## 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 number	
ABHINAY CHOWDHARY MOTURI	181-08-6741	
Spouse's name	Spouse's soci	al security number
Part I Tax Return Information — Tax Year Ending December 31, 2020 (Enti-	 er year you ar	re authorizing.)
Enter whole dollars only on lines 1 through 5.	- <b>, ,</b>	<u> </u>
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1 Adjusted gross income		<b>1</b> 96,768.
2 Total tax		2 14,343.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 17,191.
4 Amount you want refunded to you	[	4 2,848.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy	y of your return)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abreturn (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termina payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation rebusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I Electronic Funds Withdrawal Consent.	mitter, or electro ejection of the tra U.S. Treasury an dicated in the ta tion to debit the atte the authoriza quests must be processing of payment. I furth	nic return originator (ERO) ansmission, <b>(b)</b> the reason of its designated Financial expreparation 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		
X I authorize GLOBAL TAXES LLC to enter or generate ERO firm name	Ente	er five digits, but as my as my er tenter all zeros
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 if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN met below.		
Your signature ► Date ►		
0 1 500 1 1 1		
Spouse's PIN: check one box only	DINI	
I authorize to enter or generate		er five digits, but
signature on the income tax return (original or amended) I am now authorizing.		er live digits, but i't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN merbelow.		
Spouse's signature ▶ Date ▶		
Practitioner PIN Method Returns Only—continue below	w	
Part III Certification and Authentication — Practitioner PIN Method Only		
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5	8 7 2 7 8  Don't ente	8 6 1 9 8 9 er all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sub requirements of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS <i>e-file</i> Providers of	mitting this retur	rn in accordance with the
ERO's signature ▶ Date ▶		
ERO Must Retain This Form — See Instructions		

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