## 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

IIILEITIAI F	levertue dei vice							
Submis	ssion Identification Number (SID)							
Taxpayer's name				Social security number				
PRAVEEN KUMAR R MADABUSHI			873-30-9354					
Spouse's name			Spouse's social security number					
Part	, ,	year you a	are au	thoriz	<u>:ing.)</u>			
	whole dollars only on lines 1 through 5.							
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1 4	1	110	0.07		
	Adjusted gross income		2	<u> </u>		$\frac{887.}{008.}$		
	Total tax		3					
	Amount you want refunded to you		4			500.		
	Amount you owe		5			492.		
Part		eep a cor		our r	returi	n)		
Under pmy kno return (cto send for any Agent to paymen busines taxes to persona Electror	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) will be the provided and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transm my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict 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 terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requires a days prior to the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (settlement) date. I also authorize the financial institutions involved in the part of the confidential information necessary to answer inquiries and resolve issues related to the part of the income tax return (original or amended) I amic Funds Withdrawal Consent.    Ver's PIN: check one box only   I authorize   GLOBAL TAXES LLC   to enter or generate   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.    I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing.    Date   Date	I am now au e are the am tter, or electrotion of the S. Treasury a cated in the the authorization of the stream to debit the the authorization of the stream of the authorization of the stream of the authorization of the stream	thorizing and its of a cax prepared in the electron and its of a cax pre	g, and from the turn or ssion, design or so to this Forevolved no ectronicknowlend, if a digits, er all ze meck to	to the ne inco- iginato (b) the ated F of the soft of	best of ome tax or (ERO) a reason inancial ware for int. This ancel) a than 2 ment of that the ible, my		
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Spous	e's PIN: check one box only I authorize to enter or generate to	my DINI				as my		
Ш	ERO firm name		nter five	digits.		as my		
	signature on the income tax return (original or amended) I am now authorizing.		n't ente					
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.		_			_		
Spouse	e's signature ▶ Date ▶							
	Practitioner PIN Method Returns Only—continue below							
Part I	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 2	9 8	9		
		Don't en	ter all ze	$\perp$				
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taked to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of Ir	itting this ret	urn in a	accord	lanće v			
ERO's	signature ► Date ►							
	ERO Must Retain This Form — See Instructions							
	Don't Submit This Form to the IRS Unless Requested To D	o So						