(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

Submission Identification Number (SID)			
Taxpayer's name	Social securit	ty number	
PRADEEP REDDY VANGALA	535-79-	535-79-6035	
Spouse's name		Spouse's social security number	
SHIRISHA POREDDY	APPLIED FOR		
Part I Tax Return Information — Tax Year Ending December 31, 2020	(Enter year you a	re authorizing.)	
Enter whole dollars only on lines 1 through 5.			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1 Adjusted gross income		1 127,224.	
2 Total tax		2 14,108.	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 21,436.	
4 Amount you want refunded to you		<b>4</b> 9,128.	
5 Amount you owe		y of your roturn)	
Part II Taxpayer Declaration and Signature Authorization (Be sure you ge Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or a			
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reaso for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized a ACH electronic funds withdrawal (direct debit) entry to the financial institution acc payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancella business days prior to the payment (settlement) date. I also authorize the financial institutions involve taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or amer Electronic Funds Withdrawal Consent.	ze the U.S. Treasury as count indicated in the tax institution to debit the terminate the authorization requests must be an in the processing of to the payment. I furt	nd its designated Financial ax preparation software for entry to this account. This ation. To revoke (cancel) are received no later than 2 f the electronic payment of ther acknowledge that the	
Taxpayer's PIN: check one box only			
	enerate my PIN	6 0 3 5 as my	
ERO firm name	Ent	ter five digits, but n't enter all zeros	
signature on the income tax return (original or amended) I am now authorizing.	do	i t enter an zeros	
I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PI below.			
Your signature ▶ Da	ate ▶03/	15/2021	
Spouse's PIN: check one box only			
· <u> </u>	enerate my PIN	as my	
ERO firm name		ter five digits, but	
signature on the income tax return (original or amended) I am now authorizing.	do	n't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PI below.			
Special Conference of the Conf	ate ▶ 03/15	/2021	
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.		8 6 1 9 8 9 er all zeros	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual ir authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I a requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practition in t	am submitting this retu	urn in accordance with the	

Date ▶

ERO's signature ▶