## 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	ission Identification Number (SID)					
Taxpayer's name			ty numb	per		
INDHU SIDDENKI			859-32-8167			
Spouse's name		Spouse's soo	Spouse's social security number			
Part	Tax Return Information — Tax Year Ending December 31, 2020 (En	 ter year you a	re au	thorizina	)	
	whole dollars only on lines 1 through 5.	ici yeai yeu a	i C au	unonzing.	·)	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1 1	65	,127.	
2	Total tax		2		,616.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	8	,098.	
4	Amount you want refunded to you		4		,482.	
5	Amount you owe		5			
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	d keep a cop	y of y	our retu	ırn)	
my know return of to send for any Agent of payme authori payme busines taxes to person	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amendowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I at (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transdry return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for a delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account int 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 terminant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resolves days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) and resolve issues.	pove are the amounter, or electrorejection of the trace U.S. Treasury andicated in the trution to debit the authorizate the authorizate the processing of a payment. I fur	ounts for the counts of the co	rom the in turn original ssion, (b) the designated paration so to this acco To revoke ( ved no late ectronic parknowledge	come tax tor (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the	
	onic Funds Withdrawal Consent.  Ayer's PIN: check one box only					
X		to my DIN	8 2	L 6 7	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		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 if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN me below.					
Yours	signature ▶ Date ▶					
Snous	se's PIN: check one box only					
	I authorize to enter or general	te 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	r all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN me below.		_		-	
Spous	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue belo	w				
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. 5	8 7 2 7 Don't ent	8 6 er all ze	1 9 8	9	
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am suments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of	e tax return (origi bmitting this retu	nal or urn in a	amended) accordance		
ERO's	s signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To	Do So				