Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

ERO's signature ▶

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	
VENUGOPAL NAIDU KONENI	317-63-5989	
Spouse's name	Spouse's social security number	
USHA RAMINENI	677-25-	
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 . 1
1 Adjusted gross income		1 170,617.
2 Total tax		2 20,292.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 15,331.
4 Amount you want refunded to you		5 4.961.
5 Amount you owe		
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended	Leep a cop	horizing and to the best of
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmosend my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejfor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the UAgent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indepayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requirements to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I at Electronic Funds Withdrawal Consent.	ection of the transition of the transition to debit the enth of the authorizations of the processing of payment. I further than the processing of payment of the transition of the processing of	ansmission, (b) the reason and its designated Financial ax preparation software for entry to this account. This ation. To revoke (cancel) a e received no later than 2 if the electronic payment of ther acknowledge that the
Taxpayer's PIN: check one box only	3	5 9 8 9
X Lauthorize GLOBAL TAXES LLC to enter or generate	mv PIN —	ter five digits, but
ERO firm name		n't enter all zeros
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		
I will enter my PIN as my signature on the income tax return (original or affeited) I am if you are entering your own PIN and your return is filed using the Practitioner PIN methodology. Your signature ▶ Date ▶	nod. The ERG	must complete Part III
Spouse's PIN: check one box only		TTTT
I authorize 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 if you are entering your own PIN and your return is filed using the Practitioner PIN met	Er do now authoriz	nter five digits, but on't enter all zeros ing. Check this box only
below.		,
Spouse's signature ▶ Q.U.S.V.o.— Date ▶	04/0	4/2022
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.	3 7 2 7 Don't er	8 6 1 9 8 9 Iter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sub requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	muuna uns re	tutti ili accordance with the