Form 8879
(Rev. August 2020)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879.
Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpay	er's name Social se	curity numb	er
NIT	ESH DASARI 137-	06-5623	3
Spouse	's name Spouse's	social secu	irity number
LAK	SHMI DASARI 824-	49-0689	9
Part	Tax Return Information – Tax Year Ending December 31, (Enter year yo	u are aut	thorizing.)
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	126,850
2	Total tax	. 2	14,031.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	. 3	11,784.
4	Amount you want refunded to you	. 4	1,324.
5	Amount you owe		•

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

	6 5 6 2 3
X lauthorize GLOBAL TAXES LLC	to enter or generate my PIN Enter five digits, but
ERO firm name signature on the income tax return (original or amended) I am now	don't enter all zeros
I will enter my PIN as my signature on the income tax return (originif you are entering your own PIN and your return is filed using the	
below.	e Fractitioner Fin method. The End must complete Fart in
Your signature	Date ►
Spouse's PIN: check one box only	
	to enter or generate my PIN 9 0 6 8 9 as my
X I authorize GLOBAL TAXES LLC	
signature on the income tax return (original or amended) I am now	Enter five digits, but don't enter all zeros
	5
I will enter my PIN as my signature on the income tax return (original sector of the s	
if you are entering your own PIN and your return is filed using the	e Practitioner PIN method. The ERO must complete Part II
below.	
Spouse's signature 🕨	Date 🕨
Practitioner PIN Method Returns 0	Only—continue below
Part III Certification and Authentication – Practitioner PIN M	Aethod Only
EDO's EFIN/DIN Enter your air digit EFIN followed by your five digit cold a	selected PIN. 5 8 7 2 7 8 6 1 9 8 9
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-s	
	Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the elect	tronic 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
I certify that the above numeric entry is my PIN, which is my signature for the elect authorized to file for tax year indicated above for the taxpayer(s) indicated above, requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorize	. I confirm that I am submitting this return in accordance with the
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authorized to file for tax year indicated above for the taxpayer(s) indicated above. requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorize	I confirm that Lam submitting this return in accordance with the ed IRS <i>e-file</i> Providers of Individual Income Tax Returns. Date ►