## 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

IIILEIIIai	nevertue Service				
Subm	nission Identification Number (SID)				
Taxpayer's name So			Social security number		
PRADEEP R DILLI			361-81-5968		
Spouse's name		Spouse's social security number			
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Par	, , ,	year you a	re aut	norizing.)	
	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	Adjusted gross income		1 4 1	89,932.	
2	Total tax		2	12,846.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	14,396.	
4	Amount you want refunded to you		4	2,003.	
5	Amount you owe		5	2,003.	
Part		eep a cop		our return)	
return to sen for any Agent payme author payme busine taxes persor	owledge 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, transmed my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject of delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Usto initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicant of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution returns in the fundament of the U.S. Treasury Financial Agent to terminate and, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the penal identification number (PIN) below is my signature for the income tax return (original or amended) I around Financial Withdrawal Consent.	itter, or electro- ection of the to S. Treasury a cated in the to to debit the to the authorizations must be processing or ayment. I fur	onic returnation on the control of t	urn originator (ERO) sion, (b) the reason esignated Financial aration software for o this account. This o revoke (cancel) a red no later than 2 ectronic payment of knowledge that the	
	ayer's PIN: check one box only				
	I authorize GLOBAL TAXES LLC to enter or generate	mv PIN	5 9	6 8 as my	
Ľ	ERO firm name	ř En		digits, but r all zeros	
	signature on the income tax return (original or amended) I am now authorizing.	uo	ii i ciiici	un 20103	
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	se's PIN: check one box only  I authorize  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 if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.	En do ow authorizi	n't ente ng. Ch		
Spou	se's signature ▶ Date ▶				
D 1	Practitioner PIN Method Returns Only—continue below				
Part	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 Don't ent	8 6 er all ze	1 9 8 9 ros	
author	by that the above numeric entry is my PIN, which is my signature for the electronic individual income taken to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of Ir	itting this retu	ırn in a	ccordance with the	
EDO'	s signature • Data •				

ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So