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 s	Social security number	
SRIKANTH CHEGURI	320-	320-35-1568	
Spouse's name		Spouse's social security number	
RUPA CHIRRA	971	971-97-9536	
Part I Tax Return Information — Tax Year Ending December 31, 202	21 (Enter year ye	ou are auth	orizing.)
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 1	
1 Adjusted gross income		. 1	58,205.
2 Total tax			3,505.
Federal income tax withheld from Form(s) W-2 and Form(s) 1099			7,733.
4 Amount you want refunded to you		. 4	7,590.
5 Amount you owe		-	ur return)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original o			
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or rea for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I auth-Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution a payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cance business days prior to the payment (settlement) date. I also authorize the financial institutions invo taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or am Flactoral Europe Withdraya).	orize the U.S. Treas account indicated in ial institution to deb to terminate the auti- illation requests mulyed in the procession to the payment.	ury and its de the tax prepa it the entry to norization. To st be receiveng of the elections and the truther acki	esignated Financial iration software for this account. This o revoke (cancel) a ed no later than 2 ctronic payment of nowledge that the
Electronic Funds Withdrawal Consent.			
Taxpayer's PIN: check one box only		5 1 5	6 8
X I authorize GLOBAL TAXES LLC to enter or ERO firm name	generate my PIN	Enter five di	
signature on the income tax return (original or amended) I am now authorizing.		don't enter a	all zeros
I will enter my PIN as my signature on the income tax return (original or amendatify you are entering your own PIN and your return is filed using the Practitioner below.			
Your signature srikanthch	Date ► 02/02/2	2022	
Spouse's PIN: check one box only			
· —	generate my PIN	7 9 5	3 6 as my
ERO firm name	generate my r m	Enter five di	igits, but
signature on the income tax return (original or amended) I am now authorizing.		don't enter a	all zeros
I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN and your return is filed using the Practitioner below.	,	•	-
Spouse's signature ► rupachirra	Date ▶ 02/02/	2022	
Practitioner PIN Method Returns Only—continu	ue below		
Part III Certification and Authentication — Practitioner PIN Method Only	'		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5 8 7 2 Don	7 8 6 2	1 9 8 9 os
I certify that the above numeric entry is my PIN, which is my signature for the electronic individua authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Pro	I am submitting this	s return in ac	cordance 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