## 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 for the latest information.

OMB No. 1545-0074

IIILEITIAIT	nevertue Service						
Submi	ssion Identification Number (SID)						
Taxpayer's name			Social security number				
BHAVANA GOSANGI			097-31-5509				
Spouse's name			Spouse's social security number				
Dout	Toy Deturn Information Toy Very Ending December 24 /Fator		0.00.011	th orisi	in a \		
Part		year you	are au	LITOTIZI	rig.)		
	whole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1 1		26.	556.	
2	Total tax		2			504.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			336.	
4	Amount you want refunded to you		4			832.	
5	Amount you owe		5				
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and k	сеер а сс	py of y	our r	eturr	1)	
return ( to send for any Agent t paymen authoriz paymen busines taxes t persona	oviledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmiding return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectled in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Uoinitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the Indicated the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the paging Funds Withdrawal Consent.	tter, or elec- ection of the S. Treasury cated in the on to debit to the author lests must processing ayment. I f	tronic re transmin and its tax prephe entry ization. be receined the elurther ac	turn original turn original to this a for revolution of this a for revolution of the thin this and the thin this and the thin this and the thin this and this area for revolution of the thin this area for revolution of the thin this area for revolution of the revolution of this area for revolution of the revolution of the revolution of this area for revolution of the revolution of this area for revolut	ginator b) the ated Financount of the count	r (ERO) reason nancial vare for nt. This ncel) a than 2 nent of nat the	
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Your s	ignature ▶ Date ▶	1/29/2021					
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	ERO firm name		Enter five				
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authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the taxpayer tax year indicated above for the taxpayer indicated above. I confirm that I am submoments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Ir	itting this re	eturn in a	accorda	anće w		
ERO's	signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To D	o So					