Form 8879

(Rev. January 2021)

IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury	
nternal Revenue Service	

ERO must obtain and retain completed Form 8879.
Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

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Taxpayer's name	Social security number		
SUJAN KUMAR PEPOLLA	633-27-3076		
Spouse's name	Spouse's social security number		
LAKSHMI PRASANNA PEPOLLA	712-88-1351		
Part 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	1 124,246.		
2 Total tax	2 13,180.		
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			
4 Amount you want refunded to you	4 5,119.		
5 Amount you owe	5		

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

Under penalties of perjury, 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	x only					
×	I authorize	GLOBAL	TAXES	LLC	to enter or	r generate my PIN	7 3 0 7 6	as my
				ERO firm name			Enter five digits, but don't enter all zeros	
	signature or	the incom	ie tax reti	urn (original or amended) I am now	authorizing.			
				ure on the income tax return (origin				
		ntering you	r own Pll	N and your return is filed using the	Practitione	r PIN method. The	ERO must complet	e Part III
	below.		~ 0	N			1 1	
Your sig	gnature 🕨	T.	5	guskuman	8	Date ►	02 26/20:	21
			4					
Spouse	's PIN: chec	k one box	only					
×	I authorize	GLOBAL	TAXES	LLC	to enter or	r generate my PIN	8 1 3 5 1	as my
				ERO firm name			Enter five digits, but	
	signature or	the incom	ie tax reti	urn (original or amended) I am now	authorizing.		don't enter all zeros	
	I will enter n	ny PIN as r	ny signat	ure on the income tax return (origin	al or amend	ded) I am now auth	orizing. Check this	box only
ليسبعا	if you are er	ntering you	r own Pll	N and your return is filed using the	Practitione	r PIN method. The	ERO must complet	e Part III
	below.							
			0). C			1 1	
Spouse	's signature 🕨	•	DI	Prabuna		Date ► (02/26/202	}
Practitioner PIN Method Returns Only—continue below								
Part III Certification and Authentication – Practitioner PIN Method Only								
ERO's	EFIN/PIN. En	ter your six	-digit EF	IN followed by your five-digit self-se	elected PIN.	5 8 7 2	7 8 6 1 9 8	3 9
						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 <i>e-file</i> Providers of Individual Income Tax Returns.								

ERO's signature >	Date ►				
	Retain This Form — See Form to the IRS Unless				
For Paperwork Reduction Act Notice, see your tax return	rn instructions. RAA	REV 02/21/21 PRO	Form 8879 (Rev. 01-2021)		