## 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

	5.5.1.25 55.7.55				
Submis	ssion Identification Number (SID)				
Taxpayer	's name	Social securi	ty numl	per	
SAI	SRINIVAS REDDY VELUGOTI	860-46	-299	8	
Spouse's	name	Spouse's soo	ial seci	urity numbe	r
Part	Tax Return Information — Tax Year Ending December 31, 2021 (Enter	vear vou a	re au	thorizina	1
	/hole dollars only on lines 1 through 5.	year year	iic au	ti lonzing.	.)
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1	4	,898.
	Total tax		2		0.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		21.
4	Amount you want refunded to you		4		21.
5	Amount you owe		5		
Part I	Taxpayer Declaration and Signature Authorization (Be sure you get and k	еер а сор	y of y	our retu	rn)
return (o to send for any o Agent to paymen authoriz paymen business taxes to persona	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, transmirmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate t, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processive confidential information necessary to answer inquiries and resolve issues related to the payment (settlement).	tter, or electrication of the ties. Treasury a cated in the ties to debit the authorizests must be processing or ayment. I fur	onic refansmis and its cax prepare entry ation. The receiff the elaboration at the receiff the acceiments.	turn origina ssion, (b) the designated paration soft to this according for revoke (ved no late ectronic pasknowledge	tor (ERO) ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of that the
	ic Funds Withdrawal Consent.  yer's PIN: check one box only				
X	l authorize GLOBAL TAXES LLC to enter or generate r	ny PIN 6	2 9	9 9 8	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	aomy
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methodelow.				
Your si	gnature ▶ Date ▶				
Spous	e's PIN: check one box only				
	I authorize to enter or generate r	nv 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	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN method below.				
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part I	II Certification and Authentication — Practitioner PIN Method Only				
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7 Don't ent	8 6	1 9 8	9
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subminents of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of In	x return (origi tting this ret	nal or urn in a	amended) accordance	
-					
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To D	o 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) 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) SAI SRINIVAS REDDY 860-46-2998 VELUGOTI Home address (number and street or rural route). If you have a P.O. box, see instructions. Apt. no. Check if: X Individual 1024 Estate or Trust 9454 E VALLEY RANCH PKWY City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code IRVING 75063

Foreign postal code

Yes

Form **1040-NR** (2021)

REV 04/04/22 PRO

BAA

X No

Foreign province/state/county

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency?

Foreign country name

Dependents						(4) 🗸	if qualifie	s for (see inst.):
(see instructions):		(1) First name	Last name	(2) Dependent's identifying number	(3) Dependent's relationship to you	Child ta	x credit	Credit for other dependents
If more than four dependents, see								
instructions and								
check here ►								
Income	1a	Wages, salaries, tips,	etc. Attach Form(s) W	/-2			1a	4,898.
Effectively	b	Scholarship and fello	wship grants. Attach F	Form(s) 1042-S or require	d statement. See instruc	tions .	1b	
Connected With U.S.	С	Total income exempted., line 1(e)		edule OI (Form 1040-NR	t), Item 1c			
Trade or	2a	Tax-exempt interest	2a	<b>b</b> Tax	xable interest		2b	
Business	3a	Qualified dividends	3a	<b>b</b> Ord	dinary dividends		3b	
	4a	IRA distributions .	4a	<b>b</b> Tax	xable amount		4b	
	5a	Pensions and annuiti	es <b>5a</b>	<b>b</b> Tax	xable amount		5b	
	6	Reserved for future u	se				6	
	7	Capital gain or (loss).	Attach Schedule D (Fo	ot required, check here	. ▶ 🗌	7		
	8	Other income from S	chedule 1 (Form 1040)	, line 10			8	
	9	Add lines 1a, 1b, 2b,	3b, 4b, 5b, 7, and 8. T	his is your <b>total effective</b>	ely connected income	🕨	9	4,898.
•	10	Adjustments to incon	ne:					
	а	From Schedule 1 (Fo	rm 1040), line 26		10a			
	b	Reserved for future u	se		10b			
	С	Scholarship and fello	wship grants excluded	1	10c			
	d	Add lines 10a and 10	c. These are your <b>tota</b>	l adjustments to income	e	▶	10d	
	11	Subtract line 10d from	m line 9. This is your <b>a</b> c	djusted gross income		▶	11	4,898.
	12a			Form 1040-NR)) or, for instructions Std. Dedn US/Ind		2,550.		
	b	Charitable contribution	ons for certain residents	s of India. See instruction	s . <b>12b</b>			
	С	Add lines 12a and 12	b				12c	12,550.
	13a	Qualified business in	come deduction from l	Form 8995 or Form 8995	-A . <b>13a</b>			
	b	Exemptions for estate	es and trusts only. See	e instructions	13b			
	С	Add lines 13a and 13	b				13c	
	14	Add lines 12c and 13	с				14	12,550.

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

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040-NR (2	2021)											Page <b>2</b>	
	16	Tax (see instructions). Check if	any from Form	(s): <b>1</b>	814 <b>2</b> [	4972	3			16		0.	
	17	Amount from Schedule 2 (Form	n 1040), line 3							17		0.	
	18	Add lines 16 and 17								18		0.	
	19	Nonrefundable child tax credit	or credit for o	ther depende	nts from Sc	hedule 8	8812 (Fo	rm 104	0)	19			
	20	Amount from Schedule 3 (Form	m 1040), line 8							20			
	21	Add lines 19 and 20								21			
	22	Subtract line 21 from line 18. I	f zero or less, e	enter -0						22		0.	
	23a	Tax on income not effectively from Schedule NEC (Form 104	,				23a						
	b	Other taxes, including self-emline 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 <b>total tax</b>						. ▶	24		0.	
	25	Federal income tax withheld fr	om:										
	а	Form(s) W-2				.	25a		21.				
	b	Form(s) 1099				.	25b						
	С	Other forms (see instructions)					25c						
	d	Add lines 25a through 25c .								25d		21.	
	е	Form(s) 8805								25e			
	f	Form(s) 8288-A								25f			
	g	Form(s) 1042-S								25g			
	26	2021 estimated tax payments				1				26			
	27	Reserved for future use					27						
	28	Refundable child tax credit c 8812 (Form 1040)	r additional cl				28						
	29	Credit for amount paid with Fo	orm 1040-C			.	29						
	30	Reserved for future use				.	30						
	31	Amount from Schedule 3 (Form	, .			_	31						
	32	Add lines 28, 29, and 31. Thes	e are your <b>tot</b> a	al other paym	nents and r	efundab	le cred	its	. •	32			
	33	Add lines 25d, 25e, 25f, 25g, 2								33		21	
Refund	34	If line 33 is more than line 24,					•	-		34		21	
	35a	Amount of line 34 you want re								35a		21.	
Direct deposit? See instructions.	►b	Routing number 0 8 1			<b>▶ c</b> Type	: 🔼 🤇	Checking	, L	Savings				
See instructions.	<b>▶</b> d	Account number 3 5 5	0 0 4 7	7   0   8   0	5   3								
	<b>▶</b> e	If you want your refund check enter it here.					s not sh	own on	page 1,	_			
	36	Amount of line 34 you want ap	plied to your	2022 estimat	ed tax .	<b>&gt;</b>	36						
Amount	37	Amount you owe. Subtract lir				pay, se	e instru	ctions	. ▶	37			
You Owe	38	Estimated tax penalty (see ins				<b>&gt;</b>	38						
Third Party Designee	Con instructions									below.	⊠ No		
	Desig name			Phone no. ▶				Person numb	nal identifi er (PIN)	cation			
Sign Here		penalties of perjury, I declare that I they are true, correct, and complete											
пеге	Your	signature		Date	Your occu	pation					nt you an I		
											PIN, enter it	t here	
	<b>7</b>			F	STUDEN	ΙΤ.			(see	inst.) ▶			
	Phone		Preparer's sig	Email addres	SS	1	Date		PTIN	Т	Chool: !f		
Paid		rer's name		-	OHDER TO			2000		2702	Check if:	mpleyed	
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	. GUPTA TA	MALLA	U4/13/	2022	P0208		Self-e		
Use Only	V									one no. (678)965-9522			
	Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm									irm's EIN ► 30-1017196			

#### **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)

SAI SRINIVAS REDDY VELUGOTI

▶ 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 860-46-2998

Enter a	amount of income und	er the	appropriate rate of tax. See instructions.			1		1	+	
	Nature of Income			(a) 10%	<b>(b)</b> 15%	(c) 30%	(d) Other	, , , , ,		
						. ,	, ,	. ,	%	%
1	Dividends and divide									
а	Dividends paid by U.	S. co	rporations		1a					
b		_	corporations		1b					
С	Dividend equivalent p	ayme	nts received with respect to section 871(m) to	ransactions	1c					
2	Interest:									
а	Mortgage				2a					
b	Paid by foreign corpo	oratio	ns		2b					
С	Other				2c					
3	Industrial royalties (p	atents	s, trademarks, etc.)		3					
4	Motion picture or TV	сору	right royalties		4					
5	Other royalties (copy	rights	, recording, publishing, etc.)		5					
6	Real property income	e and	natural resources royalties		6					
7	Pensions and annuit	ies .			7					
8	Social security benef	fits .			8					
9	Capital gain from line	e 18 b	elow		9					
10	Gambling-Resident If zero or less, ente	s of C <b>r -0</b>	anada only. Enter net income in column (c	).						
а	Winnings									
b	Losses		<u></u>		10c					
11	Gambling winnings – Note: Losses not allo	-Resid	dents of countries other than Canada.		11					
12	Other (specify) ▶									
					12					
13	Add lines 1a through	12 in	columns (a) through (d)		13					
14			f tax at top of each column		14					
15	Tax on income not ef	fectiv	ely connected with a U.S. trade or business						R, line 23a ► <b>15</b>	
			Capital Gains and	d Losses I	From	Sales or Excha	inges 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 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 gains and losses on Schedule D		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired 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).
(Form 1	•									
	property sales or ges that are effectively									
connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.									( )	
		18	Capital gain. Combine columns (f) and	(g) of line 17	7. Ente	er the net gain her	e and on line 9 abo	ove. If a loss, ente	er -0- ► <b>18</b>	

# SCHEDULE OI (Form 1040-NR)

**Other Information** 

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

► Attach to Form 1040-NR.

► Answer all questions.

Attack

OMB No. 1545-0074

2021

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service (99)

Name	shown on Form 1040-NR				Your identifying	number				
SAI	SRINIVAS REDDY VELUGOTI				860-46-29	98				
Α	Of what country or countries were you a citizen or r	national durin	g the tax y	ear? 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 (la	wful perman	ent residen	t) of the United States? .		☐ Yes	⊠ No			
D	Were you ever:									
	. A U.S. citizen?						⊠ No			
2	. A green card holder (lawful permanent resident) of					Yes	⊠ No			
	If you answer "Yes" to (1) or (2), see Pub. 519, chap									
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. F1									
F	Have you ever changed your visa type (nonimmigral of you answered "Yes," indicate the date and nature	ant status) or	U.S. immig	ration status?		☐ Yes	⊠ No			
G	List all dates you entered and left the United States									
	Note: If you are a resident of Canada or Mexico Al				en <u>t i</u> ntervals,					
	check the box for Canada or Mexico and skip to	item H		$\square$ Canada	☐ Mexico					
	Date entered United States Date departed Unite	ed States		Date entered United State			d States			
	mm/dd/yy mm/dd/yy			mm/dd/yy	m	nm/dd/yy				
			-							
ш	Give number of days (including vacation, nonworkday	vs. and partial	ا المردي المردي	ware present in the United S	Statoo during:					
Н										
ı	2019 , 2020 Did you file a U.S. income tax return for any prior you	 -ar?	, aiii	1 2021	···	X Yes	□No			
•	If "Yes," give the latest year and form number you f									
J	Are you filing a return for a trust?					Yes	⊠ No			
	If "Yes," did the trust have a U.S. or foreign owner									
	U.S. person, or receive a contribution from a U.S. p					☐ Yes	☐ No			
Κ	Did you receive total compensation of \$250,000 or	more during	the tax yea	r?		☐ Yes	⊠ No			
	If "Yes," did you use an alternative method to deter	mine the sou	rce of this	compensation?		☐ Yes	☐ No			
L	Income Exempt From Tax—If you are claiming excomplete (1) through (3) below. See Pub. 901 for m				tax treaty with	a foreign	country,			
1	<ul> <li>Enter the name of the country, the applicable tax tre amount of exempt income in the columns below. Att</li> </ul>				claimed the tre	aty benefi	t, and the			
	(a) Country	<b>(b)</b> Ta	ax treaty art	1		ount of exe				
				claimed in prior tax ye	ars income ir	current ta	x year			
	(e) Total. Enter this amount on Form 1040-NR, line	a 1c. Do not a	enter it on li	ne 1a or line 1b	<b>•</b>					
2	Were you subject to tax in a foreign country on any					Yes	No			
	<ul> <li>Are you claiming treaty benefits pursuant to a Com</li> </ul>					Yes	⊠ No			
,	If "Yes," attach a copy of the Competent Authority		-							
М	Check the applicable box if:		,							
		reat income f	rom real pr	operty located in the Unite	ed States as eff	ectively c	onnected			
	with a U.S. trade or business under section 871(d).					-	<b>▶</b> □			
2	. You have made an election in a previous year that									
	States as effectively connected with a U.S. trade or	business un	der section	871(d). See instructions.			<b>&gt;</b> _			
	anamicant Dadication Act Nation and the Instructions									