Form 8879
(Rev. January 2021)
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)

T.....

Тахрау	er's name		Social securit	y number							
PRA	SANNA KUMAR CHINTHAPATLA		792-88-7191								
Spouse	's name		Spouse's soci	ial security r	number						
Par	Tax Return Information — Tax Year Ending December 31,	vear vou ai	re author	izina.)							
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. 2021 (Enter year you are authorizing.)											
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.										
1	Adjusted gross income			1	83,724.						
2	Total tax			2	11,341.						
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	12,685.						
4	Amount you want refunded to you			4	1,344.						
5	Amount you owe			5							
Part	Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)										

Under penalties of periury. 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

X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN
				ERO firm name	

	8	7	1	9	1	as				
Enter five digits, but don't enter all zeros										

my

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 signature 🕨

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

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.

Spouse's signature D							 				
	Practitioner PIN Method Returns Only—continue	bel	ow								
Part III Ce	ertification and Authentication – Practitioner PIN Method Only										
ERO's EFIN/PI	IN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8			8 nter a	 	9	8	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 🕨			
Do	ERO Must Retain This Form — Se n't Submit This Form to the IRS Unles		
For Donomucul: Deduction Act Natio		DEV 04/01/22 DDO	Earm 8879 (Bay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

E 104(artment of the Treasury-Internal Revenue Serv S. Individual Income Tax		(99) urn	20	21	OMB No. 154	5-0074	IRS Us	se Only	—Do not w	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single D Married filing jointly U Married filing jointly U checked the MFS box, enter the ron is a child but not your dependent	name of	-) Head c ked the HOH						
Your first name	e and m	ddle initial	Last na	me							Your so	cial securi	ty number
PRASANN	A KUI	MAR	CHIN	THAP	TLA						792-	88-719	1
				me							Spouse	's social se	curity number
Home address 13145 N		er and street). If you have a P.O. box, see HWY 183	e instructi	ons.					Apt. no. 317		Check I	here if you,	on Campaign , or your htly, want \$3
City, town, or p	oost offi	ce. If you have a foreign address, also co	omplete s	paces be	ow.	Sta	ite	ZIP o					Checking a
AUSTIN						T	X	78	750		box bel	ow will not	t change
Foreign countr	y name			Foreign p	rovince/stat	te/coun	ty	Fore	gn postal	code	your ta	k or refund	
												You	Spouse
At any time du	uring 20	021, did you receive, sell, exchange	, or othe	rwise di	spose of a	any fina	ancial interest	in any	virtual	curre	ncy?	Yes	X No
Standard Deduction		eone can claim:	•				a dependent						
Age/Blindnes	s You:	Were born before January 2, 1	957	Are bl	ind S	pouse	: 🗌 Was b	orn bet	ore Jan	uary 2	2, 1957	🗌 ls b	lind
Dependent		instructions):		(2) S	Social secu number	rity	(3) Relations	ship		if q		r (see instru	uctions): ther dependents
lf more than four	(1)	Lasthane							Orma		cuit		
dependents,													
see instruction	s ——												
and check here ►													
	1	Wages, salaries, tips, etc. Attach I	Form(s)	W-2							. 1		<u> </u>
Attach	2a		2a	VV Z .	· · · i	 ьт	axable intere	•		•	. <u>1</u> 2b		05,724.
Sch. B if	3a	· ·	3a				Drdinary divid			·	. <u>20</u> 3b		
required.	 √4a		4a				axable amou			·	. 4b		
	5a		5a				axable amou			•	. 5b		
Standard	6a		6a				axable amou			•	. 6b		
Deduction for-	7	Capital gain or (loss). Attach Sche		frequire	d If not re					► [7		
 Single or Married filing 	8	Other income from Schedule 1, lir						•		-	. 8		
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,								•	► 9		83,724.
\$12,550Married filing	10	Adjustments to income from Sche						•		•	. 10		
jointly or	11	Subtract line 10 from line 9. This is						•		•	► <u>11</u>		83,724.
Qualifying widow(er),	12a	Standard deduction or itemized						2a		,55			05,721.
\$25,100 • Head of	b	Charitable contributions if you take				,		2b		30			
household,	c	Add lines 12a and 12b								50	. 12	c	12,850.
\$18,800 If you checked	13	Qualified business income deduct		 . Form ^g	995 or Fo	 rm 890		•		·	. 13		-2,030.
any box under	14	Add lines 12c and 13						•		•	. 14		12,850.
Standard Deduction,	15	Taxable income. Subtract line 14						-		·	. 15		70,874.
see instructions.)					0, 0110		•		•		·	

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2021)

Form 1040 (202	1)								Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	11,341.
	17	Amount from Schedule 2, line	e3					17	
	18	Add lines 16 and 17						18	11,341.
	19	Nonrefundable child tax cred	lit or credit for o	ther depender	nts from Schedul	e8812		19	
	20	Amount from Schedule 3, line	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	11,341.
	23	Other taxes, including self-er	nployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is y	our total tax				. 🕨	24	11,341.
	25	Federal income tax withheld	from:			1 1			
	а	Form(s) W-2				25a 12	,685.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	,			25c			
	d	Add lines 25a through 25c .						25d	12,685.
If you have a	26	2021 estimated tax payments						26	
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC) .				27a			
		Check here if you were b							
		January 2, 2004, and you taxpayers who are at least ag							
	b	Nontaxable combat pay elec		1 1					
	c	Prior year (2019) earned inco				-			
	28	Refundable child tax credit or		L	Schedule 8812	28			
	29	American opportunity credit				29			
	30	Recovery rebate credit. See i				30			
	31	Amount from Schedule 3, line				31			
	32	Add lines 27a and 28 through					lits 🕨	32	
	33	Add lines 25d, 26, and 32. Th		•				33	12,685.
Defendel	34							34	1,344.
Refund	35a	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid Amount of line 34 you want refunded to you. If Form 8888 is attached, check here							1,344.
Direct deposit?	►b	Routing number $0 2 1 0 0 3 2 2 \mathbf{c} Type: Checking X Savings$							
See instructions.	►d	Account number 4 8 3					0		
	36	Amount of line 34 you want a				36			
Amount	37	Amount you owe. Subtract I					. 🕨	37	
You Owe	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another							
Designee		tructions	•			. —	omplete k	below.	X No
•		signee's		Phone			onal identi		
	nai	ne 🕨		no. 🕨		numl	oer (PIN) 🕨		
Sign		der penalties of perjury, I declare the ief, they are true, correct, and comp							
Here									, ,
	YO	ur signature		Date	Your occupation				nt you an Identity N, enter it here
Joint return?					IT APPLICA	TION ENGINEE		inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occupa	tion			it your spouse an
Keep a copy for your records.	•								ection PIN, enter it here
your rooorao.								inst.) 🕨	
		one no. (816)419-6062		Email address	KUMARPRASA	N01@GMAIL.CC			
Paid		parer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAN	1 04/09/2022	P02083		Self-employed
Use Only		m's name ► GLOBAL TAX							678)965-9522
		n's address ► 2530 Pebbl		n Cummin	g GA 30041		Firm	's EIN ▶	
Go to www.irs.g	ov/Forn	n1040 for instructions and the lates	t information.		BAA	REV 04/01/22 PRO			Form 1040 (2021)