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)

Taxpay	er's name	Socia	Social security number								
CHA	NDRIKA MALKARI	35	358-69-2416								
Spouse	's name	Spouse's social security number									
Par	t I Tax Return Information – Tax Year Ending December 31, (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			1	84,379.						
2	Total tax			2	11,625.						
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	13,501.						
4	Amount you want refunded to you			4	1,876.						
5	Amount you owe			5							
Dow	Townsyse Declaration and Signature Authorization (Pe auroyou get and										

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

Under penalties of periury. 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.

Taxpay	er's PIN: che	ck one bo	ox only								9	2		1	6		
X	I authorize <u>GLOBAL TAXES LLC</u> to enter or generate my PIN ERO firm name signature on the income tax return (original or amended) I am now authorizing.								PIN	9 2 4 1 6 Enter five digits, but don't enter all zeros							
		ntoring you	Ir Own DI		ome tax return (origir urn is filed using the												
Your sig	nature 🕨	Μ	.chm			Da	ate 🕨	►				0	2/1	9/2	02	1	
Spouse	I will enter r	n the incom ny PIN as r	ne tax reti my signat	ture on the inco	amended) I am now ome tax return (origir urn is filed using the	nal or amended)	lar	m no	wa	authc	dor orizir	n't en ng. (all ze ck t	ros his l	0 x oc	
Spouse	s signature	•				Da	ate 🕨	•									
			Pra	ctitioner PIN	Method Returns O	nly—continue	bel	ow									
Part II	Certific	ation and	d Auther	ntication – P	Practitioner PIN M	ethod Only											
ERO's I	EFIN/PIN. En	ter your six	x-digit EF	IN followed by	your five-digit self-se	elected PIN.	5	8	7	2	7	3	6 1	1	9 8	9	

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

Don't enter all zeros

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 >			
ERO Must Retain This F Don't Submit This Form to the I			
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 02/15/21 PRO	Form 8879 (Rev. 01-2021)