

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](http://www.irs.gov/Form8879) for the latest information.

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Su( mission I) entification num( er (SID) ▶

Taxpayer's name <b>SATHISH NAGARAJAN</b>	Social security number 168-86-8623
Spouse's name <b>KANAGAPRIYA SUBRAMANIAN PILLAI</b>	Spouse's social security number 995-84-3283

#### Part Return information Year Ending December ' 2022 (Enter year you are authorized-in. )

Enter whole dollars only on lines 1 through 4.

Note Form 1099-SS filers use line 4 only. Leave lines 1 through 3.

<input checked="" type="checkbox"/> 4) (Total) Gross income	143,726.
Total tax	14,656.
Federal income tax withheld from Form(s) 1042 and Form(s) 1077	12,540.
Amount you want refunded to you	
Amount you owe	2,141.

#### Part Taxpayer Declaration and Signature Authorization **Be sure you get and keep a copy of your return**

I (or penalties of perjury) declare that I have examined a copy of the income tax return (original or amended) I am now authorized-in. (an) to the (rest of my 3rd) (le) . e an) (believing it is true) (correct) (an) 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 authorized-in. . I consent to allow (my intermediate service provider) transmitter or electronic return originator (R) to send my return to the IRS (an) to receive from the IRS (an) acknowledgment of receipt or reason for rejection of the transmission (an) (the reason for any delay in processing the return or refund) (an) (the date of any refund) . If applicable (I authorize the U.S. Treasury (an) its) (esi. nate) Financial 4. ent to initiate an (electronic funds) (direct) (entry to the financial institution account in) (icate) in the tax preparation software (are for payment of my federal taxes) (on this return) (or a payment of estimate) (tax) (an) the financial institution to) (e) (it the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial 4. ent to terminate the authorization. To revoke (cancel) a payment I must contact the U.S. Treasury Financial 4. ent at (888) . ' 5- . ' 7. 9ayment cancellation requests must (e receive) no later than 2 (business) days prior to the payment (settlement) (ate). I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer (inquiries) (an) resolve issues (relate) to the payment. I further acknowledge . e that the personal identification number (er) (9) (is) (is) my signature for the income tax return (original or amended) I am now authorized-in. (an) if applicable (my electronic funds) (with) (consent).

#### Taxpayer's Part Check one box only

- I authorize GLOBAL TAXES LLC to enter or generate my 9 as my ERO firm name **6 8 6 2 3** as my signature on the income tax return (original or amended) I am now authorized-in. . Enter five digits but don't enter all zeros
- I will enter my 9 as my signature on the income tax return (original or amended) I am now authorized-in. . Check this (only) if you are entering your own 9 and your return is filed using the Practitioner 9 method. The PR must complete Part III (below).

Our signature ▶ N. Sathish Date ▶ 03/13/2023

#### Spouse's Part Check one box only

- I authorize GLOBAL TAXES LLC to enter or generate my 9 as my ERO firm name **4 3 2 8 3** as my signature on the income tax return (original or amended) I am now authorized-in. . Enter five digits but don't enter all zeros
- I will enter my 9 as my signature on the income tax return (original or amended) I am now authorized-in. . Check this (only) if you are entering your own 9 and your return is filed using the Practitioner 9 method. The PR must complete Part III (below).

Spouse's signature ▶ S. Kanagapriya Date ▶ 03/13/2023

#### Practitioner PIN Method Returns Only—continue below

#### Part 7 Certification and Authentication Practitioner Part 8 Method Only

ERO's EF ID # . Enter your six digit EF ID (followed by your five digit self-select) 9 . **2 2 2 4 9 6 6 1 9 8 9**  
Don't enter all zeros

I certify that the above numeric entry is my 9 which is my signature for the electronic (in) (vi) (ual) income tax return (original or amended) I am now authorized-in. to file for tax year (in) (icate) (above) for the taxpayer(s) (in) (icate) (above). I confirm that I am submitting this return in accordance with the requirements of the Practitioner 9 method (an) Pub. (' - .) (an) (003 for 4th) (e) IRS e-file (9) (ers of (in) (vi) (ual) Income Tax Returns.

PR signature ▶ Date ▶

**ERO Must Retain This Form See Instructions**  
**Don't Submit This Form to the IRS unless Requested or So**