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 sec	Social security number					
CHIRUDEEP KURRA	422-9	422-93-7568					
Spouse's name	Spouse's	Spouse's social security number					
Part I Tax Return Information — Tax Year Ending December 31, 202	1 (Enter year you	ı are au	thorizing.)			
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			5	,140.			
2 Total tax				0.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099				250.			
4 Amount you want refunded to you				250.			
5 Amount you owe	et and keen a c	5	our retu	rn)			
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or							
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reas for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I autho Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution ac payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financia authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancell business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or ame Electronic Funds Withdrawal Consent.	rize the Ú.S. Treasur count indicated in that al institution to debit to terminate the author lation requests must eved in the processing to the payment. I	y and its of tax preprint and its of the entry of the electrication.	designated paration soft to this according revoke (ved no late ectronic pasknowledge	Financial ftware for bunt. This cancel) a er than 2 syment of that the			
Taxpayer's PIN: check one box only	1						
<u>'_</u> '	generate my PIN	3 7 !	5 6 8	as my			
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	generate my r m		digits, but er all zeros	as my			
I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN and your return is filed using the Practitioner F below.							
Your signature ▶	Date ►						
Spouse's PIN: check one box only	ŗ						
· _	generate my PIN			as my			
ERO firm name	,		digits, but	,			
signature on the income tax return (original or amended) I am now authorizing.			er all zeros				
I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN and your return is filed using the Practitioner Fibelow.							
Spouse's signature ► [Date ►						
Practitioner PIN Method Returns Only—continu	e below						
Part III Certification and Authentication — Practitioner PIN Method Only							
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5 8 7 2 7	8 6	1 9 8	9			
	Don't	enter all ze	eros				
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Provided in the process of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Provided in the process of the practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Provided in the process of the practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Provided in the practition of t	am submitting this	eturn in a	accordance				
ERO's signature ►	Date ►						
ERO Must Retain This Form — See Instruction Don't Submit This Form to the IRS Unless Request							

Filing	×	Single Married filing	separately (MFS)	Qualifyii	ng widov	w(er) (Q'	W)					
Status Check only	lf y	ou checked the QW box, enter the alifying person is a child but not y	child's nam	e if the	_ ,	Ü	. , .	,					
one box.										Vour idon	tifuina ni	ımbor	
Your first name and middle initial Last na				anie						Your identifying number (see instructions)			
CHIRUDEE	P		KURF	2A						422-9	3-7568		
Home address	(num	ber and street or rural route). If you	u have a P.0	D. box, see ins	tructions.			Apt. no). (Check if:	X Indivi	 dual	
5400 E21s	st S	T N						202			Estate	e or Trus	
City, town, or po	ost off	ice. If you have a foreign address, al	so complete	spaces below.	State		ZIP co	de					
WICHITA					KS 6720			8					
Foreign country	y nam	е	Foreign pr	ovince/state/c	ounty		Foreig	n postal	code				
Δt any time dur	rina 21	221, did you receive, sell, exchang	ne or other	vise dispose o	any finan	cial inter	est in a	ny virtua	Curren	21/2	Yes	X No	
tarry tilrie dui	ilig Z	52 I, did you receive, sell, exchang	je, or otherv	vise dispose o	ally illiall	Ciai IIIIEI	est III a	ily viitua	Current		165		
Dependents	6			(0) D					(4) ✓ if qualif		, ,	,	
(see instructions)):	(1) First name Last na	(2) Depe		',		(3) Dependent's relationship to you		Child tax credit		Credit for other dependents		
		(7)		, , ,				, ,			С		
If more than four										-			
dependents, see instructions and												<u> </u>	
check here ►]											5	
Income	1a	Wages, salaries, tips, etc. Attach	n Form(s) W	-2						1a	5	,140.	
Effectively	b	Scholarship and fellowship gran	ts. Attach F	orm(s) 1042-S	or required	d statem	ent. Se	e instruc	tions .	1b			
Connected	С	Total income exempt by a treat	y from Sche	edule OI (Form	1040-NR), Item							
With U.S.		L, line 1(e)					1c						
Trade or	2a	Tax-exempt interest	2a		1					2b			
Business	3a	Qualified dividends	3a		1					3b			
	4a	IRA distributions	4a		1					4b			
	5a	Pensions and annuities	5a		j b lax	able am	iount .			5b			
	6 7	Reserved for future use	odulo D (Ec		 wired If n		 od obo	ok horo		6			
	8	Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here . Other income from Schedule 1 (Form 1040), line 10								8			
	9	Add lines 1a, 1b, 2b, 3b, 4b, 5b, 7, and 8. This is your total effectively connected income								9	5	,140.	
	10	Adjustments to income:	,	, 50 1510		,							
	а	From Schedule 1 (Form 1040), li	ne 26				10a						
	b	Reserved for future use											
	С	Scholarship and fellowship grants excluded											
	d	Add lines 10a and 10c. These are your total adjustments to income							10d				
	11	Subtract line 10d from line 9. This is your adjusted gross income								11	5	,140.	
	12a	Itemized deductions (from Sc residents of India, standard ded					12a	1	2,550				
	b	Charitable contributions for certa	ain residents	of India. See i	nstruction	s .	12b						
	С	Add lines 12a and 12b								12c	12	,550.	
	13a	Qualified business income dedu	ction from F	orm 8995 or F	orm 8995-	Α.	13a						
	b	Exemptions for estates and trus	ts only. See	instructions			13b						
	С									13c			
	14									14	12	,550.	
	15	Taxable income. Subtract line 1	11 from line	11 If zero or la	see antar.	Λ				15		0.	

	16	Tax (see instructions). Check if any from Form	s): 1	8814	2	4972	3			16	0.	
	17	Amount from Schedule 2 (Form 1040), line 3								17	0.	
	18	Add lines 16 and 17								18	0.	
	19	Nonrefundable child tax credit or credit for or	her depend	ents from	n Sch	edule 8	812 (F	orm 104	0)	19		
	20	Amount from Schedule 3 (Form 1040), line 8								20		
	21	Add lines 19 and 20								21		
	22	Subtract line 21 from line 18. If zero or less, e								22	0.	
	23a	Tax on income not effectively connected v from Schedule NEC (Form 1040-NR), line 15					23a					
	b	Other taxes, including self-employment tax, line 21		•		, · ·	23b					
	С	Transportation tax (see instructions)				. [23c					
	d	Add lines 23a through 23c								23d	i	
	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		250.			
	b	Form(s) 1099				. [25b					
	С	Other forms (see instructions)					25c					
	d	Add lines 25a through 25c				–				25d	250.	
	е	Form(s) 8805								25e	1	
	f	Form(s) 8288-A								25f		
	g	Form(s) 1042-S								25g		
	26	2021 estimated tax payments and amount ap								26	·	
	27	Reserved for future use				1	27					
	28	Refundable child tax credit or additional cl 8812 (Form 1040)	nild tax cred	dit from	Sche	dule	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 15					31					
	32	Add lines 28, 29, and 31. These are your total	l other pay	ments a	nd re	fundab	le cre	dits	. ▶	32		
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. The								33	250.	
Refund	34	If line 33 is more than line 24, subtract line 24								34	250.	
	35a	Amount of line 34 you want refunded to you					-	-		35a	250.	
Direct deposit?	▶b	Routing number 0 4 4 0 0 0 0			Гуре:		Checki		Savings			
See instructions.	▶d	Account number 5 9 5 0 1 6 1				ΙT		ĭ —	3			
	►e	If you want your refund check mailed to an a enter it here.	ddress outs					: shown on	page 1,			
	36	Amount of line 34 you want applied to your	 2022 estima	ated tax		•	36					
Amount	37	Amount you owe. Subtract line 33 from line						uctions	. ▶	37		
You Owe	38	Estimated tax penalty (see instructions) .				•	38					
Third Party Designee		ou want to allow another person to disstructions	scuss this	return v	with	the IR	S? ▶ [Yes.	Complete	below.	⊠ No	
200.900	Designame		Phone no. ▶)					nal identif er (PIN)	ication		
Sign Here			at I have examined this return and accompanying schedules and stateme plete. Declaration of preparer (other than taxpayer) is based on all information									
пеге	Your	signature	Date	Your	occup	oation					ent you an Identity	
									I .		PIN, enter it here	
	<u> </u>			ENG	LNEE	iK			(see	inst.) ▶		
	Phone		Email addre	ess		-	D :		D711			
Paid		rer's name Preparer's sig					Date		PTIN		Check if:	
Preparer		RIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGA	R GUPTA	A TAI	LLAM	03/2	4/2022	P0208		Self-employed	
Use Only	Firm's name ► GLOBAL TAXES LLC Phone r									78)965-9522		
- J. Jy	Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's									EIN ► 30-1017196		

Form 1040-NR (2021)

Page 2

SCHEDULE OI (Form 1040-NR)

Other Information

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040-NR. Attachment Sequence No. **7C** ► Answer all questions. Your identifying number

Name sl	nown on Form 1040-NR				Your identifying	number						
CHIR	UDEEP KURRA				422-93-7	568						
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	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		☐ 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 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	left the United States durin	g 2021. See instr									
	Note: If you are a resident of 0	Canada or Mexico AND co	mmute to work ir	n the United States at frequ	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	1	mm/dd/yy						
Н	Give number of days (including											
	2019	, 2020	, ar	nd 2021365	·	(
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					
L	Income Exempt From Tax—If complete (1) through (3) below	. See Pub. 901 for more int	formation on tax	treaties.	-		-					
1.	Enter the name of the country, amount of exempt income in the		orm 8833 if requir	ed. See instructions.	ı claimed the tre	eaty benefi	t, and the					
	(a) Cou	ntry	(b) Tax treaty ar		(-)							
				claimed in prior tax ye	ears income i	n current ta	ax year					
	(e) Total Enter this amount of	n Form 1040-NR line 10 D	not enter it on	line 1a or line 1b	•							
2	(e) Total. Enter this amount on Form 1040-NR, line 1c. Do not enter it on line 1a or line 1b ▶											
	B. Are you claiming treaty benefits pursuant to a Competent Authority determination?											
-	If "Yes," attach a copy of the Competent Authority determination letter to your return.											
М	Check the applicable box if:	,		,								
	This is the first year you are ma					fectively c	onnected					
_	with a U.S. trade or business under section 871(d). See instructions											
2.	You have made an election in States as effectively connected											
	Grares as effectively conflected	u with a 0.5. trade of busin	ess under section	in or ituj. See instructions .			· • ⊔					