Form **8879**

Department of the Treasury Internal Revenue Service IRS e-file Signature Authorization

► Information about Form 8879 and its instructions is at www.irs.gov/form8879.

OMB No. 1545-0074

2016

Taxpayer's name	Social secu	Social security number	
SATYA SRIDHAR BOKAM	157-19-0972		
Spouse's name	Spouse's social security number		
MADHURI BOKAM		3-4039	
Part I Tax Return Information – Tax Year Ending December 31, 2016 (Whole		1	
1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4; Form 1040A	•		
line 37)	ļ	1 92,507. 2 6.494	
Total tax (Form 1040, line 63; Form 1040A, line 39; Form 1040EZ, line 12; Form 1040NR, line 6Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 64; Form 1040A, line 64)	· —	6,494.	
Form 1040EZ, line 7; Form 1040NR, line 62a)		3 8,181.	
4 Refund (Form 1040, line 76a; Form 1040A, line 48a; Form 1040EZ, line 13a; Form 1040-SS, Pa Form 1040NR, line 73a)		4 1,687.	
5 Amount you owe (Form 1040, line 78; Form 1040A, line 50; Form 1040EZ, line 14; Form 1040N	R, line 75)	5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	nd keep a cor	oy of your return)	
(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, (the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Ager debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on 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. authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cance business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the einformation necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal ider electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.	nt to initiate an ACH this return and/or a Treasury Financial A ellation requests mus electronic payment of	electronic funds withdrawal (direc payment of estimated tax, and th gent to terminate the t be received no later than 2 taxes to receive confidential	
Taxpayer's PIN: check one box only			
X authorize SMART ACCOUNTING & TAX SOLUTIONS to enter or gene	erate my PIN	04164	
X authorize SMART ACCOUNTING & TAX SOLUTIONS to enter or generation to enter or generatio	_	Enter five digits, but don't enter all zeros	
as my signature on my tax year 2016 electronically filed income tax return.			
I will enter my PIN as my signature on my tax year 2016 electronically filed income tax return. Che own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part	neck this box on III below.	ly if you are entering your	
Your signature	Date ►		
Spouse's PIN: check one box only			
X authorize SMART ACCOUNTING & TAX SOLUTIONS to enter or general states	erate my PIN	05398	
ERO firm name	_	Enter five digits, but don't enter all zeros	
as my signature on my tax year 2016 electronically filed income tax return.			
I will enter my PIN as my signature on my tax year 2016 electronically filed income tax return. Che own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part	neck this box on t III below.	ly if you are entering your	
Spouse's signature ▶	Date ►		
Practitioner PIN Method Returns Only — continue b	elow		
Part III			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		94629956383	
The Salimin Interpolar Six digit of his long stage son solocious his		Don't enter all zeros	
I certify that the above numeric entry is my PIN, which is my signature for the tax year 2016 electron	ically filed incon f the Practitioner	ne tax return for the PIN method	
taxpayér(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income Tax Returns.			
taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income Tax Returns. ERO's signature CHANDER SINGH	Date ►		