## 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

	10101100									
Submi	ssion Identification Number (S	SID)								
Taxpaye	r's name				Social securit	ty numl	per			
SRI	SAI JYOTHSNA JAMPAL	A			646-25-9906					
Spouse's	s name				Spouse's soc	ial seci	urity numbe	er		
Part	Tax Return Informat	tion — Tax Year Ending D	ecember 31 20:	21 (Enter	year you a	re au	thorizina	1)		
	whole dollars only on lines 1 th	<u> </u>	cociliber or, 20.	ZI (LIIIOI	ycai you a	ic au	tilonzing	J·/		
		only. Leave lines 1, 2, 3, and	5 blank.							
1						1	22	2,071.		
2	Total tax					2		923.		
3	Federal income tax withheld f	from Form(s) W-2 and Form(s)	1099			3	3	3,406.		
4	Amount you want refunded to	o you				4		2,483.		
5	Amount you owe					5				
Part	I Taxpayer Declaratio	n and Signature Authoriz	ation (Be sure you	get and k	еер а сор	y of y	our retu	urn)		
return ( to send for any Agent to paymer authorize paymer business taxes to persona	original or amended) I am now au my return to the IRS and to rece delay in processing the return or o initiate an ACH electronic funds at of my federal taxes owed on the ration is to remain in full force a to I must contact the U.S. Trea is days prior to the payment (set to receive confidential information al identification number (PIN) belo	rect, and complete. I further dec thorizing. I consent to allow my in eive from the IRS (a) an acknowle refund, and (c) the date of any re s withdrawal (direct debit) entry to is return and/or a payment of esti nd effect until I notify the U.S. T sury Financial Agent at 1-888-3 tlement) date. I also authorize the n necessary to answer inquiries ow is my signature for the income	ntermediate service provious dgement of receipt or reastfund. If applicable, I authorate the financial institution a mated tax, and the financial reasury Financial Agent to 53-4537. Payment cancer financial institutions involved and resolve issues related	der, transmination for rejectorize the U. account indiction institution to terminate ellation required to the part of the part	tter, or electroction of the tr S. Treasury a cated in the tr n to debit the the authoriza ests must be processing of ayment. I furl	onic refansmis nd its of ax prepentry entry entry entry et ion. The receive the electrical entry	turn origina ssion, (b) to designated paration so to this according To revoke ved no late ectronic posknowledge	ator (ERO) the reason d Financial oftware for count. This (cancel) a ter than 2 ayment of e that the		
	nic Funds Withdrawal Consent.  yer's PIN: check one box on	ılv								
X		- <del>-</del>	to enter or	generate r	nv PIN 5	9 9	9 0 6	as my		
		ERO firm name x return (original or amended)		gonorato	En:		digits, but er all zeros	a.c,		
		ignature on the income tax ref on PIN <b>and</b> your return is filed	using the Practitioner	PIN metho	od. The ERC	) mus				
Your s	gnature ►Jyoth	hsna Jampala		Date ► _	04/04/20	022				
Spous	e's PIN: check one box only	,						1		
	I authorize		to enter or	generate r	nv PIN			as my		
		ERO firm name		gonorato :	En		digits, but			
	signature on the income tax	x return (original or amended)	I am now authorizing.		do	n't ente	er all zeros			
		ignature on the income tax reinn PIN <b>and</b> your return is filed								
Spous	e's signature ►			Date ►						
		<b>Practitioner PIN Method R</b>	eturns Only—contin	ue below						
Part	Certification and Au	thentication — Practition	er PIN Method Only	/						
ERO's	<b>EFIN/PIN.</b> Enter your six-dig	it EFIN followed by your five-c	ligit self-selected PIN.	5 8	7 2 7 Don't ent	8 6 er all ze		8 9		
authoriz	zed to file for tax year indicated	my PIN, which is my signature for above for the taxpayer(s) indicat hod and <b>Pub. 1345</b> , Handbook fo	ed above. I confirm that	I am submi	x return (origi tting this retu	nal or ırn in a	amended) accordanc			
ERO's	signature ▶			Date ►						
		ERO Must Retain This								
	Don't	t Submit This Form to the	<b>IRS Unless Reques</b>	sted To D	o So					

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

Department of the Treasury-Internal Revenue Service (99)

OMB No. 1545-0074

Results Only-Do not write or staple in this space.

		0.0. 11011103140111	Allel	i illoonic Tax	Itotaii	· · · · ·	<b>—</b> -   \	IVID IVO. 10	10 007 1	or stapic in this space.
Filing Status	X	Single	eparat	ely (MFS)	Qualifyi	ng widow(	er) (QW)			
Check only one box.		ou checked the QW box, enter the alifying person is a child but not yo								
Your first name	and r	niddle initial	La	ast name					Your ider	ntifying number
SRI SAI J	V∩T	HCNA		AMPALA					`	5-9906
		per and street or rural route). If you			ructions.		An	t. no.		Individual
3033 OHIO		, ,		a			40		0.1001	Estate or Trust
		ce. If you have a foreign address, als	so com	plete spaces below.	State		ZIP code	-		
FRISCO		-			TX	-	75035			
Foreign country	name	Э	Foreig	n province/state/co	ounty	F	oreign po	stal code		
At any time duri	ng 20	21, did you receive, sell, exchang	e, or ot	herwise dispose of	any finan	cial interes	st in any vi	tual curre	ncy?	☐ Yes ☒ No
Dependents								(4	<b>√</b> if qualifi	es for (see inst.):
(see instructions):		(1) First name Last na	me	(2) Dependidentifying r			ependent's nship to you	Chile	d tax credit	Credit for other dependents
If more than four										
dependents, see										
instructions and									Ц	
check here ►										
Income	1a	Wages, salaries, tips, etc. Attach	,	,					. 1a	24,571.
Effectively	b	Scholarship and fellowship grant		. ,		1	nt. See ins	ructions	. 1b	
Connected	С	Total income exempt by a treaty	from	Schedule OI (Form	1040-NR	·				
With U.S.	_	L, line 1(e)				_	1c			
Trade or	2a	Tax-exempt interest	2a				est		. 2b	
Business	3a	Qualified dividends	3a			•	dends .		. 3b	
	4a	IRA distributions	4a			cable amo			. 4b	
	5a 6	Pensions and annuities Reserved for future use	5a		<b>р</b> тал	kable amo	uni		. 5b	
	7	Capital gain or (loss). Attach Sch	 Jakula I		 uirod If n	ot roquiro	· · ·	 <b>.</b> [	7	
	8	Other income from Schedule 1 (I				-		re.	. 8	
	9	Add lines 1a, 1b, 2b, 3b, 4b, 5b,		,,					9	24,571.
	10	Adjustments to income:	r, and	o. This is your <b>tota</b>	CITCOLIV					21/3/11
	а	From Schedule 1 (Form 1040), lin	ne 26 .				10a	2,50	0.	
	b	Reserved for future use					10b			
	c	Scholarship and fellowship grant					10c			
	d	Add lines 10a and 10c. These are				_			▶ 10d	2,500.
	11	Subtract line 10d from line 9. Thi	s is you	ur <b>adjusted gross i</b>	ncome				▶ 11	22,071.
	12a	Itemized deductions (from Schresidents of India, standard deductions)	nedule	A (Form 1040-NR)	or, for		12a	12,55	0	<u> </u>
	b	Charitable contributions for certa				-	12b	30		
	C	Add lines 12a and 12b				- · _			. 12c	12,850.
	13a	Qualified business income deduc	tion fr	om Form 8995 or Fo	orm 8995-	. I	13a			,
	b	Exemptions for estates and trust				_	13b			
	c								. 13c	
-	14	Add lines 12c and 13c							. 14	12,850.

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

9,221.

15

	16	Tax (see instructions). Check if any from Form(s):	: <b>1</b> 🗌 8814 <b>2</b> 🗌 497	2 <b>3</b> 🗌	1	923.			
	17	Amount from Schedule 2 (Form 1040), line 3.			1	0.			
	18	Add lines 16 and 17			1	923.			
	19	Nonrefundable child tax credit or credit for other	er dependents from Schedule	8812 (Form 1040	)) 1	19			
	20	Amount from Schedule 3 (Form 1040), line 8.			2	20			
	21	Add lines 19 and 20			2	21			
	22	Subtract line 21 from line 18. If zero or less, ent	ter -0		2	923.			
	23a	Tax on income not effectively connected with from Schedule NEC (Form 1040-NR), line 15.		23a					
	b	Other taxes, including self-employment tax, fro line 21	` ,	23b					
	С	Transportation tax (see instructions)		23c					
	d	Add lines 23a through 23c			2	3d			
	24	Add lines 22 and 23d. This is your total tax .			. ▶ 2	923.			
	25	Federal income tax withheld from:							
	а	Form(s) W-2		<b>25a</b> 3	,406.				
	b	Form(s) 1099		25b					
	С	Other forms (see instructions)		25c					
	d	Add lines 25a through 25c			2	<b>5d</b> 3,406.			
	е	Form(s) 8805			2	5e			
	f	Form(s) 8288-A			2	25f			
	g	Form(s) 1042-S			2	5g			
	26	2021 estimated tax payments and amount appl				26			
	27	Reserved for future use		27					
	28	Refundable child tax credit or additional child 8812 (Form 1040)	d tax credit from Schedule	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 of	other payments and refunda	ble credits	. ▶ 3	32			
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These			<del></del>	3,406.			
Refund	34	If line 33 is more than line 24, subtract line 24 fr				2,483.			
	35a	Amount of line 34 you want refunded to you. It			▶ □ 3	5a 2,483.			
Direct deposit?	<b>▶</b> b	Routing number   1   0   1   1   0   0   0		_	Savings				
See instructions.	▶d	Account number 5 1 8 0 0 9 8							
	►e	If you want your refund check mailed to an add enter it here.  Amount of line 34 you want applied to your 20	drage outside the United State	es not shown on	page 1,				
	36	Amount of line 34 you want applied to your 20	22 estimated tax . ►	36					
Amount	37	Amount you owe. Subtract line 33 from line 24			. ▶ 3	37			
You Owe	38			38					
Third Party Designee	Do y	ou want to allow another person to disci		RS?	complete bel	ow. 🛛 No			
	Desig name		Phone no. ▶		nal identificati er (PIN)	on 🕨			
Sign Here		penalties of perjury, I declare that I have examined this they are true, correct, and complete. Declaration of pre			n of which prep	parer has any knowledge.			
Tiere	Your	signature D	Your occupation		Protection	S sent you an Identity on PIN, enter it here			
	<u> </u>		SENIOR SYS	TEM ENGINE	ER (see inst	.) 🏲 📗			
	Phone		mail address	I.S	DTII.				
Paid	Prepa	rer's name Preparer's signa	ature	Date	PTIN	Check if:			
Preparer	SYAM F	RIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA R	RAM SAGAR GUPTA TALLAM	04/05/2022	P0208270				
Use Only		name► GLOBAL TAXES LLC				(678)965-9522			
300 Omy	Firm's	address ► 2530 Pebble Creek Ln	Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN ► 30-1017196						

Form 1040-NR (2021)

Page 2

# SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

SRI SAI JYOTHSNA JAMPALA

► 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 646-25-9906

	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	3	1	
<b>2</b> a	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, tre Schedule E		5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (	)	
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (	)	
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k		8k		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8p		
Z	Other income. List type and amount ▶	8z		
9	Total other income. Add lines 8a through 8z	<u> </u>	9	
0	Combine lines 1 through 7 and 9. Enter here and on Form 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	<b>&gt;</b>		
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 <b>adjustments</b> 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

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. <b>7B</b>	

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number SRI SAI JYOTHSNA JAMPALA 646-25-9906

Enter a	amount of income und	er the appropriate rate of tax. See instructions.							
		Nature of Income			(a) 10%	<b>(b)</b> 15%	(c) 30%	(d) Othe	r (specify)
		Nature of income			(4) 1070	(5) 1070	(0) 00 /0	%	%
1	Dividends and divide	nd equivalents:							
а	Dividends paid by U.	S. corporations		1a					
b	Dividends paid by fo	reign corporations		1b					
С	Dividend equivalent p	ayments received with respect to section 871(m) transac	ctions	1c					
2	Interest:								
а	Mortgage			2a					
b	Paid by foreign corp	prations		2b					
С	Other			2c					
3	Industrial royalties (p	atents, trademarks, etc.)		3					
4	Motion picture or TV	copyright royalties		4					
5	Other royalties (copy	rights, recording, publishing, etc.)		5					
6	Real property incom-	e and natural resources royalties		6					
7	Pensions and annuit	es		7					
8	Social security benef	its		8					
9		e 18 below		9					
10	Gambling—Resident If zero or less, ente	s of Canada only. Enter net income in column (c).							
а	Winnings								
b				10c					
11	Gambling winnings	Residents of countries other than Canada.		11					
12									
12				12					
13		12 in columns (a) through (d)		13					
14		ate of tax at top of each column		14					
15		fectively connected with a U.S. trade or business. Add			rough (d) of line 14	Enter the total here a	nd on Form 1040-N	R. line 23a ► <b>15</b>	
	Tux on moonie not of	Capital Gains and Los						11, 1110 200 7	
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.		16 (a) Kind of property and description (b) D	(b) Date acqu		(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).
		descriptive details not snown below)						Subtract (u) IIOIII (e).	Subtract (e) Ironii (u).
busines	ss. Do not include a gain								
or loss on disposing of a U.S. real property interest; report these									
gains a (Form 1	nd losses on Schedule D 040).								
•	property sales or								
exchan	ges that are effectively	17 Add columns (f) and (g) of line 16					47	(	
connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.		<ul><li>17 Add columns (f) and (g) of line 16</li><li>18 Capital gain. Combine columns (f) and (g) of</li></ul>				e and on line 9 abo		er -0 <b>► 18</b>	

#### **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. ► Answer all questions.

Attachment Sequence No. **7C** 

Name sl	nown on Form 1040-NR				Your identifying number					
SRI	SAI JYOTHSNA JAMPALA		646-25-9906							
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					🗌 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	nited 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 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 v	risa type (nonimmigrant sta	tus) or U.S. immigrati	ion status?	🗌 Yes 🛛 No					
	If you answered "Yes," indicat	e the date and nature of the	e change ►							
G	List all dates you entered and	left the United States durin	g 2021. See instruction	ons.						
	Note: If you are a resident of 0	Canada or Mexico <b>AND</b> co	mmute to work in the	e United States at frequ						
	check the box for Canada or	Mexico and skip to item h	<u> </u>	$\square$ Canada	☐ Mexico					
	Date entered United States	Date departed United Stat	es D	ate entered United State						
	mm/dd/yy	mm/dd/yy		mm/dd/yy	mm/dd/yy					
Н	Give number of days (including 2019	, 2020	, and 20	021 <u>365</u>						
I	Did you file a U.S. income tax	return for any prior year?.			🗌 Yes 🔀 No					
	If "Yes," give the latest year ar	nd form number you filed <b>&gt;</b>								
J	Are you filing a return for a trus	st?			L Yes 🗵 No					
	If "Yes," did the trust have a U.S. person, or receive a control				🗌 Yes 🔲 No					
K	Did you receive total compens									
	If "Yes," did you use an alterna	ative method to determine	the source of this cor	mpensation?	🗌 Yes 🔲 No					
L	Income Exempt From Tax—If complete (1) through (3) below				tax treaty with a foreign country,					
1.	Enter the name of the country, amount of exempt income in the				claimed the treaty benefit, and the					
	<b>(a)</b> Cou	ntry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye						
	(a) <b>T</b> 1 1 <b>C</b> 1	E 4040 ND " ' =		<u> </u>						
_	(e) Total. Enter this amount of									
	Were you subject to tax in a fo		•	,	∐Yes ∐No					
3.	Are you claiming treaty benefit		•		Yes 🛚 No					
B.4	If "Yes," attach a copy of the C	Joinpetent Authority deterr	illilation letter to your	return.						
М	Check the applicable box if:	aldina on alasticis to the U.		auto la actual Se Here I C. O.	od Chakaa aa affaatiinski sassa III					
	with a U.S. trade or business u	under section 871(d). See ir	nstructions							
2.	You have made an election in States as effectively connected				al property located in the United ▶ □					