## 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	Soc	cial security r	number		
KAUSHIK VENUGOPAL AVADHANULA	8	802-57-8673			
Spouse's name	Spo	ouse's social	security nur	nber	
Part I Tax Return Information — Tax Year Ending December 31,	2020 (Enter yea	ar vou are	authorizi	ng.)	
Enter whole dollars only on lines 1 through 5.		<i>,</i>			
<b>Note:</b> Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1 Adjusted gross income			1	73,102.	
2 Total tax		_	2	9,150.	
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	10,086.	
4 Amount you want refunded to you		–	4	936.	
5 Amount you owe			5	\	
Part II Taxpayer Declaration and Signature Authorization (Be sure Under penalties of perjury, I declare that I have examined a copy of the income tax return (or	<u> </u>				
return (original or amended) I am now authorizing. I consent to allow my intermediate service to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receip for any delay in processing the return or refund, and (c) the date of any refund. If applicable Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial instipayment of my federal taxes owed on this return and/or a payment of estimated tax, and the authorization is to remain in full force and effect until I notify the U.S. Treasury Financial payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment business days prior to the payment (settlement) date. I also authorize the financial institution taxes to receive confidential information necessary to answer inquiries and resolve issue personal identification number (PIN) below is my signature for the income tax return (origin Electronic Funds Withdrawal Consent.	ot or reason for rejection e, I authorize the U.S. T itution account indicate he financial institution to Agent to terminate the nt cancellation requests ons involved in the process related to the paym	n of the tran reasury and d in the tax debit the er authorization must be re- cessing of the ent. I furthe	smission, (in its designal preparation attry to this action. To revolve eceived no ne electronical attractions at the control of the control	b) the reason ated Financial a software for account. This ke (cancel) a later than 2 c payment of edge that the	
Taxpayer's PIN: check one box only				$\neg$	
<u></u>	nter or generate my F	JINI 7 8	3 6 7	3 as my	
ERO firm name signature on the income tax return (original or amended) I am now author	,	Enter	five digits, be enter all zer		
I will enter my PIN as my signature on the income tax return (original or a if you are entering your own PIN <b>and</b> your return is filed using the Pract below.	amended) I am now a				
Your signature ►	Date ▶				
Spouse's PIN: check one box only					
·	nter or generate my F	DINI I		ac my	
ERO firm name	inter or generate my i		five digits, b	as my	
signature on the income tax return (original or amended) I am now author	rizing.		enter all zer		
I will enter my PIN as my signature on the income tax return (original or a if you are entering your own PIN and your return is filed using the Pract below.					
Spouse's signature ▶	Date ►				
Practitioner PIN Method Returns Only—					
Part III Certification and Authentication — Practitioner PIN Method	d Only				
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected	d PIN. 5 8 7	2 7 8	6 1 9	8 9	
I certify that the above numeric entry is my PIN, which is my signature for the electronic ir authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confir requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e	rm that I am submitting	this return	in accorda	ance with the	
· · · · · · · · · · · · · · · · · · ·					
ERO's signature ►	Date ►				
ERO Must Retain This Form — See I Don't Submit This Form to the IRS Unless R		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 $\blacktriangleright$ one box. Your first name and middle initial Last name Your identifying number (see instructions) KAUSHIK VENUGOPAL AVADHANULA 802-57-8673 Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. Check if: X Individual 207 Estate or Trust 7495 TAHOE LAKE CT City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code MASON 45040 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

D	<u> </u>				Ι		(4) 4	f avalifia	s for (see instr.):
•		(1) First name	Last name	(2) Dependent's identifying number		Dependent's ionship to you	Child tax	-	Credit for other dependents
								]	
								]	
								]	
check here ▶								]	
Income	1a	Wages, salaries, tips	etc. Attach Form(s) W	<i>I</i> -2				1a	73,081.
Effectively	b	Scholarship and fello	wship grants. Attach F	Form(s) 1042-S or require	d statem	ent. See instruct	ions .	1b	
Connected	С	Total income exemp	t by a treaty from Sch	edule OI (Form 1040-NR	), Item				
With U.S.		L, line 1(e)				1c			
Trade or	2a	Tax-exempt interest	2a	<b>b</b> Tax	kable int	erest		2b	21.
if more than four dependents, see nstructions and check here ▶□  Income  Effectively Connected With U.S. Trade or Business  3a Qualified divided 4a IRA distribution 5a Pensions and 6 Reserved for for 7 Capital gain of 8 Other income 9 Add lines 1a, 10 Adjustments to a From Schedul b Charitable cordinates and 11 Subtract line for for 12 Itemized ded deduction. See 13a Qualified busin b Exemptions for c Add lines 13a 14 Add lines 12 are subtracted and the subtract line for the following subtracts line for the following subtracts line for the following subtract line for	Qualified dividends	3a	<b>b</b> Ord	dinary di	vidends		3b		
	4a	IRA distributions .	4a	<b>b</b> Tax	kable an	nount		4b	
	5a	Pensions and annuiti	es <b>5a</b>	<b>b</b> Tax	kable an	nount		5b	
	6	Reserved for future u	se					6	
	7	Capital gain or (loss).	Attach Schedule D (Fe	orm 1040) if required. If n	ot requir	ed, check here .	<b>▶</b> □	7	
	8	Other income from S	chedule 1 (Form 1040)	), line 9				8	
	9	Add lines 1a, 1b, 2b,	3b, 4b, 5b, 7, and 8. T	his is your total effective	ely conn	ected income .	. ▶	9	73,102.
	10	Adjustments to incom	ne:						
	а	From Schedule 1 (Fo	rm 1040), line 22			10a			
	b	Charitable contribution	ons for certain resident	ts of India. See instruction	ns .	10b			
	С	Scholarship and fello	wship grants excluded	1		10c			
	d	Add lines 10a throug	h 10c. These are your	total adjustments to inc	ome .		. ▶	10d	
	11	Subtract line 10d from	m line 9. This is your <b>a</b>	djusted gross income			. ▶	11	73,102.
	12			orm 1040-NR)) or, for ce St				12	12,400.
,	13a	Qualified business in	come deduction. Attac	ch Form 8995 or Form 89	95-A	13a			
	b	Exemptions for estate	es and trusts only. See	e instructions		13b			
	С	Add lines 13a and 13	b					13c	
	14	Add lines 12 and 13c						14	12,400.
	15	Taxable income. Su	btract line 14 from line	11. If zero or less, enter	-0			15	60,702.

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Form 1040-NR (	2020)						Page <b>2</b>
	16	Tax (see instructions). Check if any from Form	(s): <b>1</b> 8814 <b>2</b>	4972 <b>3</b>		16	9,150.
	17	Amount from Schedule 2 (Form 1040), line 3		<del>.</del>		17	0.
	18	Add lines 16 and 17				18	9,150.
	19	Child tax credit or credit for other dependent	ts			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,	enter -0			22	9,150.
	23a	Tax on income not effectively connected of from Schedule NEC (Form 1040-NR), line 15					
	b	Other taxes, including self-employment tax, line 10	,	'			
	С	Transportation tax (see instructions)		23c			
	d	Add lines 23a through 23c				23d	
	24	Add lines 22 and 23d. This is your ${\color{red} total\ tax}$			▶	24	9,150.
	25	Federal income tax withheld from:					
	а	Form(s) W-2		<b>25a</b>	10,086.		
	b	Form(s) 1099		25b			
	С	Other forms (see instructions)		25c			
	d	Add lines 25a through 25c				25d	10,086.
	е	Form(s) 8805				25e	
	f	Form(s) 8288-A				25f	
	g	Form(s) 1042-S				25g	
	26	2020 estimated tax payments and amount a	•			26	
	27	Reserved for future use		27			
	28	Additional child tax credit. Attach Schedule	3812 (Form 1040) .	28			
	29	Credit for amount paid with Form 1040-C					
	30	Reserved for future use		30			
	31	Amount from Schedule 3 (Form 1040), line 1					
	32	Add lines 28 through 31. These are your total	al other payments and	efundable credits .	▶	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. The	ese are your total payme	ents	▶	33	10,086.
Refund	34	If line 33 is more than line 24, subtract line 2		•		34	936.
	35a	Amount of line 34 you want refunded to you			▶□	35a	936.
Direct deposit?	►b						
See instructions.	<b>▶</b> d	Account number 3 1 3 1 1 1 7	7 0 7				
	►e	If you want your refund check mailed to an					
		enter it here.					
	36	Amount of line 34 you want applied to your	2021 estimated tax	. • 36			
Amount	37	Amount you owe. Subtract line 33 from line	24. For details on how t		s •	37	
You Owe	38			. • 38			
Third Party Designee	return with the IRS? See instructions						⊠ No
(Other than paid preparer)							
Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of who						has any knowledge.
	Your	signature	Date Your occ	upation			nt you an Identity N, enter it here
			מ רבייזוז	ARE DEVELOPER		nst.) ▶	in, enter it nere
	Phone	2 00	Email address	TITE DEVELOPER	1 3001		
		rer's name Preparer's si		Date	PTIN		Check if:
Paid	CVAM DDIVA DAM CACAD CHIDTA TALLAM CVAM DDIVA DAM CACAD CHIDTA TALLAM 05/10/2021 D0206						Self-employed
Preparer		name ► GLOBAL TAXES LLC	TAIN DINOME GULLY I	05/10/202			8)965-9522
Use Only			n Cummina GA 3	0.041			0-1017196
	Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN ► 30-1017196						

## **SCHEDULE OI** (Form 1040-NR)

**Other Information** 

► Go to www.irs.gov/Form1040NR f

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

► Attach to

Your identify	ving number
► Answer all questions.	Attachment Sequence No. <b>70</b>
Attach to Form 1040-NR.	
1040NR for instructions and the latest information.	20 <b>20</b>

Name sh	ame shown on Form 1040-NR  Your identifying number							
KAUS	AUSHIK VENUGOPAL AVADHANULA				802-57-8673			
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 purpose	s during the tax year'	? United States				
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident) o	f 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 Ur	ited States?			☐ Yes  ☐ No		
	If you answer "Yes" to (1) or (2	), see Pub. 519, chapter 4,	for expatriation rules	that apply to you.				
E	If you had a visa on the last of immigration status on the last of	lay of the tax year, enter y day of the tax year. F1	our visa type. If you	did not have a visa, en	ter your U.S.			
F	Have you ever changed your value of the second of the seco	isa type (nonimmigrant sta	tus) or U.S. immigrati	ion status?		☐ Yes		
G	List all dates you entered and							
	Note: If you are a resident of 0	Canada or Mexico AND co	mmute to work in the	United States at frequ	ent intervals,			
	check the box for Canada or	Mexico and skip to item I	<u>1 .</u> <u>. </u>	$\square$ Canada	Mexico			
	Date entered United States	Date departed United Stat	es D	ate entered United State		rted United States		
	mm/dd/yy	mm/dd/yy		mm/dd/yy	m	nm/dd/yy		
Н	Give number of days (including	•		•	•			
	2018 146					⊠ Yes □ No		
ı	Did you file a U.S. income tax					X Yes ☐ No		
J	If "Yes," give the latest year ar Are you filing a return for a trus					☐ Yes         X No		
J	If "Yes," did the trust have a l					res No		
	U.S. person, or receive a conti					☐ Yes ☐ No		
K	Did you receive total compens					☐ Yes ⊠ No		
••	If "Yes," did you use an alterna					☐ Yes ☐ No		
L	Income Exempt From Tax-If			•				
	complete (1) through (3) below				,	J ,,		
1.	Enter the name of the country,				claimed the trea	aty benefit, and the		
	amount of exempt income in the	e columns below. Attach Fo	rm 8833 if required. Se	ee instructions.				
	<b>(a)</b> Cou	ntry	(b) Tax treaty article			ount of exempt		
				claimed in prior tax ye	ars income in	current tax year		
	(e) Total. Enter this amount of	n Form 1040-NR line 1c F	no not enter it on line	 1a or line 1b	<b>•</b>			
2.	Were you subject to tax in a fo	· ·				☐ Yes ☐ No		
	Are you claiming treaty benefit		,	•		☐ Yes ☒ No		
٠.	If "Yes," attach a copy of the (							
М	Check the applicable box if:	parameter and the second	, , , , , , , , , , , , , , , , , , ,	-				
	This is the first year you are many	aking an election to treat in	come from real prope	erty located in the Unite	ed States as eff	ectively connected		
	with a U.S. trade or business u	•		-				
2.								
	States as effectively connected			1(d). See instructions.		🕨 🗌		
		and the Instructions for Fa						