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 ADITYA VELALA 183-51-6467 Spouse's name Spouse's social security number SWATHI KONDAVETI 269-93-0543 Part I Tax Return Information - Tax Year Ending December 31, 2021 (Enter 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 1 126,401. 2 2 11,872. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 10,710. Amount you want refunded to you 4 4 2,138. 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. made Dible al

Taxpayer's PIN: check one box only				
X lauthorize GLOBAL TAXES LLC	to enter or generate my PIN	my		
ERO firm name	Enter fine dialte but			
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 ref	turn (original or amended) I am now authorizing. Check this box o	only		
	using the Practitioner PIN method. The ERO must complete Par			
below.				
Your signature V. Adille	Date > 02/20/22			
Four signature V. Forday				
Spouse's PIN: check one box only				
X lauthorize GLOBAL TAXES LLC		my		
signature on the income tax return (original or amended)	Lam now authorizing Enter five digits, but don't enter all zeros			
	urn (original or amended) I am now authorizing. Check this box o			
	using the Practitioner PIN method. The ERO must complete Par			
	using the Fractitioner Fix method. The ERO must complete Par	n III		
below.				
1				
Spouse's signature K. Swann	Date 02/22/22			
Practitioner PIN Method R	eturns Only—continue below			
Part III Certification and Authentication - Practition	er PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-d				
	Don't enter all zeros			
I certify that the above numeric entry is my PIN, which is my signature for authorized to file for tax year indicated above for the taxpayer(s) indicated	in the electronic individual income tax return (original or amended) I am r	now		
requirements of the Practitioner PIN method and Pub. 1345, Handbook for	r Authorized IRS e-file Providers of Individual Income Tax Returns.	uic.		
FROM signature b	Data			
ERO's signature	Date >			

RO's signature	Date				
	ERO Must Retain This Fo Don't Submit This Form to the IF				
or Papapuork Paduatian A	A Nation and usual tou action instructions		DEN 02/16/22 PBO	Form 8879 (Bey 0)	