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

Subm	ission Identification Number (SID)							
Taxpaye	er's name	Social securi	ty numb	per				
SIL	VIA RAJU MARIHAL	650-96-6693						
Spouse	's name	Spouse's soo	Spouse's social security number					
Part	Tax Return Information — Tax Year Ending December 31, 2020 (En	nter year you a	re au	thorizina	.)			
	whole dollars only on lines 1 through 5.	, ,			-/			
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income		1	9	788.			
2	Total tax		2		0.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1	,026.			
4	Amount you want refunded to you		4	1	,026.			
5	Amount you owe		5					
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get ar	nd keep a cop	y of y	our retu	ırn)			
return to send for any Agent to payme authori payme busines taxes to person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I as (original or amended) I am now authorizing. I consent to allow my intermediate service provider, traid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for a delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account not of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termint, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation as days prior to the payment (settlement) date. I also authorize the financial institutions involved in to receive confidential information necessary to answer inquiries and resolve issues related to the last of the payment (PIN) below is my signature for the income tax return (original or amended) and formation received.	nsmitter, or electron rejection of the transition of the transition to debit the transition to debit the mate the authorizar requests must be the processing of the payment. I furnish rejection of the payment. I furnish rejection of the payment.	onic refansmisted in the case of the case	turn origina ssion, (b) the designated paration so to this accor- ro revoke ved no lat- ectronic park knowledge	ator (ERO) he reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the			
	onic Funds Withdrawal Consent. Bayer's PIN: check one box only							
X		ate my PIN	6 6	5 9 3	as my			
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ž En		digits, but er all zeros	as my			
	I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN and your return is filed using the Practitioner PIN m below.							
Yours	signature ▶ Date I	-						
Snous	se's PIN: check one box only							
	I authorize to enter or general	ate my PIN			as my			
	ERO firm name		ter five	digits, but	ao my			
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros				
	I will enter my PIN as my signature on the income tax return (original or amended) I at if you are entering your own PIN and your return is filed using the Practitioner PIN m below.							
Spous	se's signature ▶ Date ▶	•						
	Practitioner PIN Method Returns Only—continue bel	ow						
Part	III Certification and Authentication — Practitioner PIN Method Only							
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	8 7 2 7 Don't ent	8 6 er all ze	1 9 8	9			
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual incomized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers	ne tax return (origi ubmitting this retu	nal or ırn in a	amended) accordance				
ERO's	s signature ▶ Date ▶	>						
	ERO Must Retain This Form — See Instructions							
	Don't Submit This Form to the IRS Unless Requested T	o Do 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) 650-96-6693 SILVIA RAJU MARIHAL Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. Check if: X Individual 515 Estate or Trust 2330 N OLIVER ST City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code WICHITA KS 67220 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 X No

Dependents (see instructions):		(1) First name La	st name	(2) Dependent's identifying number		(3) Dependent's relationship to you		(4) ✓ if qualified Child tax credit		es for (see instr.): Credit for other dependents	
				, ,				,	Г	7	
If more than four											
dependents, see instructions and											
check here ►										-	
Income	1a	Wages, salaries, tips, etc. At	tach Form(s) W-	-2						1a	9,788.
Effectively	b	Scholarship and fellowship	` '							1b	•
Connected	С	Total income exempt by a t		. ,	•	1					
With U.S.		L, line 1(e)					1c				
Trade or	2a	Tax-exempt interest	. 2a		b Tax	able inte	erest .			2b	
Business	За	Qualified dividends	. За		b Ord	dinary div	vidends			3b	
	4a	IRA distributions	. 4a		b Tax	able am	ount .			4b	
	5a	Pensions and annuities .	. 5a		b Tax	able am	ount .			5b	
	6	Reserved for future use .								6	
	7	Capital gain or (loss). Attach	Schedule D (Fo	rm 1040) if req	uired. If no	ot require	ed, ched	k here .	▶ □	7	
	8	Other income from Schedule	e 1 (Form 1040),	line 9						8	
	9	Add lines 1a, 1b, 2b, 3b, 4b,	5b, 7, and 8. Th	nis is your tota l	effective	ly conn	ected ir	come .	. ▶	9	9,788.
	10	Adjustments to income:									
	а	From Schedule 1 (Form 104)					10a				
	b	Charitable contributions for certain residents of India. See instructions . 10b									
	С	Scholarship and fellowship of					10c				
	d	Add lines 10a through 10c.								10d	
	11	Subtract line 10d from line 9. This is your adjusted gross income									9,788.
	12	Itemized deductions (from	,	,,	,			,		12	
		deduction. See instructions									12,400.
	13a	Qualified business income deduction. Attach Form 8995 or Form 8995-A								_	
	b	Exemptions for estates and	•				13b				
	С									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

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Form 1040-NR (2	2020)						Page 2
	16	Tax (see instructions). Check if any from Form((s): 1 8814 2 497	2 3 🗌		16	0.
	17	Amount from Schedule 2 (Form 1040), line 3				17	0.
	18	Add lines 16 and 17				18	0.
	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	0.
	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	0.
	25	Federal income tax withheld from:					
	а	Form(s) W-2		25a 1	,026.		
	b	Form(s) 1099		25b			
	С	Other forms (see instructions)		25c			
	d	Add lines 25a through 25c				25d	1,026.
	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				32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. The			. ▶	33	1,026.
Refund	34	If line 33 is more than line 24, subtract line 24		•		34	1,026.
	35a	Amount of line 34 you want refunded to you			► □ Savings	35a	1,026.
Direct deposit? See instructions.	►b	Routing number 1 0 1 1 0 0 0					
See instructions.	▶ d	Account number 5 1 8 0 0 9 4					
	▶ e	If you want your refund check mailed to an a					
		enter it here.					
	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	pelow.	⊠ No
(Other than paid preparer)	Desig name		Phone no. ▶		nal identific er (PIN)	ation [
Sign Here				of my knowledge and has any knowledge.			
11616	Your	signature	Date Your occupation				nt you an Identity IN, enter it here
	JUNIOR FRONT-END ENGINEER (see i						
	Phone	e no.	Email address				
Paid	Prepa	rer's name Preparer's sig	gnature	Date	PTIN		Check if:
Preparer	SYAM I	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR GUPTA TALLAM	03/25/2021	P02082	2703	☐ Self-employed
- 1	Firm's	name▶ GLOBAL TAXES LLC			Phone no	0. (67	8)965-9522
Use Only	Firm's	address▶ 2530 Pebble Creek L	n Cumming GA 30041				0-1017196

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

Sequence No. 7B

Name shown on Form 1040-NR Your identifying number SILVIA RAJU MARIHAL 650-96-6693 Enter amount of income under the appropriate rate of tax. See instructions

Nature of Income			(a) 100/	(b) 15%	(a) 200/	(d) Other (specify)		
			(a) 10%		(c) 30%	%	%	
1	Dividends and divide	nd equivalents:						
а	Dividends paid by U.	а						
b	Dividends paid by fo	reign corporations	. [1]	b				
С	Dividend equivalent payments received with respect to section 871(m) transactions			С				
2	Interest:							
а	Mortgage		. 2	а				
b	Paid by foreign corpo	orations	. 21	b				
С	Other		. 20	С				
3	Industrial royalties (p	atents, trademarks, etc.)	. 3	3				
4	Motion picture or TV	copyright royalties	. 4	1				
5	Other royalties (copy	rights, recording, publishing, etc.)	. 5	5				
6	Real property income	e and natural resources royalties	. 6	6				
7	Pensions and annuiti	es	. 7	7				
8	Social security benef	3						
9	Capital gain from line)						
10								
а	a Winnings							
b	b Losses			Ос				
11	Gambling winnings – Note: Losses not allo	Residents of countries other than Canada. owed	. 1	1				
12	Other (specify) ▶							
			12					
13	•	12 in columns (a) through (d)	_					
14		ate of tax at top of each column						
15	Tax on income not ef	fectively connected with a U.S. trade or business. Add colu	. ,	, , ,			R, line 23a ► 15	
		Capital Gains and Losse	s Fro	m Sales or Excha	inges of Proper	ty	I	
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not 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		(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) (b) Date a mm/do		d (c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
	nd losses on Schedule D							
	property sales or							
connec	ges that are effectively ted with a U.S. business	17 Add columns (f) and (g) of line 16			1	17	(
on Schedule D (Form 1040), Form 4797, or both.		18 Capital gain. Combine columns (f) and (g) of line						

SCHEDULE OI (Form 1040-NR)

Department of the Treasury

Internal Revenue Service (99)

Other Information

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

► Answer all questions.

OMB No. 1545-0074 Attachment Sequence No. **7C**

Name shown on Form 1040-NR Your identifying number										
SILV	/IA RAJU MARIHAL				650-96-6693					
Α	Of what country or countries were you a citizen or national during the tax year? INDIA									
В	In what country did you claim residence for tax purposes during the tax year? United States									
С	Have you ever applied to be a			⊠ No						
D	Were you ever: A U.S. citizen?									
	A U.S. citizen?			⊠ No						
2.	A green card holder (lawful per		∐ Yes	⊠ No						
_	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. 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.									
E	immigration status on the last day of the tax year. F1									
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?									
G	List all dates you entered and	e the date and hature of the	a 2020. Soo instr	uotione						
G	Note: If you are a resident of (_		iont intorvals					
	check the box for Canada or				Mexico					
	Date entered United States	Date departed United State	es	Date entered United State	s Date depa	rted United	d States			
	mm/dd/yy	mm/dd/yy		mm/dd/yy	n	nm/dd/yy				
ш	Cive number of days (including	vecetion nonworkdove one	d portiol days) year	ware present in the United	Ctataa duringu					
Н	Give number of days (including 2018	, 2019	, ar	nd 2020365		_	_			
I	Did you file a U.S. income tax					X Yes	∐ No			
	If "Yes," give the latest year ar	id form number you filed		1040NR		□ v	X No			
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			
K	Did you receive total compens					Yes	⊠ No			
	-		-			_	☐ No			
L	If "Yes," did you use an alternative method to determine the source of this compensation?									
1.	Enter the name of the country, amount of exempt income in the	the applicable tax treaty art	icle, the number	of months in prior years you	claimed the tre	aty benefi	t, and the			
	(a) Cou		(b) Tax treaty ar		ns (d) Am	ount of exe	empt			
	,	,	,	claimed in prior tax ye						
	(e) Total. Enter this amount or	n Form 1040-NR, line 1c. D	o not enter it on	line 1a or line 1b	•					
2.	Were you subject to tax in a fo	•				Yes	☐ No			
3.	Are you claiming treaty benefit	s pursuant to a Competent	Authority detern	nination?		☐ Yes	⊠ No			
	If "Yes," attach a copy of the C	Competent Authority detern	nination letter to	your return.						
M	Check the applicable box if:									
1.	This is the first year you are may with a U.S. trade or business u									
2.	You have made an election in States as effectively connected									