### **IRS** *e-file* Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service 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 MADDULETY SWAMY YETTIKADI 822-10-3226 Spouse's name Spouse's social security number 355-71-6917 SUPRAJA AKULA Tax Return Information – Tax Year Ending December 31, 2020 (Enter year you are authorizing.) Part I 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. Adjusted gross income 108,287. 1 1 9,945. 2 2 . . . . . . . . . . . 3 3 11,673. 4 4 5,328. 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

X	l authorize	GLOBAL TAXES	LLC	to enter or generate my PIN

Ent	er fiv i't er	/e dig	gits, all ze	but	as
0	3	2	2	6	

Enter five digits, but don't enter all zeros

7

as mv

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 Maddulety Swamy Vettikadi

#### Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC

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 <b>&gt;</b> <sup>supraja Akula</sup>	Date 🕨	_ 07/14/20	)21
Practitioner PIN Method Returns On	ly—continue below		
Part III Certification and Authentication – Practitioner PIN Me	thod Only		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-self	ected PIN. 5 8	7 2 7 8	6 1 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 Date Date		
ERO Must Retain This Form – See Instructions		
Don't Submit This Form to the IRS Unless Requested To Do So	 0070 -	

Date > 07/14/2021

to enter or generate my PIN

1 6 9

# 8879 FORM

Final Audit Report

2021-07-14

Created:	2021-07-14	
By:	swa m (swamy.ymln@gmail.com)	
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Transaction ID:	CBJCHBCAABAAfs6XyRVhFMWCmn0B-LjYE6R7eOXWHamz	

## "8879 FORM" History

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