 31, 2020 (Enter year your			re auth	orizing.)		
Enter who	ole dollars only on lines 1 through 5.			0 /		
	rm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1 Ac	djusted gross income		1	132,	892.	
2 To	otal tax		2	22,	872.	
3 Fe	ederal income tax withheld from Form(s) W-2 and Form(s) 1099		3	23,	139.	
4 Ar	mount you want refunded to you		4		267.	
5 Ar	mount you owe		5			
Part II	Taxpayer Declaration and Signature Authorization (Be sure you get	and keep a copy	y of yo	ur retur	<u>n) </u>	
return (original to send my for any del Agent to in payment of authorization payment, business of taxes to repersonal ic Electronic Taxpayer	redge and belief, it is true, correct, and complete. I further declare that the amounts in Part pinal or amended) I am now authorizing. I consent to allow my intermediate service provider, to return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason it alway in processing the return or refund, and (c) the date of any refund. If applicable, I authorize initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accounting my federal taxes owed on this return and/or a payment of estimated tax, and the financial into on is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to ter I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellationally prior to the payment (settlement) date. I also authorize the financial institutions involved eceive confidential information necessary to answer inquiries and resolve issues related to dentification number (PIN) below is my signature for the income tax return (original or amended Funds Withdrawal Consent. **r's PIN: check one box only** I authorize GLOBAL TAXES LLC to enter or general signature on the income tax return (original or amended) I am now authorizing.	ransmitter, or electrofor rejection of the trate the U.S. Treasury are untindicated in the tall stitution to debit the minate the authorization requests must be in the processing of the payment. I furted) I am now authorization requests must be a the payment. I furted a lam now authorization regardless of the payment. I furted a lam now authorization regardless of the payment.	anic retu ansmiss nd its de ax prepa entry to tition. To e receive the elect her ack zing and	rn originator ion, (b) the signated Fration softwhis account revoke (can be ded no later attronic pay nowledge 1, if applica 0 8 agits, but	or (ERO) e reason inancial ware for unt. This ancel) a than 2 ment of that the	
i	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.	method. The ERC	must	complete		
Your sign	pature ▶ Date	e ►04/0	4/202	1		
Spouse's	s PIN: check one box only					
	l authorize to enter or gene	erate mv PIN			as my	
	ERO firm name	,	er five di	gits, but	,	
	signature on the income tax return (original or amended) I am now authorizing.	dor	n't enter	all zeros		
i	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.					
Spouse's	signature ► Date	e ▶				
	Practitioner PIN Method Returns Only—continue b	elow				
Part III	Certification and Authentication — Practitioner PIN Method Only					
ERO's EF	FIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5 8 7 2 7 8 Don't ente		1 9 8 os	9	
authorized	at the above numeric entry is my PIN, which is my signature for the electronic individual income to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I amonts of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Provide	submitting this retu	rn in ac	cordance v		
ERO's sig	gnature ▶ Date	e ▶				
	ERO Must Retain This Form — See Instructions					

Don't Submit This Form to the IRS Unless Requested To Do So