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 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID)		
Taxpayer's name	Social security number	
RAMBABU KODATI	001-55-7566	
Spouse's name	Spouse's social security number	
ANUSHA KODATI	955-96-8375	
**************************************	Enter year you a	re 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		1 116,163.
 Total tax		2 8,583. 3 13.799.
4 Amount you want refunded to you		
5 Amount you owe		4 5,216.
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a		
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or ame	<u> </u>	
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terr payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amende	the U.S. Treasury ar nt indicated in the ta stitution to debit the minate the authoriza n requests must be in the processing of the payment. I furtl	nd its designated Financial x preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of her acknowledge that the
Electronic Funds Withdrawal Consent.		
Taxpayer's PIN: check one box only	5	7 5 6 6
▼ I authorize GLOBAL TAXES LLC to enter or gene	erate mv PIN 🖳	er five digits, but
ERO firm name signature on the income tax return (original or amended) I am now authorizing.		't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.	method. The ERO	must complete Part III
Your signature V. Roundron Date	02/28	3/2023
Spouse's PIN: check one box only	r1	
I authorize GLOBAL TAXES LLC to enter or gene ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ente	8 3 7 5 as my er five digits, but 't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.		_
Spouse's signature ► K. Anusha Date Practitioner PIN Method Returns Only—continue be	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	12023
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.	2 2 2 4 9 6 Don't ente	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual inco authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers	submitting this retur	n in accordance with the
ERO's signature ▶ Date		***************************************
FRO Must Retain This Form — See Instruction	16	

Don't Submit This Form to the IRS Unless Requested To Do So