TAXABLE YEAR		FOF	RM
2024 California e-file Signature Authorization for Inc	lividuals	887	79
Your name	Your SSN		
Spouse's/RDP's name	Spouse's/RDP's SSN or ITIN		
Part I Tax Return Information (whole dollars only)			
1 California adjusted gross income (AGI). See instructions			
2 Amount you owe. See instructions			
3 Refund or no amount due. See instructions			
Part II Taxpayer Declaration and Signature Authorization (Be sure you obtain and keep a copy of your return.)			
ending December 31, 2024, and to the best of my knowledge and belief, it is true, correct, and complete. I further deci electronic return originator (ERO), transmitter, or intermediate service provider, including my name, address, and soci identification number (ITIN), and the amounts shown in Part I above agree with the information and amounts shown or income tax return. If applicable, I authorize an electronic funds withdrawal of the amount on line 2 and/or the estimate and on form FTB 8455, California e-file Payment Record for Individuals, or a comparable form. If applicable, I declare agrees with the direct deposit authorization stated on my return. If I have filed a joint return, this is an irrevocable app domestic partner (RDP) as an agent to authorize an electronic funds withdrawal or direct deposit. I authorize my ERO, provider to transmit my complete return to the Franchise Tax Board (FTB). If the processing of my return or refund is to my ERO, intermediate service provider, and/or transmitter the reason(s) for the delay or the date when the refu return, I understand that if the FTB does not receive full and timely payment of my tax liability, I remain liable for the tap penalties. I acknowledge that I have read and consent to the Electronic Funds Withdrawal Consent included on the cop	al security number on the correspond of tax payments a that direct deposi ointment of the of transmitter, or in <b>delayed</b> , <b>I autho</b> <b>nd was sent</b> . If I ax liability and all oy of my electroni	er (SSN) or individua ding lines of my elect as shown on my retu it refund amount on ther spouse/register ntermediate service <b>prize the FTB to disc</b> am filing a balance of applicable interest a ic income tax return.	al tax stronic irn line 3 red close due due . I have
selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, <b>Taxpayer's PIN: check one box only</b>	my Electronic Fu	inds Withdrawal Cor	nsent.
	o onton mu DIN		
ERO firm name	o enter my Pin	Do not enter all ze	eros
as my signature on my 2024 e-filed California individual income tax return.			0100
I will enter my PIN as my signature on my 2024 e-filed California individual income tax return. Check this box <b>on</b> return is filed using the Practitioner PIN method. The ERO must complete Part III below.	l <b>y</b> if you are enter	ing your own PIN an	nd you
Your signature  Date  Date			
Spouse's/RDP's PIN: check one box only			
L authorize	o enter my PIN		
ERO firm name		Do not enter all ze	eros
as my signature on my 2024 e-filed California individual income tax return.			
I will enter my PIN as my signature on my 2024 e-filed California individual income tax return. Check this h and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	box <b>only</b> if you a	are entering your ov	wn PIN
Spouse's/RDP's signature Date Date	•		
Practitioner PIN Method Returns Only continue below			
Part III Certification and Authentication — Practitioner PIN Method Only			
ERO's Electronic Filer Identification Number (EFIN)/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	er all zeros		
I certify that the above numeric entry is my PIN, which is my signature for the 2024 California individual income tax confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and FTE e-file Providers.	return for the tax 3 Pub. 1345, 2024	payer(s) indicated a 4 Handbook for Auth	lbove. horizec
ERO's signature  Date  Date			