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

	-					
Submi	ssion Identification Number (SID)					
Taxpayer's name			Social security number			
PRASHANTH DINDU			657-91-8287			
Spouse's name			Spouse's social security number			
Part	Tax Return Information — Tax Year Ending December 31, (Ente	 r year you a	re au	thorizing	1.)	
	whole dollars only on lines 1 through 5.	you. you a	0 0.0.) - /	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	52	2,600.	
2	Total tax		2	4	1,640.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	7	7,994.	
4	Amount you want refunded to you		4	3	3,354.	
5	Amount you owe		5			
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	кеер а сор	y of y	our retu	ırn)	
return (to send for any Agent t paymen authoriz paymen busines taxes t persona	wiledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abording a mended) I am now authorizing. I consent to allow my intermediate service provider, transmant my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account independent of the content of	itter, or electro- ection of the ti .S. Treasury a icated in the ti- bon to debit the e the authoriza- uests must be processing of payment. I fur	onic reransmind its of ax preparently entry ation. The receif the elather action.	turn origina ssion, (b) t designated paration so to this acc To revoke ved no lat ectronic p cknowledge	ator (ERO) he reason I Financial oftware for ount. 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 1	8 2	2 8 7	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	r 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 r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.					
Your s	ignature ▶ Date ▶					
Spous	e's PIN: check one box only					
	I authorize to enter or generate	my PIN			as my	
	ERO firm name		ter five	digits, but	ao my	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er 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					
Part	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 ent	8 6 er all ze		9	
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the 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	ax return (origi nitting this retu	nal or urn in a	amended) accordanc		
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To I	Do So				