IRS e-file Signature Authorization

OMB No. 1545-0074

Social coourity number

Department of the Treasury Internal Revenue Service ERO must obtain and retain completed Form 8879.
Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name

Taxpayer's name	Social security n	umber							
AMULYA PERLA			179-29-0530						
Spouse's name			Spouse's social security number						
PRADEEP DONTHA	662-64-2423								
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		·	1 145,945.						
2 Total tax			2 16,232.						
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3 21,525.						
4 Amount you want refunded to you		4	6,393.						
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.

Taxpayer's	PIN:	check	one	box	only
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X I authorize

GLOBAL TAXES	LLC	to enter or generate my PIN

9	0	5	3	0	
			gits, all ze		

as my

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 am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your sig	gnature 🕨	A lyn. r	Date 2/22/2021	
Spouse	e's PIN: chec	k one box only		
×	I authorize	GLOBAL TAXES LLC	to enter or generate my PIN	4 2 4 2 3 as my
		ERO firm name	-	Enter five digits, but
	signature or	n the income tax return (original or amended) I am now	authorizing.	don't enter all zeros
		ny PIN as my signature on the income tax return (origi ntering your own PIN and your return is filed using the		
Chausa	'a aignatura	P) Product	Data N 2/22	2/2021

Spouse's signature ►	D. Pradeep	Da	te 🕨	•	2/	22/20)21		 		
Practitioner PIN Method Returns Only—continue below											
Part III Certifica	ation and Authentication — Practitioner PIN Me	thod Only									
ERO's EFIN/PIN. Ent	ter your six-digit EFIN followed by your five-digit self-sel	ected PIN.	5	8	7 2 Do	-		6 all zer	 9	8 9	9

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 *e-file* Providers of Individual Income Tax Returns.

ERO's signature 🕨

Date 🕨	
ERO Must Retain This Form — See Instructions	
Don't Submit This Form to the IRS Unless Requested To Do	o So