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

	1.000.000					
Submi	ssion Identification Number (SID)					
Taxpayer's name			y numl	per		
ANWESH GUNTUPALLI			030-25-4993			
Spouse's name			Spouse's social security number			
Part	Tax Return Information — Tax Year Ending December 31, (Ente	 r year you a	ra all	thorizino	.)	
	whole dollars only on lines 1 through 5.	i yeai you a	e au	uionzing	J. <i>)</i>	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	4	7,601.	
2	Total tax		2		1,024.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		5,388.	
4	Amount you want refunded to you		4		1,164.	
5	Amount you owe		5			
Part		keep a cop	y of y	our retu	urn)	
my knoreturn (control to send for any Agent to paymer authorize paymer business taxes to personal	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge 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, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudely in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Lobo initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account incometed 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 Indian to the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (PIN) below is my signature for the income tax return (original or amended) I are Funder Withdrawal Consent.	ve are the amo nitter, or electro ection of the tr I.S. Treasury and iicated in the tra- on to debit the e the authorizate uests must be processing of payment. I furt	ounts to nic re- ansmind its of ax prepentry entry tition. The receif the elements	rom the inturn original sistems, (b) the designated paration so to this according to revoke ved no late ectronic perhamments.	ncome tax ator (ERO) the reason d Financial oftware for count. This (cancel) a ter than 2 ayment of e that the	
	nic Funds Withdrawal Consent. yer's PIN: check one box only					
X	-	my PIN 5	4 9	9 9 3	as my	
Δ	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	[*] Ent		digits, but er all zeros	as my	
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.					
Your s	ignature ► Anwesh Guntupalli Date ►	02/24/2021				
Spous	e's PIN: check one box only				1	
	I authorize to enter or generate	my PIN			as my	
	ERO firm name		er five	digits, but	ao my	
	signature on the income tax return (original or amended) I am now authorizing.	do	i't ente	r all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.		_		-	
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	1				
Part I	Certification and Authentication — Practitioner PIN Method Only					
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7 Don't ente	8 6 erallze		8 9	
authoriz	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 Pub. 1345 , Handbook for Authorized IRS e-file Providers of I	nitting this retu	rn in a	accordanc		
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To	Do So				