## 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

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Subm	ission Identification Number (SID)					
Taxpay	er's name	Social securi	Social security number			
ASHRAY M THOTAMBAILU			786-70-2608			
Spouse's name			Spouse's social security number			
Par	Tax Return Information — Tax Year Ending December 31, 2020 (E	nter year you a	re au	thorizino	1)	_
	whole dollars only on lines 1 through 5.	iller year you a	ie au	uionzing	)· <i>)</i>	_
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	81	5,118	_
2	Total tax		2		L,780	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		2,102	_
4	Amount you want refunded to you		4		1,110	
5	Amount you owe		5		_,	<u> </u>
Part		nd keep a cop	y of y	our retu	ırn)	_
my knereturn to send for any Agent payme author payme busine taxes aperson	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amer owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trad my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal 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 termint, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation as days prior to the payment (settlement) date. I also authorize the financial institutions involved in to receive confidential information necessary to answer inquiries and resolve issues related to the lal identification number (PIN) below is my signature for the income tax return (original or amended to the payment (September 1) and the payment of the payment (September 1) and the payment of the income tax return (original or amended the payment (September 1) and the payment of the payment of the payment (September 1) and the payment of the income tax return (original or amended the payment of	above are the amount of the transmitter, or electron of the transmitter, or electron rejection of the transmitter and the transmitter of the transmitter of the processing of the payment. I further the authorization of the payment. I further the authorization of the payment.	ounts for the counts of the co	rom the inturn original sistem, (b) the designated paration so to this according to revoke wed no late ectronic perhamments.	ncome tator (ER the reased Finance of tware fount. The (cancel) ter than ayment te that the tator (ex that the the that the the that the the that the the that the the that the the that the the the that the the the that the the the the the the the the the th	ax O) on ial or nis a of ne
	onic Funds Withdrawal Consent.  Bayer's PIN: check one box only				1	
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	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	En		digits, but r all zeros	as m	у
	I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN in below					
Yours	signature ► Date	03-16-2021				
Spour	se's PIN: check one box only					
Г	I authorize to enter or gener	ate my PIN			as m	W
	ERO firm name		ter five	digits, but	as iii	у
	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 a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN n below.					
Spous	se's signature ▶ Date	•				
	Practitioner PIN Method Returns Only—continue be	low				_
Part	III Certification and Authentication — Practitioner PIN Method Only					_
ERO's	s <b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	8 7 2 7 Don't ent	8 6 er all ze		8 9	
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual incorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers	ubmitting this retu	ırn in a	accordanc		
ERO's	s signature ► Date	•				
	ERO Must Retain This Form — See Instruction	S				_
	Don't Submit This Form to the IRS Unless Requested					