## 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

	1.01.01.00					
Submi	ssion Identification Number (SID)					
Taxpayer's name			ty numb	ber		
ASHWINI CHERUKURI			110-15-3223			
Spouse's name			Spouse's social security number			
Dort	Tax Return Information — Tax Year Ending December 31, (Enter	Voor vou o	ro our	thorizina	\	
Part	whole dollars only on lines 1 through 5.	year you a	re au	unonzing	<u>·)                                    </u>	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	l ar	,441.	
2	Total tax		2		2,956.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		1,174.	
4	Amount you want refunded to you		4		,218.	
5	Amount you owe		5		210.	
Part		еер а сор		our retu	ırn)	
my know return (to send for any Agent t paymer authoriz paymer busines taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) wiledge and belief, it is true, correct, 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, transminmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected and in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. so initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict 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 att, 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 part of the processor of the information necessary to answer inquiries and resolve issues related to the particle information number (PIN) below is my signature for the income tax return (original or amended) I and icentification number (PIN) below is my signature for the income tax return (original or amended) I and icentification or the payment (PIN) below is my signature for the income tax return (original or amended) I are fully the payment of the payment (PIN) below is my signature for the income tax return (original or amended) I are fully the payment of the payment o	e are the ametter, or electroction of the to S. Treasury a cated in the to the authorizatests must be processing of ayment. I fur	ounts for the conic reference in the conic reference in the conic received in the conic	from the inturn original ssion, (b) to designated paration so to this according to the foundation of the thing according to the thing acc	ncome tax ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the	
	yer's PIN: check one box only					
X		mv PIN 5	3 2	2 2 3	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	<b>,</b>	
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN metholelow.					
Your s	ignature ▶ Date ▶					
Snous	e's PIN: check one box only					
Сроцо	I authorize to enter or generate	my PINI			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 neif you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methology.					
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		8 6		3 9	
		Don't ent	er all ze	eros		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta 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 Ir	itting this retu	ırn 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 D	o So				