Form **8879**

(Rev. August 2020)

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

internal nevenue Service				
Submission Identification Number (SID)				
Taxpayer's name		Social securit	y number	
SUNDEEP REDDY BOREDDY		048-21-	048-21-7774	
Spouse's name			al security number	
			_	
Part I Tax Return Information — Tax Y	ear Ending December 31, (E	Enter year you a	re authorizing.)	
Enter whole dollars only on lines 1 through 5.	<u> </u>			
Note: Form 1040-SS filers use line 4 only. Leave lin	nes 1, 2, 3, and 5 blank.			
1 Adjusted gross income			1 73,684.	
2 Total tax			2 9,271.	
3 Federal income tax withheld from Form(s) W	-2 and Form(s) 1099		3 11,584.	
4 Amount you want refunded to you			4 2,671.	
5 Amount you owe			5	
Part II Taxpayer Declaration and Signat	ture Authorization (Be sure you get a	and keep a copy	y of your return)	
my knowledge and belief, it is true, correct, and complereturn (original or amended) I am now authorizing. I consto send my return to the IRS and to receive from the IRS for any delay in processing the return or refund, and (c) Agent to initiate an ACH electronic funds withdrawal (direction authorization is to remain in full force and effect until I payment, I must contact the U.S. Treasury Financial Abusiness days prior to the payment (settlement) date. I at taxes to receive confidential information necessary to a personal identification number (PIN) below is my signature Electronic Funds Withdrawal Consent.	ent to allow my intermediate service provider, tr. (a) an acknowledgement of receipt or reason for the date of any refund. If applicable, I authorize the detect debit) entry to the financial institution accours a payment of estimated tax, and the financial institution the U.S. Treasury Financial Agent to terrogent at 1-888-353-4537. Payment cancellation also authorize the financial institutions involved it answer inquiries and resolve issues related to	ansmitter, or electron rejection of the traction of the traction of the traction to debit the minate the authorization requests must be not the payment. I furt	nic return originator (ERO) ansmission, (b) the reason of its designated Financial expreparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of the acknowledge that the	
Taxpayer's PIN: check one box only			7 7 7 4	
		am now authorizir		
Your signature ►	Date	•		
Spouse's PIN: check one box only				
I authorize	to enter or gene	-	as my	
ERO firm r signature on the income tax return (origina			er five digits, but n't enter all zeros	
, ,	income tax return (original or amended)			
	r return is filed using the Practitioner PIN		•	
Spouse's signature ▶	Date	•		
Practitioner	PIN Method Returns Only—continue be	elow		
Part III Certification and Authentication	Practitioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN follower	d by your five-digit self-selected PIN.		8 6 1 9 8 9 er all zeros	
I certify that the above numeric entry is my PIN, which is authorized to file for tax year indicated above for the tax requirements of the Practitioner PIN method and Pub. 13	xpayer(s) indicated above. I confirm that I am	submitting this retu	rn in accordance with the	
ERO's signature ▶	Date	•		
	Retain This Form — See Instruction	าร		
	Form to the IRS Unless Requested			