

IRS e-file Signature Authorization

▶ **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 SAIKIRAN AKABILVAM	Social security number 709-66-7185
Spouse's name KAVYA SREE MUPATHKAL	Spouse's social security number 981-97-9946

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	132,599.
2 Total tax	2	15,147.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	24,695.
4 Amount you want refunded to you	4	10,948.
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

6	7	1	8	5
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 as 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 GLOBAL TAXES LLC to enter or generate my PIN

7	9	9	4	6
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 as 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.

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
---	---	---	---	---	---	---	---	---	---	---

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 [X] 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

SAIKIRAN AKABILVAM 709-66-7185
KAVYA SREE MUPATHKAL 981-97-9946
1119 S LANDRY LN
STILLWATER OK 74074

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? [] Yes [X] No

Standard Deduction Someone can claim: [] You as a dependent [] Your spouse as a dependent
[] 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

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents

Main tax calculation table with rows 1-15. Line 1: 132,599. Line 9: 132,599. Line 11: 132,599. Line 15: 107,499.

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	15,147.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	15,147.
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	15,147.
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	15,147.
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	24,695.
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	24,695.
26	2021 estimated tax payments and amount applied from 2020 return	26	
27a	Earned income credit (EIC) 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"/>	27a	
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	26,095.
Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	10,948.
	35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	10,948.
Direct deposit? See instructions.	b Routing number 1 0 3 0 0 0 0 1 7 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d Account number 3 0 5 0 0 7 7 1 0 7 4 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	

If you have a qualifying child, attach Sch. EIC.

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

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 DEVELOPER	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 HOME MAKER	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. (551) 214-8478 Email address SAIKIRAN0878@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 04/18/2022	PTIN P02082703	Check if: <input type="checkbox"/> Self-employed
Firm's name GLOBAL TAXES LLC	Firm's address 2530 Pebble Creek Ln Cumming GA 30041		Phone no. (678) 965-9522	Firm's EIN 30-1017196



Oklahoma Individual Income Tax Declaration for Electronic Filing

2021
Form 511-EF

NOTE: Do not mail Oklahoma Tax Return - Form 511 or Form 511-NR.

See instructions on Page 2 to determine if you are required to send Form 511-EF to the OTC.

Your first name and middle initial SAIKIRAN	Last name AKABILVAM	Your social security number 7 0 9 6 6 7 1 8 5
If a joint return, spouse's first name and middle initial KAVYA SREE	Last name MUPATHKAL	Spouse's social security number 9 8 1 9 7 9 9 4 6
Mailing address (number and street, including apartment number, rural route or PO Box) 1119 S LANDRY LN		Filing status 2
City, State, ZIP STILLWATER OK 74074		Total number of exemptions 2

Part One - Tax Return Information (whole dollars only)

1	Oklahoma Adjusted Gross Income (511, Line 7) or Adjusted Gross Income: All Sources (511-NR, Line 7)	1	132599	00
2	Oklahoma Income Tax and Use Tax (511, Line 21 or 511-NR, Line 25)	2	5540	00
3	Oklahoma Income Tax Payments and Credits (511, Line 32 or 511-NR, Line 33)	3	6061	00
4	Refund (511, Line 37 or 511-NR, Line 38)	4	521	00
5	Balance Due (511, Line 42 or 511-NR, Line 43)	5	0	00

For a balance due return with an electronic payment, complete line 6b below. The due date for an electronic payment is April 20th. For a balance due return with a non-electronic payment, enclose a payment with the 511-V and submit on or before the due date of April 15th. If the Internal Revenue Code (IRC) of the IRS provides for a later due date, your payment may be made by the later due date and will be considered timely. If the due date falls on a weekend or legal holiday when OTC offices are closed, your payment is due the next business day.

Part Two - Declaration of Taxpayer

6a I consent that my refund be directly deposited as designated in the electronic portion of my 2021 Oklahoma income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.

6b I authorize the Oklahoma State 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 Oklahoma taxes owed on this return and/or a payment of estimated tax. 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.

If I have filed a balance due return, I understand that if the Oklahoma Tax Commission (OTC) does not receive full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable interest and penalties.

Under penalties of perjury, I declare I have compared the information contained on my return, with information I have provided to my Electronic Return Originator (ERO), and the amounts described in Part One above, agree with the amounts shown on the corresponding lines of my 2021 Oklahoma income tax return. To the best of my knowledge and belief, my return is true, correct, and complete. I consent that my return, including this declaration and accompanying schedules and statements, be sent to the OTC by my ERO.

In addition, by using a computer system and software to prepare and transmit my return electronically, I consent to the disclosure to the Oklahoma Tax Commission of all information pertaining to my use of the system and software and to the transmission of my tax return electronically.

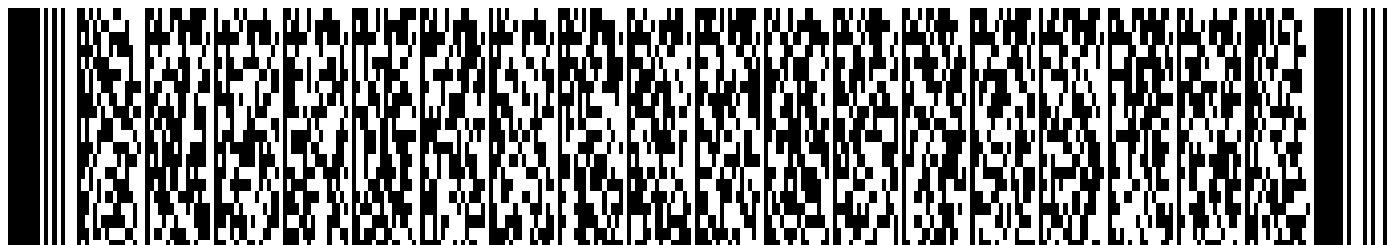
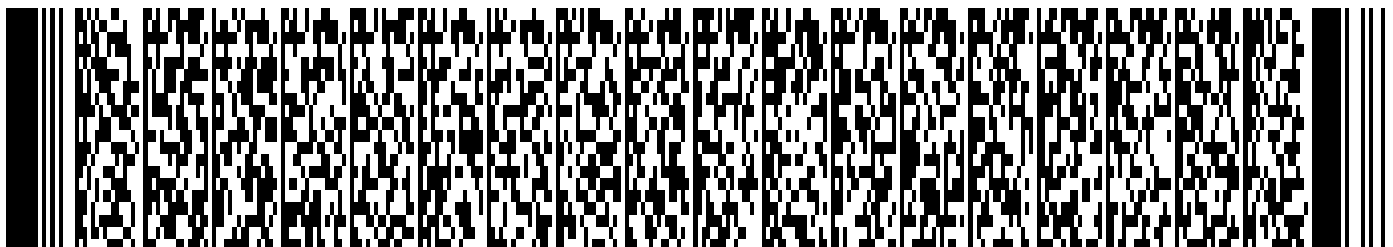
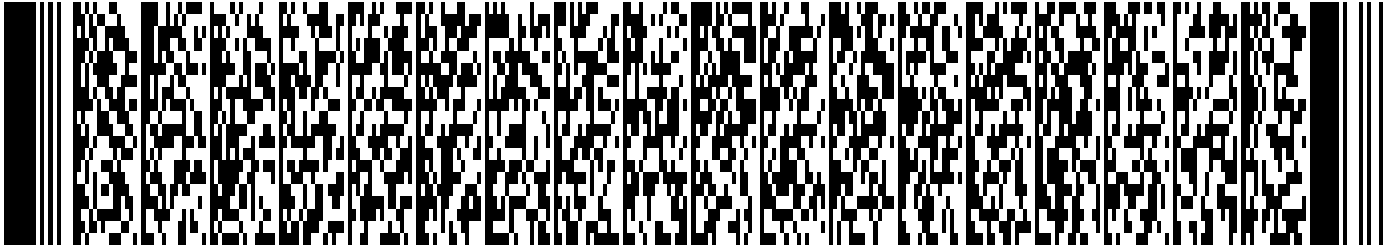
Sign Here: _____
Your Signature Date Spouse's Signature (If joint return, both must sign) Date

Part Three - Declaration of Electronic Return Originator (ERO) and Paid Preparer

I declare I have reviewed the above taxpayer's return and the entries on Form 511-EF are complete and correct to the best of my knowledge. (EROs who are collectors are not responsible for reviewing the taxpayer's return; however, they must ensure Form 511-EF accurately reflects the data on the return.) I have obtained the taxpayer's signature on Form 511-EF and I have provided the taxpayer with a copy of all forms and information to be filed with the OTC, and have followed all other requirements described in Pub. 1345, Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2021). If I am also a Paid Preparer, under penalties of perjury I declare I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO Use Only	ERO or Paid Preparer's Signature	Date	PTIN
	_____	04/18/2022	
Paid Preparer Use Only	Paid Preparer Signature	Date	PTIN
	_____	04/18/2022	P02082703
Firm name (or yours if self-employed), SYAM PRIYA RAM SAGAR GUPTA TALLAM			
address and ZIP 2530 PEBBLE CREEK LN CUMMING GA 30041			
Phone number (678) 965-9522			

**FAILURE TO SUBMIT THIS PAGE
WILL DELAY PROCESSING OF YOUR RETURN**



Note: This is to be mailed with original return. Please DO NOT attach this sheet when filing the payment voucher, Form 511V.



Oklahoma Resident Income Tax Return

Your Social Security Number

709-66-7185

Place an 'X' in this box if this taxpayer is deceased →

Spouse's Social Security Number
(joint return only)

981-97-9946

Place an 'X' in this box if this taxpayer is deceased →

AMENDED RETURN!

Place an 'X' in this box if this is an amended 511. See Schedule 511-I. →

Name and Address - Please Print or Type

Your first name	Middle initial	Last name	If a joint return, spouse's first name	Middle initial	Last name	
SAIKIRAN		AKABILVAM	KAVYA SREE		MUPATHKAL	
Mailing address (number and street, including apartment number, rural route or PO Box)			City	State	ZIP or Postal Code	Country
1119 S LANDRY LN			STILLWATER	OK	74074	

Filing Status

1 Single

2 Married filing joint return (even if only one had income)

3 Married filing separate
(If spouse is also filing, list name and SSN in the boxes)

Name	SSN

4 Head of household with qualifying person

5 Qualifying widow(er) with dependent child
• Please list the year spouse died in box at right:

* Note: If claiming Special Exemption, see instructions on page 9 of 511 Packet.

	Regular	* Special	Blind			
Exemptions	1	+	+	<input type="checkbox"/>	1 (a)	
	1	+	+		<input type="checkbox"/>	1 (b)
	Number of dependents			<input type="checkbox"/>	(c)	
	Add the Totals from boxes (a), (b) and (c). Enter the TOTAL here:				<input type="checkbox"/>	2

Note: If you may be claimed as a dependent on another return, enter "0" in the Total box for your regular exemption.

Age 65 or Older? (Please see instructions) Yourself Spouse

PART ONE: TO ARRIVE AT OKLAHOMA ADJUSTED GROSS INCOME

Round to Nearest Whole Dollar

1	Federal adjusted gross income (from Federal 1040 or 1040-SR).....	1	132599.00
2	Oklahoma Subtractions (provide Schedule 511-A).....	2	.00
3	Line 1 minus line 2.....	3	132599.00
4	Out-of-state income, except wages. Describe (4a) (Provide Federal schedule with detailed description; see instructions).....	4b	.00
5	Line 3 minus line 4b.....	5	132599.00
6	Oklahoma Additions (provide Schedule 511-B).....	6	.00
7	Oklahoma adjusted gross income (line 5 plus line 6)..... (If line 7 is different than line 1, provide a copy of your Federal return.)	7	132599.00

PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS

8	Oklahoma Adjustments (provide Schedule 511-C).....	8	.00
9	Oklahoma income after adjustments (line 7 minus line 8).....	9	132599.00

STOP AND READ: If line 4b is zero, complete lines 10-11. If line 4b is more than zero, see Schedule 511-E and do not complete lines 10-11.



Name(s) shown on Form 511: SAIKIRAN AKABILVAM & KAVYA SREE MUPATHKAL

Your Social Security Number: 709-66-7185

PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS continued

Table with 3 columns: Line number, Description, Amount. Includes lines 10-14 with values like 12700.00, 2000.00, 14700.00, 117899.00, 5540.00.

STOP AND READ: If line 7 is equal to or larger than line 1, complete lines 15 and 16. If line 7 is smaller than line 1, complete Schedules 511-F and 511-G.

Table with 3 columns: Line number, Description, Amount. Includes lines 15-19 with values like .00, .00, .00, .00, 5540.00.

PART THREE: TAX, CREDITS AND PAYMENTS

Table with 3 columns: Line number, Description, Amount. Includes lines 20-29 with values like .00, 5540.00, 6061.00, .00, .00, .00, .00, .00, .00, .00.



Name(s) shown on Form 511: SAIKIRAN AKABILVAM & KAVYA SREE MUPATHKAL

Your Social Security Number: 709-66-7185

PART THREE: TAX, CREDITS AND PAYMENTS contined

Table with 3 columns: Line number, Description, Amount. Rows 30-32 showing payments and credits totaling 6061.00.

PART FOUR: REFUND

Table with 3 columns: Line number, Description, Amount. Rows 33-34 showing refund amount of 521.00.

Schedule 511-H provides you with the opportunity to make a financial gift from your refund to a variety of Oklahoma organizations. Please place the line number of the organization from Schedule 511-H in the box below.

Table with 3 columns: Line number, Description, Amount. Rows 35-37 showing deductions and refund amount of 521.00.

Direct Deposit Note: Verify your account and routing numbers are correct. Is this refund going to or through an account that is located outside of the United States? Deposit my refund in my: [X] checking account, Routing Number: 103000017; [] savings account, Account Number: 305007710742

PART FIVE: AMOUNT YOU OWE

Table with 3 columns: Line number, Description, Amount. Rows 38-42 showing tax due and total amount owed of 0.00.

Under penalty of perjury, I declare the information contained in this document, and all attachments and schedules, is true and correct to the best of my knowledge and belief. Place an 'X' in this box if the Oklahoma Tax Commission may discuss this return with your tax preparer.

Table with 3 columns: Taxpayer's signature, Spouse's signature, Paid Preparer's signature. Includes occupation (DEVELOPER, HOME MAKER) and address (2530 PEBBLE CREEK LN, CUMMING, GA 30041).

Do not staple documentation to this form. To attach items, please use a paper clip. Mailing Address for this form: PO Box 26800, Oklahoma City, OK 73126-0800