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

internal nevertue Service					
Submission Identification Number (SID)					
Taxpayer's name		Social securi	y number		
KIRAN K SUGALI		039-23	039-23-9055		
Spouse's name			Spouse's social security number		
	'				
Part I Tax Return Information — Tax Year Ending De	cember 31,	Enter year you a	re authorizin	ng.)	
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					
1 Adjusted gross income				13,601.	
2 Total tax			2	121.	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1			3	1,879.	
			4	1,758.	
5 Amount you owe			5	\	
Part II Taxpayer Declaration and Signature Authoriza Under penalties of perjury, I declare that I have examined a copy of the inco			-		
my knowledge and belief, it is true, correct, and complete. I further declareturn (original or amended) I am now authorizing. I consent to allow my into send my return to the IRS and to receive from the IRS (a) an acknowled for any delay in processing the return or refund, and (c) the date of any refunded for any initiate an ACH electronic funds withdrawal (direct debit) entry to the payment of my federal taxes owed on this return and/or a payment of estima uthorization is to remain in full force and effect until I notify the U.S. Trepayment, I must contact the U.S. Treasury Financial Agent at 1-888-350 business days prior to the payment (settlement) date. I also authorize the faxes to receive confidential information necessary to answer inquiries a personal identification number (PIN) below is my signature for the income to Electronic Funds Withdrawal Consent.	ermediate service provider, to gement of receipt or reason and. If applicable, I authorize the financial institution account ated tax, and the financial insury Financial Agent to termal and the financial institutions involved and resolve issues related to	transmitter, or electro for rejection of the treater the U.S. Treasury a unt indicated in the transitution to debit the minate the authorization requests must be in the processing of the payment. I furt	onic return original ansmission, (b) and its designate as preparation and entry to this action. To revoke received no at the electronic her acknowled	inator (ERO) the reason ed Financial software for count. This e (cancel) a later than 2 payment of lige that the	
Taxpayer's PIN: check one box only I authorize GLOBAL TAXES LLC	rn (original or amended) I	am now authorizi	ter five digits, bun't enter all zero	s box only	
Your signature ▶	Dat	e▶			
Spouse's PIN: check one box only				_	
☐ I authorize	to enter or gen	erate my PIN		as my	
ERO firm name	10 00. 0. 90	· -	er five digits, bu		
signature on the income tax return (original or amended) I	am now authorizing.	do	n't enter all zero	S	
I will enter my PIN as my signature on the income tax return if you are entering your own PIN and your return is filed ubelow.	,		•	-	
Spouse's signature ▶	Dat	e ▶			
Practitioner PIN Method Re	turns Only—continue k	oelow			
Part III Certification and Authentication — Practitione	r PIN Method Only				
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-dig	jit self-selected PIN.	- - - -	8 6 1 9 er all zeros	8 9	
I certify that the above numeric entry is my PIN, which is my signature for authorized to file for tax year indicated above for the taxpayer(s) indicate requirements of the Practitioner PIN method and Pub. 1345 , Handbook for	d above. I confirm that I am	submitting this retu	ırn in accordan	nce with the	
ERO's signature ▶	Dat	e ▶			
ERO Must Retain This F Don't Submit This Form to the I					