## 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

	10.00.00					
Submi	ssion Identification Number (SID)					
Taxpaye	or's name	Social securi	ty numl	per		
BHARGAVI NOOKALA			173-29-2367			
Spouse's name			Spouse's social security number			
Part	Tax Return Information — Tax Year Ending December 31, (Enter	 er year you a	re au	thorizina.	.)	
	whole dollars only on lines 1 through 5.	n your you c		ti ionzing.	'/	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	3	,642.	
2	Total tax		2		0.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		156.	
4	Amount you want refunded to you		4		156.	
5	Amount you owe		5			
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our retu	rn)	
return ( to send for any Agent t paymen authori paymen busines taxes t person	oviledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I about original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmart my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U o initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account incomplete in the financial taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recessed days prior to the payment (settlement) date. I also authorize the financial institutions involved in the oreceive confidential information necessary to answer inquiries and resolve issues related to the ali identification number (PIN) below is my signature for the income tax return (original or amended) I and Financial Withdrawal Consent.	nitter, or electricities of the to J.S. Treasury a dicated in the to ion to debit the te the authorize quests must be processing o payment. I fur	onic refransmised ax prepartion. The receiff the elastic action.	turn origina ssion, (b) the designated paration so- to this acco To revoke ( ved no late ectronic par sknowledge	tor (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of that the	
	yer's PIN: check one box only					
X		my PIN 9	2 3	3 6 7	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	asiny	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN metibelow.					
Your s	ignature ▶ Date ▶					
Spous	se's PIN: check one box only	_				
	I authorize to enter or generate	mv PIN			as my	
	ERO firm name	En		digits, but	ao my	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meti below.		_		-	
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	V				
Part	Certification and Authentication — Practitioner PIN Method Only					
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7 Don't ent	8 6 er all <i>ze</i>	1 9 8	9	
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the text to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of	tax return (orig mitting this ret	inal or urn in a	amended) accordance		
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions	_				
	Don't Submit This Form to the IRS Unless Requested To	Do So				