## 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

	1					
Submi	ssion Identification Number (SID)					
Taxpayer's name			Social security number			
SAJEESH PANDHALOOR			077-99-5530			
Spouse's name			Spouse's social security number			
Part	Tax Return Information — Tax Year Ending December 31, 2020 (Enter	, voor vou c	ro ou	thorizina	<u>,                                      </u>	
	whole dollars only on lines 1 through 5.	year you a	ire au	unonzing	.)	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	59	,843.	
2	Total tax		2		,224.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,260.	
4	Amount you want refunded to you		4		,036.	
5	Amount you owe		5		7000.	
Part		кеер а сор	y of y	our retu	ırn)	
my know return ( to send for any Agent t payment authorize payment business taxes t persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended by by by the context and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit 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 induct of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requires days prior to the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (PIN) below is my signature for the income tax return (original or amended) I and Funds Withdrawal Consent.	re are the am itter, or electroction of the tas. Treasury a cated in the tase the authorizates must be processing o ayment. I fur	ounts for the counts of the co	from the in turn origina ssion, (b) the designated paration so for revoke ( ved no late ectronic pack knowledge	come tax tor (ERO) ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of that the	
	yer's PIN: check one box only					
X		my PINI 9	5 5	5 3 0	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	asiny	
	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 s	ignature ▶ Date ▶ _					
Snous	e's PIN: check one box only					
Opous	I authorize to enter or generate	my DINI			as my	
	ERO firm name		ter five	digits, but	as my	
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros		
	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.					
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part	Certification and Authentication — Practitioner PIN Method Only					
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7	8 6	1 9 8	9	
		Don't ent	er all ze	#10S		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of In	itting this reti	urn in a	accordance		
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To I	Oo So				