(Rev. January 2021)

Department of the Treasury

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

IIILEITIAI	teveritue dei vice						
Submi	ssion Identification Number (SID)						
Taxpaye	r's name	Social securit	y numl	per			
SAI	PRATHYUSHA BOKKU	160-85-3903					
Spouse'	s name	Spouse's soc	ial sec	urity nu	mber		
Part	, ,	year you a	re au	thoriz	ing.)		
	whole dollars only on lines 1 through 5.						
1	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. Adjusted gross income		1		3 0	509.	
2	Total tax		2			958.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			074.	
4	Amount you want refunded to you		4			116.	
5	Amount you owe		5			<u> </u>	
Part			y of y	our r	eturr	<u>1)</u>	
return (to send for any Agent t paymen authori paymen busines taxes t person	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmary return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected or in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated to the financial taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminated the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requise days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the paid identification number (PIN) below is my signature for the income tax return (original or amended) I and income tax return (original or amended) I and income tax return (original or amended) I and item to the paid	itter, or electro ection of the tr S. Treasury a cated in the tr to debit the the authoriza- uests must be processing of ayment. I furl	onic recansmind its of ax prepartion. The receive of the elandary at the eland	turn ori	ginato (b) the ated Fin softwaccouloke (ca o later ic payredge t	r (ERO) reason inancial vare for nt. This ancel) a than 2 ment of hat the	
					\neg		
Тахра	yer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate	5 DINI	3 9	9 0	3	00 mv	
	I authorize GLOBAL TAXES LLC to enter or generate signature on the income tax return (original or amended) I am now authorizing.	En En		digits, l	but	as my	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.						
Your s	ignature ► Sai Prathywsha Bolkon Date ►	03/25/2	022				
Spous	e's PIN: check one box only						
	I authorize to enter or generate	mv PIN				as my	
_	ERO firm name		ter five	digits,		,	
	signature on the income tax return (original or amended) I am now authorizing.			r all ze			
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.		_			-	
Spous	e's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue below						
Part	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 ent	er all ze	eros			
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed 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 of Ir	itting this retu	ırn in a	accorda	anće v		
ERO's	signature ▶ Date ▶						
	ERO Must Retain This Form — See Instructions						
	Don't Submit This Form to the IRS Unless Requested To I	o So					

Department of the Treasury—Internal Revenue Service (99)
U.S. Nonresident Alien Income Tax Return

2021

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

		U.S. Noncesident	Allell I	ilcoille lax	Verniii			OIVID INO. 13	045-0074	or staple in	this space.
Filing Status		ingle Married filing	. ,	. , _	Qualifying	g widow(e	er) (QW)		•		
Check only one box.	-	checked the QW box, enter the lying person is a child but not y									
Your first name a	and mid	ddle initial	Last	name						entifying r tructions)	number
SAI PRATH	YUSH	A	вок	KU					160-	85-390	3
Home address (r	number	and street or rural route). If you	u have a P	.O. box, see inst	tructions.		Α	pt. no.	Check i	f: 🛛 Indiv	/idual
6 FRASER S	ST									Esta	ite or Trust
City, town, or pos	t office	. If you have a foreign address, al	so complet	te spaces below.	State	Z	IP code				
LITTLETON					MA	0	1460				
Foreign country	name		Foreign p	province/state/co	ounty	F	oreign p	ostal code			
At any time durin	ng 2021	, did you receive, sell, exchang	je, or othe	rwise dispose of	f any financi	ial interest	t in any	virtual curre	ency?	Yes	S ⊠ No
Dependents				(0) 5		4-1-			1) ✓ if qua	lifies for (se	e inst.):
(see instructions):		(1) First name Last na	ame					l ('hı	ld tax cred		t for other endents
f more than four									-		
dependents, see											<u> </u>
nstructions and check here ►											<u> </u>
	10 \/	Vagas salarios tina eta Attack	Form(a) I	N 2					10	1 2	<u> </u>
Income			` '							3	3,009.
Effectively Connected				` '	•	1	366	ISTI UCTIONS	. 10		
With U.S.			-	nedule OI (FOITI	i 1040-NK),	I .	ıc				
Trade or		. , ,	1 1		h Taxa				. 2b		
Business		•			1						
Dusiness					1	•			. 4b		
			5a		1				. 5b		
	6 F	Reserved for future use							. 6		
	7 C	Capital gain or (loss). Attach Sch	nedule D (F	orm 1040) if rec	quired. If no	t required	, check	here . ►	□ 7		
	8 0	Other income from Schedule 1 (Form 1040)), line 10 . .					. 8		
	tuctions): (1) First name Last name (2) Dependent's identifying number relationship relatio	ted inco	ome	▶ 9	3	3,009.					
1	1 0 A	djustments to income:									
	a F	rom Schedule 1 (Form 1040), li	ne 26 . .			. 10	0a	2,50	0.		
	b F	Reserved for future use				. 10	0b				
						. 1	0с				
									▶ 10d		2,500.
1	1 1 S	subtract line 10d from line 9. Th	is is your a	adjusted gross	income .				► <u>11</u>	3	0,509.
1							2a	12,55	50.		
	b C	Charitable contributions for certa	ain residen	ts of India. See i	nstructions	. 1:	2b				
									. 120	: 1	2,550.
1	3a C	Qualified business income dedu	ction from	Form 8995 or F	orm 8995-A	A . 1	3a				
	b E	xemptions for estates and trust	ts only. Se	e instructions		. 1	3b				
	c A	dd lines 13a and 13b							. 130	;	

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

Add lines 12c and 13c

12,550.

17,959.

14

15

Form 1040-NR (2	2021)									Page 2		
	16	Tax (see instructions). Check if	any from Form	(s): 1 88	14 2 4972	2 3 🗌		16	1	,958.		
	17	Amount from Schedule 2 (Form	n 1040), line 3					17		0.		
	18	Add lines 16 and 17						18	1	,958.		
	19	Nonrefundable child tax credit	or credit for c	ther depender	its from Schedule	8812 (Form 104	0)	19				
	20	Amount from Schedule 3 (Form	n 1040), line 8					20				
	21	Add lines 19 and 20						21				
	22	Subtract line 21 from line 18. It	f zero or less,	enter -0				22	1	,958.		
	23a	Tax on income not effectively from Schedule NEC (Form 104	,			23 a						
	b	Other taxes, including self-em line 21			· · · · · · · · · · · · · · · · · · ·	23b						
	С	Transportation tax (see instruc	tions)			23c						
	d	Add lines 23a through 23c .						23d				
	24	Add lines 22 and 23d. This is y	our total tax				. ▶	24	1	<u>,958.</u>		
	25	Federal income tax withheld fr	om:									
	а	Form(s) W-2				25 a 4	,074.					
	b	Form(s) 1099				25b						
	С	Other forms (see instructions)				25c						
	d	Add lines 25a through 25c .						25d	4	,074.		
	е	Form(s) 8805						25e				
	f	Form(s) 8288-A						25f				
	g	Form(s) 1042-S						25g				
	26	2021 estimated tax payments	and amount a	pplied from 20	20 return			26				
	27	Reserved for future use				27						
	28	Refundable child tax credit o 8812 (Form 1040)		hild tax credit		28						
	29	Credit for amount paid with Fo	orm 1040-C			29						
	30	Reserved for future use				30						
	31	Amount from Schedule 3 (Form	m 1040), line 1	5		31						
	32	Add lines 28, 29, and 31. Thes	e are your tot	al other paym	ents and refunda	ble credits	. ▶	32				
	33	Add lines 25d, 25e, 25f, 25g, 2	26, and 32. The	ese are your to	tal payments .		. ▶	33	4	,074.		
Refund	34	If line 33 is more than line 24,	subtract line 2	4 from line 33.	This is the amoun	t you overpaid		34	2	,116.		
	35a	Amount of line 34 you want re	funded to you	J. If Form 8888	is attached, check	k here		35a	2	,116.		
Direct deposit?	▶b	Routing number 0 8 1	9 0 4 8	3 0 8	▶ c Type: 🗵	Checking	Savings					
See instructions.	►d	Account number 2 9 1	0 2 8 8	3 7 0 6	3 6							
	▶ e	If you want your refund check enter it here.				es not shown on	page 1,					
	36	Amount of line 34 you want ap	plied to your	2022 estimate	ed tax . 🕨	36						
Amount	37	Amount you owe. Subtract lin	ne 33 from line	24. For details	on how to pay, se	ee instructions	. ▶	37				
You Owe	38	Estimated tax penalty (see inst	tructions) .		🕨	38						
Third Party Designee	-	ou want to allow another structions					Complete b	elow.	⊠ No			
	Desigi name			Phone no. ▶			nal identific er (PIN)	ation _				
Sign Here		penalties of perjury, I declare that I they are true, correct, and complete										
пеге	Yours	signature		Date Your occupation					nt you an lo			
					OMIT DEST		l l		N, enter it	here		
	7				STUDENT		(see ir	nst.) ▶				
	Phone		Dror 1- '	Email addres	S	Data	DTINI	1	01			
Paid		rer's name	Preparer's si	_		Date	PTIN		Check if:			
Preparer		RIYA RAM SAGAR GUPTA TALLAM		A RAM SAGAR	GUPTA TALLAM	03/24/2022	P02082		Self-er			
Use Only		name ► GLOBAL TAXES							8)965-			
	Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's E								IN ► 30-1017196			

Form 1040-NR (2021)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment

Department of the Treasury Internal Revenue Service

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. Sequence No. 01

Your social security number

SAI PRATHYUSHA BOKKU 160-85-3903 Part I **Additional Income** Taxable refunds, credits, or offsets of state and local income taxes 1 2a **b** Date of original divorce or separation agreement (see instructions) 3 3 4 4 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach 5 6 6 7 7 8 Other income: 8a 8b 8c **d** Foreign earned income exclusion from Form 2555 8d e Taxable Health Savings Account distribution 8e 8f 8a 8h i Activity not engaged in for profit income 8i 8j k Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such 8k I Olympic and Paralympic medals and USOC prize money (see 81 m Section 951(a) inclusion (see instructions) 8_m Section 951A(a) inclusion (see instructions) 8n o Section 461(I) excess business loss adjustment 80 **p** Taxable distributions from an ABLE account (see instructions). **q8 z** Other income. List type and amount ▶ Total other income. Add lines 8a through 8z 9 9 Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 10 1040-NR, line 8 10

Schedule 1 (Form 1040) 2021 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106	•	12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form	3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN	>		
С	Date of original divorce or separation agreement (see instructions)	·		
20	IRA deduction		20	
21	Student loan interest deduction		21	2,500.
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
Z	Other adjustments. List type and amount ▶	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line		26	2,500.

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.

2021	
Attachment Sequence No. 7	3

Name shown on Form 1040-NR SAI PRATHYUSHA BOKKU Your identifying number 160-85-3903

⊏iiter a	aniount of income and	er trie appropriate rate of	tax. See mstructions.		-		1		(-0.00	v (on a cifu)
		Nature of Inc	ome			(a) 10%	(b) 15%	(c) 30%	. ,	r (specify)
	Dividende and divide	and an inclantar							%	%
1	Dividends and divide	•			4.					
a	Dividends paid by U.S. corporations				1a					
b	Dividends paid by foreign corporations				1b 1c					
С	Dividend equivalent payments received with respect to section 871(m) transactions									
2	Interest:									
a					2a					
b					2b 2c					
С	Other									
3					3					
4					4					
5			shing, etc.)		5					
6	Real property income and natural resources royalties				6					
7	Pensions and annuities				7					
8	Social security benefits				8					
9	Capital gain from line 18 below				9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0									
а	Winnings									
b	Losses				10c					
11	Gambling winnings—Residents of countries other than Canada. Note: Losses not allowed			11						
12	Other (specify) ▶									
					12					
13	Add lines 1a through	12 in columns (a) throu	gh (d)		13					
14			ch column		14					
15	Tax on income not ef	fectively connected with	n a U.S. trade or busines						R, line 23a ► 15	
			Capital Gains an	d Losses F	From	Sales or Excha	anges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		(if necessary, at	rty and description tach statement of s not shown below)	(b) Date acquire mm/dd/yyyy		(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).
	ely connected with a U.S.									
business. Do not include a gain or loss on disposing of a U.S. real										
propert gains a	y interest; report these nd losses on Schedule D									
(Form 1	040).									
	property sales or ges that are effectively									
connec	ted with a U.S. business	17 Add columns (f)	and (g) of line 16 .					17	()	
on Schedule D (Form 1040), Form 4797, or both.			ombine columns (f) and	(g) of line 17	7. Ente	r the net gain her	e and on line 9 ab	ove. If a loss, ente	er -0 ▶ 18	

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						
SA	I PRATHYUSHA BOKKU				160-85-3	903						
Α	Of what country or countries were you a citizen or											
В	In what country did you claim residence for tax pu											
С	Have you ever applied to be a green card holder (la	awful permanent resid	ent) of the L	Inited States? .		☐ Yes	⊠ No					
D	Were you ever:											
1	. A U.S. citizen?					☐ Yes	⊠ No					
2		A green card holder (lawful permanent resident) of the United States?										
	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 year											
F	Have you ever changed your visa type (nonimmigrall f you answered "Yes," indicate the date and nature		-	itus?		∐ Yes	⊠ No					
G	List all dates you entered and left the United States	s during 2021. See ins	tructions.									
	Note: If you are a resident of Canada or Mexico A				ent intervals,							
	check the box for Canada or Mexico and skip to	item H		. 🗌 Canada	Mexico							
	Date entered United States Date departed United			tered United States		arted Unite	d States					
	mm/dd/yy mm/dd/yy	,		mm/dd/yy	r	mm/dd/yy						
Н	Give number of days (including vacation, nonworkda 2019, 2020											
1	Did you file a U.S. income tax return for any prior y	/ear?				X Yes	☐ No					
	If "Yes," give the latest year and form number you	filed ▶	1040NR	-								
J	Are you filing a return for a trust?					☐ Yes	⊠ No					
	If "Yes," did the trust have a U.S. or foreign owne U.S. person, or receive a contribution from a U.S.					Yes	□No					
K	Did you receive total compensation of \$250,000 or	more during the tax y	ear?			☐ Yes	⊠ No					
	If "Yes," did you use an alternative method to dete	rmine the source of th	is compens	ation?		☐ Yes	☐ No					
L	Income Exempt From Tax—If you are claiming excomplete (1) through (3) below. See Pub. 901 for m			a U.S. income to	ax treaty with	a foreign	country,					
1	Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.											
	(a) Country	(b) Tax treaty	(b) Tax treaty article (c) Number of model claimed in prior tax			1 1						
				, , , , , , , , , , , , , , , , , , ,								
	(2) 7 1 1 5 1 11 11 11 11 11 11 11 11 11 11 1		P 4 :	P. 41								
	(e) Total. Enter this amount on Form 1040-NR, line											
	. Were you subject to tax in a foreign country on any					∐ Yes	∐ No ⊠ Na					
3	3. Are you claiming treaty benefits pursuant to a Com	•				∐ Yes	⊠ No					
	If "Yes," attach a copy of the Competent Authority	determination letter to	your return	1.								
M	Check the applicable box if:	Avent in some - for	muning state of	a a ka al (la klu a 10a0)	d Ctata '	if a mathematical						
	 This is the first year you are making an election to with a U.S. trade or business under section 871(d). 	. See instructions					. ▶ 🗌					
2	You have made an election in a previous year the States as effectively connected with a U.S. trade o											