## 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

Submi	ssion Identification Number (SID)						
Taxpayer's name Soc			Social security	Social security number			
JAYASREE NATARAJAN SWARNARAS 825-			825-45-	15-5749			
Spouse's name Spouse's soci			Spouse's soci	cial security number			
NEEI	AKANTESWARAIAH YANADHANNAGARI		035-06-	-3773			
Part	Tax Return Information — Tax Year Ending Decen	<b>nber 31,</b> 2022 (Enter )	ear you ar	e autho	rizing.)		
Enter v	vhole dollars only on lines 1 through 5.						
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 bla	nk.					
1	Adjusted gross income			1	190,	333.	
2	Total tax			2	21,	598.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	17,	106.	
4	Amount you want refunded to you			4			
5	Amount you owe			5		492.	
Part	I Taxpayer Declaration and Signature Authorization	n (Be sure you get and ke	ep a copy	of you	r returr	า)	
return (control to send for any Agent to paymer authorize paymer business taxes to personal	wledge and belief, it is true, correct, and complete. I further declare thoriginal or amended) I am now authorizing. I consent to allow my intermed my return to the IRS and to receive from the IRS (a) an acknowledgemed delay in processing the return or refund, and (c) the date of any refund, or initiate an ACH electronic funds withdrawal (direct debit) entry to the first of my federal taxes owed on this return and/or a payment of estimated action is to remain in full force and effect until I notify the U.S. Treasury, I must contact the U.S. Treasury Financial Agent at 1-888-353-45 and a supplement (settlement) date. I also authorize the finance of receive confidential information necessary to answer inquiries and real identification number (PIN) below is my signature for the income tax redictions.	ediate service provider, transmittent of receipt or reason for rejec If applicable, I authorize the U.S nancial institution account indical tax, and the financial institution y Financial Agent to terminate to 37. Payment cancellation requecial institutions involved in the peesolve issues related to the par	er, or electro tion of the tra . Treasury ar ated in the ta to debit the the authoriza sets must be rocessing of yment. I furth	nic return ansmission and its design and preparate entry to the tion. To re received the electroner acknown	originaton, (b) the gnated Fition softwis accouptions accouption is accouption in a later onic paying wledge to the soft in th	or (ERO) reason inancial ware for int. This ancel) a than 2 ment of that the	
	yer's PIN: check one box only						
X	-	to enter or generate m	v PIN 5	5 7 4	4 9	as my	
	ERO firm name signature on the income tax return (original or amended) I am I		Ente	er five digit 't enter all	s, but	ao my	
	I will enter my PIN as my signature on the income tax return (or if you are entering your own PIN and your return is filed using below.						
Your s	ignature ▶	Date ▶					
Snous	e's PIN: check one box only						
X	·	to enter or generate m	v PIN 6	3 7 7	7   3	ac my	
_	ERO firm name	to enter or generate in	- —	er five digit		as my	
	signature on the income tax return (original or amended) I am I	now authorizing.		't enter all			
	I will enter my PIN as my signature on the income tax return (or if you are entering your own PIN and your return is filed using below.						
Spous	e's signature ►	Date <b>▶</b>					
	Practitioner PIN Method Return						
Part I	Certification and Authentication — Practitioner Pl	N Method Only					
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit s	elf-selected PIN. 8 0	8 2 7 1  Don't ente	1 1 0	6 7	3	
authoriz	that the above numeric entry is my PIN, which is my signature for the zed to file for tax year indicated above for the taxpayer(s) indicated abments of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Auth	ove. I confirm that I am submit	ting this retu	rn in acco	rdance v		
ERO's	signature ▶	Date <b>▶</b>					
	ERO Must Retain This Forn						

Don't Submit This Form to the IRS Unless Requested To Do So