

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) ►

Taxpayer's name	Social security number
CHANDRAKANTH REDDY PISATI	699-81-6361
Spouse's name	Spouse's social security number

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	18,896.
2	Total tax	2	603.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	2,204.
4	Amount you want refunded to you	4	3,001.
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.

Taxpayer's PIN: check one box only

I authorize GLOBAL TAXES LLC to enter or generate my PIN as my
ERO firm name
signature on the income tax return (original or amended) I am now authorizing.

1	6	3	6	1
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Enter five digits, but
don't enter all zeros

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 ► 02/08/2022**Spouse's PIN: check one box only**

I authorize to enter or generate my PIN as my
ERO firm name
signature on the income tax return (original or amended) I am now authorizing.

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Enter five digits, but
don't enter all zeros

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 ►

Date ►

Practitioner PIN Method Returns Only—continue 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	7	8	6	1	9	8	9
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Don't enter all zeros

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 ►

Date ►

**ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So**

Filing Status

Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW)

Check only one box.

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ►

Your first name and middle initial CHANDRAKANTH REDDY	Last name PISATI	Your social security number 699-81-6361		
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number		
Home address (number and street). If you have a P.O. box, see instructions. 701 COWBOYS PKWY		Apt. no. 2001	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse	
City, town, or post office. If you have a foreign address, also complete spaces below. IRVING		State TX		ZIP code 75063
Foreign country name	Foreign province/state/county	Foreign postal code		

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? Yes No**Standard Deduction** **Someone can claim:** You as a dependent Your spouse as a dependentDeduction Spouse itemizes on a separate return or you were a dual-status alien**Age/Blindness** **You:** Were born before January 2, 1957 Are blind **Spouse:** Was born before January 2, 1957 Is blind

Dependents (see instructions): If more than four dependents, see instructions and check here ► <input type="checkbox"/>	(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see instructions):	
			Child tax credit	Credit for other dependents		
1	Wages, salaries, tips, etc. Attach Form(s) W-2				1	18,896.
2a	Tax-exempt interest	2a	b	Taxable interest	2b	
3a	Qualified dividends	3a	b	Ordinary dividends	3b	
4a	IRA distributions	4a	b	Taxable amount	4b	
5a	Pensions and annuities	5a	b	Taxable amount	5b	
6a	Social security benefits	6a	b	Taxable amount	6b	
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ►				7	
8	Other income from Schedule 1, line 10				8	
9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income				9	18,896.
10	Adjustments to income from Schedule 1, line 26				10	
11	Subtract line 10 from line 9. This is your adjusted gross income				11	18,896.
12a	Standard deduction or itemized deductions (from Schedule A)	12a	12b	12c	12d	12e
b	Charitable contributions if you take the standard deduction (see instructions)	300.			12,850.	
c	Add lines 12a and 12b				13	
13	Qualified business income deduction from Form 8995 or Form 8995-A				14	12,850.
14	Add lines 12c and 13				15	6,046.
15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-					

Standard Deduction for—

- Single or Married filing separately, \$12,550
- Married filing jointly or Qualifying widow(er), \$25,100
- Head of household, \$18,800
- If you checked any box under **Standard Deduction**, see instructions.

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

Form 1040 (2021)

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____ . . .	16	603.		
17	Amount from Schedule 2, line 3	17			
18	Add lines 16 and 17	18	603.		
19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812	19			
20	Amount from Schedule 3, line 8	20			
21	Add lines 19 and 20	21			
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	603.		
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.		
24	Add lines 22 and 23. This is your total tax ►	24	603.		
25	Federal income tax withheld from:				
a	Form(s) W-2	25a	2,204.		
b	Form(s) 1099	25b			
c	Other forms (see instructions)	25c			
d	Add lines 25a through 25c	25d	2,204.		
26	2021 estimated tax payments and amount applied from 2020 return	26			
27a	Earned income credit (EIC)	27a	No		
Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions ► <input type="checkbox"/>					
b	Nontaxable combat pay election	27b			
c	Prior year (2019) earned income	27c			
28	Refundable child tax credit or additional child tax credit from Schedule 8812	28			
29	American opportunity credit from Form 8863, line 8	29			
30	Recovery rebate credit. See instructions	30	1,400.		
31	Amount from Schedule 3, line 15	31			
32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits ►	32	1,400.		
33	Add lines 25d, 26, and 32. These are your total payments ►	33	3,604.		
Refund	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,001.		
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here ► <input type="checkbox"/>	35a	3,001.		
Direct deposit? See instructions.	► b Routing number 0 1 1 0 0 0 1 3 8 ► c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings				
	► d Account number 0 0 4 6 6 6 4 8 4 1 9 2				
36	Amount of line 34 you want applied to your 2022 estimated tax ►	36			
Amount You Owe	37 Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions ►	37			
	38 Estimated tax penalty (see instructions) ►	38			
Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions ► <input type="checkbox"/> Yes. Complete below. <input checked="" type="checkbox"/> No				
Joint return? See instructions. Keep a copy for your records.	Designee's name ►	Phone no. ►	Personal identification number (PIN) ►		
Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ►		
Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) ►	
Phone no. (934) 777-9985		Email address CHANDU3635@GMAIL.COM			
Paid Preparer Use Only	Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM	Preparer's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM	Date 02/05/2022	PTIN P02082703	Check if: <input type="checkbox"/> Self-employed
	Firm's name ► GLOBAL TAXES LLC			Phone no. (678) 965-9522	
	Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041			Firm's EIN ► 30-1017196	