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

Subm	ission Identification Number (SID)					
Taxpay	er's name	Social	security	numb	er	
AVINASH KOLACHALAM			041-51-1780			
Spouse's name			Spouse's social security number			
Part	Tax Return Information — Tax Year Ending December 31, (E	Enter year	you are	e aut	horizing.)
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		,213.
2	Total tax		L	2	10	,052.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		-	3	13	,320.
4	Amount you want refunded to you			4	3	,268.
5	Amount you owe			5		
Part						
my know return to send for any Agent payme authori payme busine taxes in person	penalties of perjury, I declare that I have examined a copy of the income tax return (original or ame owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trd my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial insization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terrint, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation as days prior to the payment (settlement) date. I also authorize the financial institutions involved it to receive confidential information necessary to answer inquiries and resolve issues related to rail identification number (PIN) below is my signature for the income tax return (original or amende once Funds Withdrawal Consent.	I above are transmitter, or or rejection of the U.S. Treant indicated institution to defining the autorial transfer in the process the payment	he amou electror of the tra asury and the tax ebit the eathorizath aust be sing of to t. I furth	unts fraic returnsmis dits die prepartry to ion. Treceive elements achieves	om the incurn origina sion, (b) the lesignated aration sofo this according or revoke (red no late extronic parknowledge	come tax tor (ERO) ne reason Financial tware for bunt. This cancel) a er than 2 syment of that the
×	I authorize GLOBAL TAXES LLC 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 if you are entering your own PIN and your return is filed using the Practitioner PIN below.	am now aut	Ente don'	t enter g. Ch		
Yours	signature ▶ Date	· •				
Snous	se's PIN: check one box only					
Ороц.	I authorize to enter or gene	rata my DIN	. 🗌			as my
	ERO firm name	rate my i m		r five o	digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.		don'	t enter	all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.					
Spous	se's signature ▶ Date	• •				
	Practitioner PIN Method Returns Only—continue be	elow				
Part	III Certification and Authentication — Practitioner PIN Method Only					
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5 8 7 2 Do	7 8 on't enter		1 9 8	9
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual inco- ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am- ements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provider	submitting th	nis retur	n in a	ccordance	
ERO's	s signature ▶ Date					
	ERO Must Retain This Form — See Instruction					
Don't Submit This Form to the IRS Unless Requested To Do So						