## 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			ty numl	oer		
PRADEEP GORLE			809-61-4854			
Spouse's name			Spouse's social security number			
Part	Tax Return Information — Tax Year Ending December 31, (Enter	year you a	re au	thorizina	n )	
	whole dollars only on lines 1 through 5.	year you a	ii e au	ιποπειπί	<i>J·)</i>	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	13	2,0	65.
2	Total tax		2			99.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			89.
4	Amount you want refunded to you		4			90.
5	Amount you owe		5		_,_	<del></del>
Part		кеер а сор	y of y	our ret	urn)	
my known return (to send for any Agent to paymer authorize paymer business taxes to personal taxes to the send for the sen	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended by by by the income tax return (original or amended by by by the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmul my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectly in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U 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 Induction of the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the patch of the payment (PIN) below is my signature for the income tax return (original or amended) I and the Withdrawal Original or amended) I and the Withdrawal Original or amended).	e are the amitter, or electro- ection of the to S. Treasury a cated in the to in to debit the the authorizates must be processing of ayment. I fur	ounts for the counts of the co	rom the inturn original sistems, (b) designated paration so this accross revoke a roll actronic paration of the control of the	ncom lator of the red d Final oftwa count (can decently je tha	ne tax (ERO) eason ancial are for t. This icel) a han 2 ent of at the
	nic Funds Withdrawal Consent.  yer's PIN: check one box only				1	
X		my PIN 1	4 8	3 5 4	່	s my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	u.	3 iiiy
	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 ▶					
Spous	e's PIN: check one box only				_	
Г	I authorize to enter or generate	my PIN			) a	s my
	ERO firm name	_	ter five	digits, but	_	oy
	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 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 Don't ent	8 6 er all 76		8 9	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 <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Ir	ıx return (origi itting this reti	inal 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	o So				