8879 Form

(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

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Taxpayer's name	Social	security nun	nber
SHIVA GURRAM	888-57-0225		
Spouse's name			curity number
Part I Tax Return Information — Tax Year Ending December 31,	Enter year y	ou are a	uthorizing.)
Enter whole dollars only on lines 1 through 5.			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1	1
1 Adjusted gross income			73,484.
2 Total tax			9,227.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			12,411.
4 Amount you want refunded to you		-	4,984.
5 Amount you owe		. 5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or ame			
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accoupayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial in authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terpayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellatio business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amende Electronic Funds Withdrawal Consent.	for rejection of the U.S. Treas nt indicated in stitution to del minate the au n requests m in the process the payment.	the transm sury and its the tax pre- bit the entry thorization. ust be rece sing of the e	nission, (b) the reason designated Financia eparation software for to this account. This To revoke (cancel) acived no later than 2 electronic payment or acknowledge that the
Taxpayer's PIN: check one box only			
	arata my PINI	7 0	2 2 5 as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	erate my r mv	Enter five	e digits, but ter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN			
below.	motriou. mi		·
below. Your signature ► Date		2/24/202	·
Your signature ► Shiv a. G		2/24/202	·
Your signature ► Shiv &. G Spouse's PIN: check one box only	e► <u>2</u>		21
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Your signature ►	erate my PIN am now auth method. The elow 5 8 7 2 Door ome tax return submitting th	Enter five don't end norizing. Control of the end of th	as my e digits, but ter all zeros Check this box only st complete Part II
Spouse's PIN: check one box only □ I authorize	erate my PIN am now auth method. The elow 5 8 7 2 Door ome tax return submitting the rs of Individual	Enter five don't end norizing. Control of the end of th	as my e digits, but ter all zeros Check this box only st complete Part II