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

Submission Identification Number (SID)			
Taxpayer's name	Social security	Social security number	
KAUSHAL RAO PRAYAKARAO	618-75-	618-75-1710	
Spouse's name	Spouse's socia	al security number	
RAJINI REDDY KUSUKUNTLA	671-46-		
	(Enter year you ar	e 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.	ı	1	
1 Adjusted gross income		1 154,906.	
2 Total tax		2 20,202.	
Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 18,780.	
4 Amount you want refunded to you	+	4 828.	
5 Amount you owe		- I	
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or an			
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authoriz Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution acco payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial i authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellating business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amence Electronic Funds Withdrawal Consent.	e the U.S. Treasury an unt indicated in the tarnstitution to debit the erminate the authorization requests must be d in the processing of the payment. I furth	d its designated Financial x preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of her acknowledge that the	
Taxpayer's PIN: check one box only			
■ I authorize GLOBAL TAXES LLC to enter or ger	orato my DIN	1 7 1 0	
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ente	er five digits, but 't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.			
Your signature ▶ Da	te ▶		
Spouse's PIN: check one box only			
I authorize GLOBAL TAXES LLC to enter or ger ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ente	9 7 2 1 as my er five digits, but 't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.			
1 0	te ▶		
Practitioner PIN Method Returns Only—continue	below		
Part III 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		
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I arrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providence.	n submitting this retur	n in accordance with the	
ERO's signature ▶ Da	te ▶		
ERO Must Retain This Form — See Instruction			

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