(Rev. January 2021)

Department of the Treasury

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

| IIILEIIIAI N | levelide Service | | | | | | |
|--|---|---|--|--|---|---|--|
| Submis | ssion Identification Number (SID) | | | | | | |
| Taxpayer' | Social sec | Social security number | | | | | |
| RAGHUNADH REDDY MANDALA | | | 101-45-5072 | | | | |
| Spouse's name | | | Spouse's social security number | | | | |
| Part I | Tax Return Information — Tax Year Ending December 31, (E | Enter year you | ı ara alı | horiz | ina) | | |
| | whole dollars only on lines 1 through 5. | inter year you | are au | 110112 | iiig.) | | |
| | Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | | | | |
| | Adjusted gross income | | 11 | | 75, | 308. | |
| | Total tax | | | | | 634. | |
| | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | | | | 803. | |
| 4 | Amount you want refunded to you | | 4 | | | 939. | |
| 5 | Amount you owe | | 5 | | | | |
| Part I | Taxpayer Declaration and Signature Authorization (Be sure you get a | ind keep a co | ppy of y | our r | eturr | 1) | |
| to send for any of Agent to payment authorizate payment business taxes to personal | original or amended) I am now authorizing. I consent to allow my intermediate service provider, to 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 institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to territ, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellations adays prior to the payment (settlement) date. I also authorize the financial institutions involved in receive confidential information necessary to answer inquiries and resolve issues related to all identification number (PIN) below is my signature for the income tax return (original or amende inc Funds Withdrawal Consent. | or rejection of the the U.S. Treasury the trial trial trial trial trial trial trial trial trial trial n requests must n the processing the payment. I for the payment. | e transmise and its of and its of the entry frization. The received of the electrical and | ssion, (designation this to this orevolved no ectronic states) | (b) the ated Fin softwaccouple (capacitate) accouple (capacitate) | reason mancial vare for nt. This ancel) a than 2 ment of hat the | |
| | yer's PIN: check one box only | Г | | | | | |
| \boxtimes | l authorize GLOBAL TAXES LLC to enter or gene | rate mv PIN | 5 5 0 | \perp | 2 | as my | |
| | ERO firm name signature on the income tax return (original or amended) I am now authorizing. | | Enter five don't ente | | but | , | |
| | 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. | | | | | | |
| Your si | gnature ▶ Date | > | | | | | |
| Snouse | e's PIN: check one box only | _ | | | | | |
| | I authorize to enter or gene | rate my PIN | | | | as my | |
| | ERO firm name | , _ | Enter five | digits, | | ao my | |
| | signature on the income tax return (original or amended) I am now authorizing. | | don't ente | r all ze | ros | | |
| | 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. | | | | | | |
| Spouse | e's signature ▶ Date | • | | | | | |
| | Practitioner PIN Method Returns Only—continue be | elow | | | | | |
| Part II | Certification and Authentication — Practitioner PIN Method Only | | | | | | |
| ERO's | EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. | 8 7 2 7 | 8 6 | 1 9 | 8 | 9 | |
| | | Don't | enter all ze | ros | | | |
| authorize | that the above numeric entry is my PIN, which is my signature for the electronic individual incoved to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I amonents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers | submitting this r | eturn in a | ccord | anće v | | |
| ERO's | signature ▶ Date | • | | | | | |
| | ERO Must Retain This Form — See Instruction | ns | | | | | |
| | Don't Submit This Form to the IRS Unless Requested | | | | | | |