## 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)						
ixpayer's name			Social security number			
SOWMYA P KATHERLA 817			17-99-1841			
Spouse's name		Spouse's social security number				
Part I Tax Return Information — Tax Year Ending December 31, (Enter		r year you are authorizing.)				
Enter whole dollars only on lines 1 through 5.	X Tour Ending Document of the	i your you u	o dati	101121119.	<i></i>	
<b>Note:</b> Form 1040-SS filers use line 4 only. Leav	ve lines 1, 2, 3, and 5 blank.					
-			1	60	,668.	
			2	4	,745.	
3 Federal income tax withheld from Form(s	s) W-2 and Form(s) 1099		3	10	,799.	
4 Amount you want refunded to you .			4		,654.	
5 Amount you owe			5		•	
	gnature Authorization (Be sure you get and		y of yo	our retu	rn)	
return (original or amended) I am now authorizing. I of send my return to the IRS and to receive from the for any delay in processing the return or refund, and Agent to initiate an ACH electronic funds withdrawal payment of my federal taxes owed on this return and authorization is to remain in full force and effect ur payment, I must contact the U.S. Treasury Financ business days prior to the payment (settlement) date taxes to receive confidential information necessary personal identification number (PIN) below is my sig	emplete. I further declare that the amounts in Part I abortonsent to allow my intermediate service provider, transme IRS (a) an acknowledgement of receipt or reason for reject the date of any refund. If applicable, I authorize the U (direct debit) entry to the financial institution account into dor a payment of estimated tax, and the financial institution it II notify the U.S. Treasury Financial Agent to terminate ial Agent at 1-888-353-4537. Payment cancellation request. I also authorize the financial institutions involved in the total answer inquiries and resolve issues related to the product of the income tax return (original or amended) I as	nitter, or electro ection of the trails. Treasury ar licated in the taon to debit the e the authoriza uests must be processing of payment. I furtle	enic retuents ansmissed its de la preparent to entry to entry to entry to entry to entre electron. To entre electron ele	urn originatesion, (b) the esignated aration sofo this accorden revoke (ed no lates at the extronic paramouledge	tor (ERO) the reason Financial tware for bunt. This cancel) a er than 2 yment of that the	
Electronic Funds Withdrawal Consent.						
Taxpayer's PIN: check one box only		9	1 8	4 1		
X I authorize GLOBAL TAXES LLC	to enter or generate	my PIN Ent		ligits, but	as my	
	firm name iginal or amended) I am now authorizing.			all zeros		
	n the income tax return (original or amended) I am r your return is filed using the Practitioner PIN meth					
Your signature ▶	Date ▶ _					
Spouse's PIN: check one box only						
I authorize	to enter or generate	my DINI			as my	
	firm name		er five d	ligits, but	as my	
signature on the income tax return (or	iginal or amended) I am now authorizing.			all zeros		
	n the income tax return (original or amended) I am r your return is filed using the Practitioner PIN meth					
Spouse's signature ▶	Date <b>▶</b>					
	ner PIN Method Returns Only—continue below	1				
Part III Certification and Authenticat	ion — Practitioner PIN Method Only					
ERO's EFIN/PIN. Enter your six-digit EFIN follo	owed by your five-digit self-selected PIN. 5 8	7 2 7 8	8 6 er all zer	1 9 8	9	
authorized to file for tax year indicated above for the	ich is my signature for the electronic individual income t ne taxpayer(s) indicated above. I confirm that I am subn b. 1345, Handbook for Authorized IRS e-file Providers of I	nitting this retu	rn in ac	ccordance		
ERO's signature ▶	Date <b>▶</b>					
	Must Retain This Form — See Instructions					
	This Form to the IRS Unless Requested To	Do So				