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

Submission Identification Number (SID)						
Taxpayer's name		Social securit	y numbe	r		
JAIPAL N KALLA	109-63-0797					
Spouse's name	\$	Spouse's soci	al secur	ity number		
Part I Tax Return Information — Tax Year Ending December 31,	(Enter y	ear you a	re auth	norizing.)	
Enter whole dollars only on lines 1 through 5.	. ` .				<u> </u>	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1 Adjusted gross income			1	22	,160.	
2 Total tax			2		978.	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	1	,526.	
4 Amount you want refunded to you			4		548.	
5 Amount you owe			5			
Part II Taxpayer Declaration and Signature Authorization (Be sure you Under penalties of perjury, I declare that I have examined a copy of the income tax return (original tax).						
return (original or amended) I am now authorizing. I consent to allow my intermediate service processed my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt of for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial instituti payment of my federal taxes owed on this return and/or a payment of estimated tax, and the finantiation is to remain in full force and effect until I notify the U.S. Treasury Financial Agrayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment countries days prior to the payment (settlement) date. I also authorize the financial institutions taxes to receive confidential information necessary to answer inquiries and resolve issues represonal identification number (PIN) below is my signature for the income tax return (original of Electronic Funds Withdrawal Consent.	or reason for reject authorize the U.S. ion account indica inancial institution ent to terminate t cancellation reque- involved in the pro- related to the pay	tion of the tra Treasury are ted in the ta to debit the he authoriza sts must be rocessing of ment. I furti	ansmiss and its de ax prepa entry to tion. To receive the ele her ack	sion, (b) the esignated aration soforthis according to this according for the edge of the	e reason Financial tware for unt. This cancel) a er than 2 yment of that the	
Taxpayer's PIN: check one box only X	er or generate m	3 J	0 7	9 7	00 mv	
ERO firm name signature on the income tax return (original or amended) I am now authorizing		Ent		igits, but all zeros	as my	
I will enter my PIN as my signature on the income tax return (original or am if you are entering your own PIN and your return is filed using the Practitic below.	nended) I am nov					
Your signature ►	Date ►					
Spouse's PIN: check one box only						
	er or generate m	V DINI			as my	
ERO firm name	or generate m		er five d	igits, but	asiny	
signature on the income tax return (original or amended) I am now authorizing	ng.			all zeros		
I will enter my PIN as my signature on the income tax return (original or am if you are entering your own PIN and your return is filed using the Practitic below.						
Spouse's signature ▶	Date ►					
Practitioner PIN Method Returns Only—con	ntinue below					
Part III Certification and Authentication — Practitioner PIN Method C	Only					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected P	PIN. 5 8	7 2 7 8	B 6	1 9 8	9	
I certify that the above numeric entry is my PIN, which is my signature for the electronic indivauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file	that I am submitt	return (origir	nal or a	mended) I		
ERO's signature ▶	Date ►					
ERO Must Retain This Form — See Ins Don't Submit This Form to the IRS Unless Req		So				

Department of the Treasury-Internal Revenue Service IRS Use Only-Do not write **U.S. Nonresident Alien Income Tax Return** or staple in this space. **Filing X** Single ☐ Married filing separately (MFS) (formerly Married) Qualifying widow(er) (QW) **Status** If you checked the QW box, enter the child's name if the Check only qualifying person is a child but not your dependent ▶ one box. Your identifying number Your first name and middle initial Last name (see instructions) JAIPAL 109-63-0797 Ν KALLA Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. Check if: X Individual Estate or Trust 820 NEWARK AVENUE 3LCity, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code JERSEY CITY NJ 07306 Foreign country name Foreign province/state/county Foreign postal code At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? Yes ☐ No

Dependents										(4) 🗸	if qualifie	es for (see instr.):
(see instructions):	(2) Dependent's (2) Dependent's		-	Credit for other dependents								
If more than four dependents, see]	
instructions and]	
check here ►]	
Income	1a	Wages, salaries, tips, e	tc. Attac	h Form(s) W	-2						1a	24,960.
Effectively	b	Scholarship and fellow	ship gran	nts. Attach F	orm(s) 1042-S	or required	d stateme	ent. Se	e instruct	tions .	1b	
Connected	С	Total income exempt	oy a treat	ty from Sche	edule OI (Form	1040-NR), Item					
With U.S.		L, line 1(e)					[1c				
Trade or	2 a	Tax-exempt interest .		2a		b Tax	able inte	erest .			2b	
Business	3a	Qualified dividends .		3a		b Ord	linary div	/idend	s		3b	
	4a	IRA distributions		4a		b Tax	able am	ount .			4b	
	5a	Pensions and annuities	3	5a		b Tax	able am	ount .			5b	
	6	Reserved for future use									6	
	7	Capital gain or (loss). A									7	
	8	Other income from Schedule 1 (Form 1040), line 9								8		
	9	Add lines 1a, 1b, 2b, 3	b, 4b, 5b	, 7, and 8. T	his is your tota	l effective	ly conne	ected	income .	. ▶	9	24,960.
	10	Adjustments to income										
	а	From Schedule 1 (Forn	,,				H	10a	2	2,500.		
	b	Charitable contributions for certain residents of India. See instructions . 10b 300.										
	С	Scholarship and fellowship grants excluded										
	d	Add lines 10a through		•	-						10d	2,800.
	11	Subtract line 10d from line 9. This is your adjusted gross income							11	22,160.		
	12	Itemized deductions (from Schedule A (Form 1040-NR)) or, for certain residents of India, standard deduction. See instructions										
							1	1	India .	Treaty	12	12,400.
	13a	Qualified business inco					· · · · · · · · · · · · · · · · · · ·	13a				
	b	Exemptions for estates		•			[13b				
	С	Add lines 13a and 13b									13c	
	14	Add lines 12 and 13c									14	12,400.

Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-

BAA

9,760.

15

Form 1040-NR (2	2020)						Page 2
	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 497	2 3 \square		16	978.
	17	Amount from Schedule 2 (Form 1040), line 3				17	0.
	18	Add lines 16 and 17				18	978.
	19	Child tax credit or credit for other dependent	s			19	
	20	Amount from Schedule 3 (Form 1040), line 7				20	
	21	Add lines 19 and 20				21	
	22	Subtract line 21 from line 18. If zero or less, e	enter-0			22	978.
	23a	Tax on income not effectively connected w from Schedule NEC (Form 1040-NR), line 15		23a			
	b	Other taxes, including self-employment tax, line 10	,,,	23b			
	С	Transportation tax (see instructions)		23c			
	d	Add lines 23a through 23c				23d	
	24	Add lines 22 and 23d. This is your total tax			▶	24	978.
	25	Federal income tax withheld from:					
	а	Form(s) W-2		25a 1	L,526.		
	b	Form(s) 1099		25b			
	С	Other forms (see instructions)		25c			
	d	Add lines 25a through 25c				25d	1,526.
	е	Form(s) 8805				25e	
	f	Form(s) 8288-A				25f	
	g	Form(s) 1042-S				25g	
	26	2020 estimated tax payments and amount ap	oplied from 2019 return	, <u></u>		26	
	27	Reserved for future use		27			
	28	Additional child tax credit. Attach Schedule 8	8812 (Form 1040)	28			
	29	Credit for amount paid with Form 1040-C		29			
	30	Reserved for future use		30			
	31	Amount from Schedule 3 (Form 1040), line 13		31			
	32	Add lines 28 through 31. These are your total	I other payments and refunda	ble credits	▶	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. The			▶	33	1,526.
Refund	34	If line 33 is more than line 24, subtract line 24		•		34	548.
	35a	Amount of line 34 you want refunded to you				35a	548.
Direct deposit? See instructions.	►b	Routing number 1 2 4 1 0 3 7		Checking L	Savings		
See mstructions.	▶ d	Account number 7 4 2 5 3 8 6					
	▶ e	If you want your refund check mailed to an a					
		enter it here.		1			
	36	Amount of line 34 you want applied to your	2021 estimated tax .	36			
Amount You Owe	37	Amount you owe. Subtract line 33 from line		1 1	•	37	
	38	1 7(,		38			
Third Party Designee	•	ou want to allow another person (other than with the IRS? See instructions	your paid preparer) to discuss		Complete b	oelow.	⊠ No
(Other than paid preparer)	Desig name		Phone no. ▶		nal identific er (PIN)	cation ▶ [
Sign Here		penalties of perjury, I declare that I have examined they are true, correct, and complete. Declaration of p					
TICIC	Your	signature	Date Your occupation				nt you an Identity
			SOETWADE E	NCINEED		ection P nst.) ▶	IN, enter it here
-	Phon	2 70	SOFTWARE E Email address	ХЭЗИТОИ	(366 11		
	Phone	e no. urer's name Preparer's sig		Date	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	•	03/17/2021	P02082	703	Self-employed
Preparer		sname ► GLOBAL TAXES LLC	TOTAL DECENT OF IT INDUMIN	05/11/2021			78)965-9522
Use Only		saddress > 2530 Pebble Creek L	n Cumming CA 20041				0-1017196
	2 11111 5		i calliliting GA 30041		5 L1	5	<u> </u>

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income

► Go to www.irs.gov/Form1040NR for instructions and the latest information. ▶ Attach to Form 1040-NR.

(a) 10%

(b) 15%

2020	
Attachment Sequence No. 7B	

Name shown on Form 1040-NR JAIPAL N KALLA

	Your iden						
	109-6	3-0	797				
(c) 30%	(d	(d) Other (specify)					
		%	%				
Form 1040 NE	line 22e	45					
Form 1040-NF	1, III le 23a	15					
e) Cost or	(f) LOSS If (e) is more the	an (d)	(g) GAIN If (d) is more than (e),				
ther basis	subtract (d) fro	m (e).	subtract (e) from (d).				

1	Dividends and divide	end e	quivalents:								
а	Dividends paid by U	.S. co	rporations		1a						
b	Dividends paid by fo	reign	corporations		1b						
С	Dividend equivalent payments received with respect to section 871(m) transactions				1c						
2	Interest:										
а	Mortgage				2a						
b	Paid by foreign corp	oratio	ns		2b						
С	Other				2c						
3	Industrial royalties (p	atent	s, trademarks, etc.)		3						
4	Motion picture or TV	сору	right royalties		4						
5	Other royalties (copy	rights	s, recording, publishing, etc.)		5						
6	Real property incom	e and	natural resources royalties		6						
7	Pensions and annuit	ies .			7						
8	Social security bene-	fits .			8						
9			pelow		9						
10	 Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0 			c).							
а	a Winnings										
b	Losses				10c						
11	1 Gambling winnings—Residents of countries other than Canada. Note: Losses not allowed				11						
12	Other (specify) ▶										
					12						
13	_		columns (a) through (d)		13						
14			f tax at top of each column		14						
15	Tax on income not ef	ffectiv	ely connected with a U.S. trade or business						R, line 23a ►	15	
			Capital Gains an	d Losses F	rom	Sales or Excha	nges of Proper	ty	1		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acq mm/dd/yy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more the subtract (d) fro	an (d),	(g) GAIN If (d) is more than (e), subtract (e) from (d).
effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these											
gains and losses on Schedule D											
(Form 1	•										
exchan	property sales or ges that are effectively										
on Sche	ted with a U.S. business edule D (Form 1040), 797, or both.		Add columns (f) and (g) of line 16 . Capital gain. Combine columns (f) and			 er the net gain here) 18	
						<u> </u>		•			

SCHEDULE OI (Form 1040-NR)

Other Information

► Go to www.irs.gov/Form1040NR for instructions and the latest information.

► Attach to Form 1040-NR. Attachment Sequence No. **7C** ► Answer all questions.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

Name s	ne shown on Form 1040-NR					Your identifying number					
JAII	AIPAL N KALLA					797					
Α	Of what country or countries w										
В	In what country did you claim	residence for tax purposes	s during the tax y	ear? United States	}						
С	Have you ever applied to be a	green card holder (lawful p	ermanent reside	nt) of the United States? .		☐ Yes	⊠ No				
D	Were you ever:										
1.	A U.S. citizen?					☐ Yes	⊠ No				
2.	A green card holder (lawful per	rmanent resident) of the Un	ited States? .			☐ Yes	⊠ No				
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation r	ules that apply to you.							
E	If you had a visa on the last day of the tax year, enter your visa type. If you did not have a visa, enter your U.S. immigration status on the last day of the tax yearF1										
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
G	List all dates you entered and										
	Note: If you are a resident of 0		-		uent intervals,						
	check the box for Canada or				☐ Mexico						
	Date entered United States	Date departed United State	es	Date entered United State	es Date depa	arted Unite	d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	mm/dd/yy					
Н	Give number of days (including										
	2018	, 2019	, ar	nd 2020365	···	(* - 2)					
I	Did you file a U.S. income tax	return for any prior year?.				X Yes	☐ No				
	If "Yes," give the latest year ar	id form number you filed		1040NR			\				
J	Are you filing a return for a trus					∐ Yes	⊠ No				
	If "Yes," did the trust have a U.S. person, or receive a contr					☐ Yes	☐ No				
V	Did you receive total compens	·				☐ Yes	⊔ No ⊠ No				
K	If "Yes," did you use an alterna					Yes	□ No				
	Income Exempt From Tax—If			·		_					
L .	complete (1) through (3) below	. See Pub. 901 for more inf	formation on tax	treaties.	•						
1.	Enter the name of the country, amount of exempt income in the										
	(a) Cou	ntry	(b) Tax treaty ar	ticle (c) Number of monti claimed in prior tax ye		ount of ex n current t					
	(a) Total Enterthic area	- Farmer 1040 NID 15 4 D	\	line de eu line di-							
^	(e) Total. Enter this amount of				. 🟲		□ Na				
	Were you subject to tax in a fo					∐ Yes	∐ No ⊠ No				
ა.	Are you claiming treaty benefit		-			∐ Yes	₩ INO				
B.4	If "Yes," attach a copy of the C	competent Authority detern	illination letter to	your return.							
M	Check the applicable box if:	aking an alaction to treat in	como from rool n	proporty located in the Unit	ad States as of	footivoly	onnootod				
	This is the first year you are may with a U.S. trade or business u	ınder section 871(d). See ir	structions				. ▶ 🗌				
2.	You have made an election in States as effectively connected										

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2020
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

JAIPAL N KALLA

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 109-63-0797

Par	Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ▶		
		8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR,	9	
Par	t II Adjustments to Income	9	
		40	
10 11	Educator expenses	10	
• •	officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
19	IRA deduction	19	
20	Student loan interest deduction	20	2,500.
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	2,500.