### 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.

Submission Identification Number (SID)

Тахрау	ver's name		Social securi	ty numbe	er
PHA	NIVARDHAN GURRAM		123-41	-5863	
Spouse	s's name		Spouse's soo	cial secu	rity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2	023 (Ente	r year you a	re aut	horizing.)
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	Adjusted gross income			1	94,692.
2	Total tax			2	13,089.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	13,182.
4	Amount you want refunded to you			4	93.
5	Amount you owe			5	

#### Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

## Taxpayer's PIN: check one box only

				FBO firm name		Ēr
^	I authorize	GLUDAL	IAVEO		to enter or generate my PIN	_
$\mathbf{v}$	l authorize	CTODAT	TAVEC	TTC	to optok ok gonokoto my DIN	11

1	5	8	6	3	as mv
Ent don					

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

## Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature	Date					 			
Practitioner PIN Method Returns Only—continu	e bel	ow							
Part III Certification and Authentication – Practitioner PIN Method Only									
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 nter a	 	2	7 1	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >					
	ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So				
For Paperwork Reduction Act Notice, see your tax return instruction	S. BAA	REV 03/07/24 PRO	Form <b>8879</b> (Rev. 01-2021)		

<b>1040</b>	-	artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Ta</b>		turn	202	3	OMB No. 1545	-0074	IRS Use Only	∕−Do not w	vrite or sta	aple in this space.		
For the year Jan	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate	instructions.		
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	urity number		
PHANIVAR	DHAI	N	GUR	RRAM						123	41	5863		
		s first name and middle initial	Last r									security number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.	Preside	ntial Ele	ection Campaigr		
<u>1540 ALA</u>												ou, or your		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode			jointly, want \$3 nd. Checking a		
CELINA						TΣ		750		box bel	ow will	not change		
Foreign country	name			Foreign p	rovince/state/o	count	ty	Foreig	n postal code	your tax		_		
							<u> </u>				∐ Yo	ou Spouse		
Filing Status		Single		l :)			Head of h	ouseh	old (HOH)					
Check only		<ul> <li>☐ Married filing jointly (even if only one had income)</li> <li>☐ Married filing separately (MFS)</li> <li>☐ Qualifying surviving spouse (QSS)</li> </ul>												
one box.	L If \	Married filing separately (MFS) you checked the MFS box, enter the	namo		nouse If you	ı che					ild'e na	me if the		
		alifying person is a child but not you									iu s na			
Digital		ny time during 2023, did you: (a) rec						-				es 🛛 No		
Assets		hange, or otherwise dispose of a dig <b>neone can claim:</b> You as a de					a dependent	i) i (36		115.)				
Standard Deduction	_	Spouse itemizes on a separate retur	•		•		•							
				_			_							
		Were born before January 2, 1	959	Are bl		ouse		14	ore January			s blind		
Dependents		instructions): irst name Last name		(2) 8	Social security number	,	(3) Relationsh to you	ip (4	Child tax c			(see instructions): or other dependents		
lf more than four	(1)									ioun				
dependents,														
see instructions and check	;													
here														
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	ctions) .					. 1a		94,692.		
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .					. 1b	)			
W-2 here. Also	с	Tip income not reported on line 1a	a (see i	nstruction	ns)					. 1c	;			
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 1d					
1099-R if tax	е	Taxable dependent care benefits f							. 1e	,				
was withheld.	f	Employer-provided adoption bene			,					. 1f	_			
lf you did not get a Form	g	Wages from Form 8919, line 6 .						• •		. <u>1</u> g				
W-2, see	h	Other earned income (see instructions)							. <u>1</u> h		0.			
instructions.	i	Nontaxable combat pay election (s	see ins	structions)		• •	<u>1</u> i					94,692.		
	z 2a	Add lines 1a through 1h	2a		· · · ·	 ьт	axable interest	· ·		. 1z . 2b	-	94,092.		
Attach Sch. B if required.	2a 3a	•	2a 3a				Ordinary divide			. 20 . 3b	-			
	<u>4a</u>		4a				axable amoun			. 4b	-			
Standard	5a		5a				axable amoun			. 5b				
<ul> <li>Deduction for –</li> <li>Single or</li> </ul>	6a		6a				axable amoun			. 6b				
Married filing separately,	c	If you elect to use the lump-sum e		method.					[					
\$13,850	7	Capital gain or (loss). Attach Sche		,		`	,		[	7				
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule		•	•					. 8				
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8	. This is y	our total inc	come	e			. 9		94,692.		
\$27,700	10	Adjustments to income from Sche		-						. 10				
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is	syour	adjusted	gross incor	ne				. 11		94,692.		
\$20,800 • If you checked	12	Standard deduction or itemized	deduc	<b>tions</b> (fro	m Schedule	A)				. 12		13,850.		
any box under Standard	13	Qualified business income deduct	ion fro	m Form 8	995 or Form	899	95-A			. 13				
Deduction,	14	Add lines 12 and 13								. 14		13,850.		
see instructions.	15	Subtract line 14 from line 11. If zer	ro or le	ss, enter	-0 This is y	our	taxable incom	ie .		. 15		80,842.		

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	3)								Page <b>2</b>	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3 🗌		16	13,089.	
Credits	17	Amount from Schedule 2, lin	ie3					17		
	18	Add lines 16 and 17						18	13,089.	
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	ie 8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	13,089.	
	23	Other taxes, including self-e						23	0.	
	24	Add lines 22 and 23. This is						24	13,089.	
Payments	25	Federal income tax withheld							,	
. aymente	а	Form(s) W-2				<b>25a</b> 13	,182.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions				25c				
	d	Add lines 25a through 25c	,					25d	13,182.	
	26	2023 estimated tax payment						26		
If you have a l qualifying child,	27	Earned income credit (EIC)				27	• •			
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credit				29				
	30	Reserved for future use .		·		30				
	31					31				
	32	Amount from Schedule 3, line 15       31         Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits       .								
	33								13,182.	
Defined	34	If line 33 is more than line 24					• •	33 34	93.	
Refund	34 35a	Amount of line 34 you want	-			, ,	· ·	35a	93.	
Direct deposit?	b 35a	Routing number 1 0 1		1. 11 FUIII 0000			· 🗌	<b>3</b> 5a	55.	
See instructions.		Routing number         1         0         1         0         1         8         7         c Type:         Checking         Savings           Account number         1         4         5         5         7         4         0         6         2         9         0         0         1<								
	d	· · · · · ·								
	36	Amount of line 34 you want a				36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						07		
rou Owe						1 1	• •	37		
	38	Estimated tax penalty (see in				38				
Third Party		you want to allow another					omplete b	alour	× No	
Designee							•			
	nai	signee's ne		Phone no.			onal identifi oer (PIN)	Jation		
Sign	Un	der penalties of perjury, I declare tl	nat I have examined	d this return and	accompanying sche	edules and statemen	ts, and to th	e best	of my knowledge and	
Here	bel	ief, they are true, correct, and com	plete. Declaration of	of preparer (othe	r than taxpayer) is b	ased on all information	on of which	prepare	er has any knowledge.	
пеге	Yo	ur signature		Date	Your occupation		If the	IRS ser	nt you an Identity	
									IN, enter it here	
Joint return?		SOFTWARE ENGINEER				(see ir	,			
See instructions. Keep a copy for	Spouse's signature. If a joint return, <b>both</b> must sign.			Date	Spouse's occupat	lion			nt your spouse an action PIN, enter it here	
your records.							(see ir			
	Ph	one no. (913) 689-078	Q	Email address		AN2@GMAIL.CO	)M			
		eparer's name	Preparer's signat		TIMNTVARDE	Date	PTIN		Check if:	
Paid		M PRIYA RAM SAGAR GUPTA			CAR CIIDWA	03/29/2024	P02082	702	Self-employed	
Preparer	-			A TATA DAG	JUN OULIA	00/20/2024				
Use Only								ne no. (678)965-9522 i's EIN		
Co to united into an		m's address 245 ROONE 1040 for instructions and the late		TIONICI II					Form <b>1040</b> (2023)	
GO 10 WWW.115.90	JVITOIT	TO TO THE INSTRUCTIONS AND THE PALE	scillionnation.		BAA	REV 03/07/24 PRO			Form <b>1040</b> (2023)	