Form **8879**

(Rev. August 2020)

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

Submis	sion Identification Number (SID)								
Taxpayer	cial security	y number							
MAHE	500-65-	-4687							
Spouse's	name	ouse's soci	ial security number						
SHIV	ALAXMI GADDAM	972-94-	207	5					
Part l	Tax Return Information — Tax Year Ending December 31, (Enter year)	ar you ar	e aut	horizing	.)				
Enter w	hole dollars only on lines 1 through 5.								
Note: F	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.								
1 .	Adjusted gross income		1	49	,912.				
	Total tax		2	2	,620.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	[3	3	,739.				
4	Amount you want refunded to you		4	1	,119.				
5	Amount you owe		5						
Part I	Taxpayer Declaration and Signature Authorization (Be sure you get and kee	р а сору	of y	our retu	ırn)				
return (o to send for any o Agent to payment authorize payment business taxes to persona Electron	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above ar riginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectio delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. To initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicate to fmy federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the total the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests a days prior to the payment (settlement) date. I also authorize the financial institutions involved in the proceedive confidential information necessary to answer inquiries and resolve issues related to the payment identification number (PIN) below is my signature for the income tax return (original or amended) I am not ic Funds Withdrawal Consent. **Per's PIN: check one box only** I authorize GLOBAL TAXES LLC to enter or generate my I 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 method. below.	or electron of the trace of the trace of debit the electron of the trace of debit the electron of the trace of the trace of the trace of the electron of the trace of the trac	nic retunsmis d its control it	urn origina ssion, (b) the designated designated arration so to this accord or evoke of ded no late dectronic path knowledge and, if applie by digits, but r all zeros deck this I	tor (ERO) ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of e that the cable, my as my Coox only				
Your si	gnature▶Mahesh GaddamDate▶	01/27	7/202	21					
Spouse	e's PIN: check one box only								
· 🗵	I authorize GLOBAL TAXES LLC to enter or generate my leading 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 a signature on the income tax return (original or amended) I am now a signature on the income tax return (original or amended) I am now a signature on the income tax return (original or amended) I am now a signature on the income tax return (original or amended) I am now a signature on the income tax return (original or amended) I am now a signature on the income tax return (original or amended) I am now authorizing.	Ente don authorizin	't ente g. Ch	digits, but r all zeros eck this l					
Spouse	o's signature ▶ Date ▶								
Practitioner PIN Method Returns Only—continue below									
Part I	Certification and Authentication — Practitioner PIN Method Only								
ERO's	EFIN/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	9				
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income tax re ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting nents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Individual income tax re	g this retur	n in a	ccordance					
ERO's	signature ► Date ►								
	FRO Must Retain This Form — See Instructions								

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

E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

IRS Use Only—Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly [u checked the MFS box, enter the roon is a child but not your dependent	name of										
Your first name and middle initial				me					Yours	Your social security number			
MAHESH				MAC					500-	500-65-4687			
If joint return, s	pouse's	first name and middle initial	Last na	me					Spous	Spouse's social security number			
SHIVALA	IMX		GADE	MAC					972-94-2075				
Home address	(numbe	er and street). If you have a P.O. box, see	e instruction	ons.				Apt. no.	ential E	lection	Campaign		
649 S H	ENDE:	RSON ROAD								here if		•	
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete s	mplete spaces below. State Z						spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change			
KING OF	PRU	SSIA	I			PA 1:							
Foreign country name				Foreign province/stat	:/county F		For	Foreign postal code		your tax or refund. You Spouse			
At any time du	ıring 20	020, did you receive, sell, send, exc	hange, c	or otherwise acquir	e any	financial inte	erest in	n any virtual o	currency	? Y	es [⊠ No	
Standard Deduction	_	eone can claim:		•		-	t						
Age/Blindness	s You:	Were born before January 2, 1	956	Are blind S	pouse	e: Was b	orn b	efore January	, 2, 1956		ls bline	d	
Dependents	s (see	instructions):		(2) Social secur	itv	(3) Relation	ship	(4) V if	qualifies t	ualifies for (see instructions):			
If more		irst name Last name	number		,	to you		Child tax cred		1		r dependents	
than four													
dependents,													
see instruction and check	s ——												
here ▶													
	1	Wages, salaries, tips, etc. Attach	Form(s) \	W-2						1	4 9	9,912.	
Attach	2a	Tax-exempt interest	2a		b 7	axable inter	est		. 2	!b			
Sch. B if required.	3a	Qualified dividends	3a		b	Ordinary divid	dends		. 3	b			
required.	4a	IRA distributions	4a		b Taxable amount .				. 4	b			
	5a	Pensions and annuities	5a		b Taxable amount .				. 5	ib			
Standard	6a	Social security benefits	6a		b٦	axable amo	unt .		. 6	ib			
Deduction for—	7	Capital gain or (loss). Attach Sche	dule D if required. If not required, check here							7			
Single or Married filing	8	Other income from Schedule 1, line 9							. 4	8			
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	5b, 6b, 7, and 8. This is your total income						> !	9	4 9	9,912.	
Married filing	10	Adjustments to income:											
jointly or Qualifying	а	From Schedule 1, line 22											
widow(er), \$24,800	b	Charitable contributions if you take the standard deduction. See instructions Add lines 10a and 10b. These are your total adjustments to income											
Head of	С								▶ 10	0c			
household, \$18,650	11	Subtract line 10c from line 9. This is your adjusted gross income							▶ 1	1	4 9	9,912.	
If you checked	12	Standard deduction or itemized	deduct	ions (from Schedu	le A)				. 1	2	24	1,800.	
any box under Standard	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A							. 1	3			
Deduction, see instructions.	14	Add lines 12 and 13							. 1	4		1,800.	
	15	Taxable income. Subtract line 14	from lin	e 11. If zero or les	s, ente	er -0			. 1	5	25	5,112.	

Form 1040 (2020))									Page 2	
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	2,620.	
	17	Amount from Schedule 2, lir				_			17		
	18	Add lines 16 and 17							18	2,620.	
	19	Child tax credit or credit for	other dependen	ts					19		
	20	Amount from Schedule 3, lir	ne 7						20		
	21	Add lines 19 and 20							21		
	22	Subtract line 21 from line 18							22	2,620.	
	23	Other taxes, including self-e	,						23	0.	
	24	Add lines 22 and 23. This is			•					2,620.	
	25	Federal income tax withheld	-							2,020.	
	a	Form(s) W-2				25a	3	,739			
	b	Form(s) 1099				25b		,	•		
	c	Other forms (see instruction				25c					
	d	Add lines 25a through 25c	•						25d	3,739.	
	26	2020 estimated tax paymen							26	3,733.	
 If you have a L qualifying child, 	27	Earned income credit (EIC)				27			20		
attach Sch. EIC.	28	Additional child tax credit. A				28			-		
If you have nontaxable	29					29			-		
combat pay,		American opportunity credit		*					-		
see instructions.	30	Recovery rebate credit. See				30			_		
	31	Amount from Schedule 3, line 13									
	32	Add lines 27 through 31. These are your total other payments and refundable credits								2.720	
	33	Add lines 25d, 26, and 32. These are your total payments								3,739.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid							34	1,119.	
5	35a									1,119.	
Direct deposit? See instructions.	▶b	Routing number 0 5 1 0 0 0 0 1 7 ▶ c Type: ▼ Checking Savings Account number 4 3 5 0 4 0 0 5 8 5 8 0 □ Savings							S		
	► d					1 00	J				
<u> </u>	36	Amount of line 34 you want									
Amount	37	Subtract line 33 from line 24	. This is the am e	ount you owe	now			. •	37		
You Owe For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for									
how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details. Estimated tax penalty (see instructions)									
instructions.	38					38					
Third Party		you want to allow another	•				7v 0			⊠ No	
Designee		structions				. ▶ [_ Yes. C	•		∧ NO	
		signee's ne ▶		Phone no. ▶				onai ide ber (PIN	ntification		
Sign			that I have examine			nedules a				st of my knowledge and	
		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which									
Here	Yo	ur signature	Date Your occupation				lf ·	the IRS se	nt you an Identity		
	k.							IN, enter it here			
Joint return?	—		SOFTWARE DEVELOPER					ee inst.) 🕨			
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return,							nt your spouse an ection PIN, enter it here		
your records.	,							ee inst.) 🕨	ection File, enter it here		
	————	one no.		Email address	ПОПШППППП				,		
		eparer's name	Preparer's signal	l .		Date		PTIN		Check if:	
Paid		•	1 .								
Preparer			RAM SAGAR GUPTA TALLAM 01/24/2021 PO					082703 Self-employed Phone no. (678) 965–9522			
Use Only		n's name ► GLOBAL TA n's address ► 2530 Pebb		n Cummin	α GΔ 300//1						
				ui Cullilli					m's EIN 🕨		
GO TO WWW.Irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV ()1/15/21 PR)		Form 1040 (2020)	