DO NOT N	IAIL THIS FORM TO THE FTB
TAXABLE YEAR	FORM
2017, California e-file Signature Authorization for Indi	viduals 8879
Your name	Your SSN or ITIN
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. See instructions	1
2 Amount You Owe. See instructions	
3 Refund or No Amount Due. See instructions	3
Part II Taxpayer Declaration and Signature Authorization (Be sure you obtain and keep a copy of your return.)	
year ending December 31, 2017, and to the best of my knowledge and belief, it is true, correct, and complete. I further do to my electronic return originator (ERO), transmitter, or intermediate service provider (including my name, address, and tax identification number) and the amounts shown in Part I above agree with the information and amounts shown on the income tax return. If applicable, I authorize an electronic funds withdrawal of the amount on line 2 and/or the estimated t and on form FTB 8455, California e-file Payment Record for Individuals, or a comparable form. If applicable, I declare tha agrees with the direct deposit authorization stated on my return. If I have filed a joint return, this is an intervocable appoin agent to authorize an electronic funds withdrawal or direct deposit. I authorize the FTB to disc provider, and/or transmitter the reason(s) for the delay or the date when the refund was sent. If I am filing a balance or does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and consent to the Electronic Funds Withdrawal Consent included on the copy of my electronic income tax return. I number (PIN) as my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent included on the copy of my electronic funds withdrawal Consent included on the copy of my electronic funds withdrawal Consent included on the copy of my electronic funds withdrawal Consent included on the copy of my electronic funds withdrawal Consent included on the copy of my electronic funds withdrawal Consent included on the copy of my electronic funds withdrawal Consent included on the copy of my electronic funds withdrawal Consent included on the copy of my electronic funds withdrawal Consent included on the copy of my electronic funds withdrawal Consent included on the copy of my electronic funds withdrawal Consent included on the copy of my electronic funds withdrawal Consent included on the copy of my ele	social security number or individual corresponding lines of my electronic tax payments as shown on my return at direct deposit refund amount on line 3 ntment of the other spouse/RDP as an ice provider to transmit my complete close to my ERO, intermediate service due return, I understand that if the FTB d penalties. I acknowledge that I have have selected a personal identification
Taxpayer's PIN: check one box only	
L authorize to e	enter my PIN
ERO firm name	Do not enter all zeros
as my signature on my 2017 e-filed California individual income tax return.	
I will enter my PIN as my signature on my 2017 e-filed California individual income tax return. Check this box <b>only</b> in return is filed using the Practitioner PIN method. The ERO must complete Part III below.	f you are entering your own PIN and your
Your signature Date	
Spouse's/RDP's PIN: check one box only	
	enter my PIN
ERO firm name as my signature on my 2017 e-filed California individual income tax return.	Do not enter all zeros
I will enter my PIN as my signature on my 2017 e-filed California individual income tax return. Check this box and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	
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 EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	
I certify that the above numeric entry is my PIN, which is my signature for the 2017 California individual income tax ret confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and FTB Pub. 1 e-file Providers.	turn for the taxpayer(s) indicated above. I
ERO's signature Date	