## 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

Subm	sission Identification Number (SID)					
Taxpayer's name			Social security number			
SRI	SRI MOUNICA MUSUNURU 038-61			-3321		
Spouse's name Spous		Spouse's soc	pouse's social security number			
Par	Tax Return Information — Tax Year Ending December 31, 2020 (Enter	∣ ∵year you a	re auth	orizing.)		
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		013.	
2	Total tax		2	6,	048.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	8,	001.	
4	Amount you want refunded to you		4	1,	<u>953.</u>	
5	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and le	reep a cop	y of yo	ur returr	1)	
return to sen for any Agent payme author payme busine taxes persor	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abov (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transm d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject y delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Uto initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the financial transportance of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact 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 to receive confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I aronic Funds Withdrawal Consent.	itter, or electro ection of the tr S. Treasury are cated in the ta in to debit the the authoriza- lests must be processing of ayment. I furt	nic returnic	rn originato ion, (b) the signated Fi ration softw this account revoke (cand no later extronic payrowledge to the care of the signature of the care of	r (ERO) reason inancial vare for nt. This ancel) a than 2 ment of hat the	
	ayer's PIN: check one box only					
	I authorize GLOBAL TAXES LLC to enter or generate	mv PIN 1	3 3	2 1	as my	
Ľ	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five dig 1't enter a	gits, but	ao my	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.					
Your	signature ▶ Date ▶					
Snou	se's PIN: check one box only					
Ороц	I authorize to enter or generate	my DINI			ac my	
L	ERO firm name	_	er five di		as my	
	signature on the income tax return (original or amended) I am now authorizing.		i't enter a			
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.					
Spou	se's signature ▶ Date ▶					
	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. 5 8	7 2 7 Don't ente		1 9 8 os	9	
author	by that the above numeric entry is my PIN, which is my signature for the electronic individual income to dized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submount are presented in the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Irlands and Pub. 1345, Handbook for Authorized IRS e-file Providers of Irlands are provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Irlands are provided in the Practition of the Practicion of the Practition of the Practition of the Practition of the Practition of the Practicion of	itting this retu	rn in acc	cordance w		
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ERU	s signature ► Date ►  ERO Must Retain This Form — See Instructions					
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Don't Submit This Form to the IRS Unless Requested To Do So